Care After Tonsils and/or Adenoids are Removed
Age 6 to Adult

Most patients take 7 to 10 days to recover. Some feel better in a few days. Others take as long as 14 days to get back to normal. **Drinking plenty of fluids will help the healing process.** Make sure you have these on hand at home a few days before surgery:
• Sports drinks such as Gatorade® and All Sport®
• Apple juice
• Jell-O
• Popsicles
• Pudding and other soft foods for the first few days

Buy new boxes of acetaminophen and ibuprofen. Out-of-date medicine may not be full strength.

**Symptoms after surgery**
Medicines given during surgery may make you feel queasy (nausea). You / your child may even throw up (vomit). This should stop within a few hours. If nausea or vomiting lasts more than 12 to 24 hours, call one of the numbers below.

Throat swelling may cause snoring and mouth breathing. In 10 to 14 days breathing should return to normal. If tonsils were very large, the voice may sound different after surgery.

A thick white scab or membrane forms on the back of the throat. This may look like two separate scabs. Sometimes scabs cover the whole back of the throat. Bad breath is normal. Scabs flake off in small pieces that can be swallowed without stomach upset or other problems. Flaking starts about 5 days after surgery and lasts about 5 more days. After scabs come off, pain may increase for a couple of days.

**Bleeding**
Minor bleeding can occur. You or your child may need to spit out small amounts of blood or bloody saliva. Gentle rinsing or gargling with ice water may help. Call one of the numbers in this handout if you see or have symptoms like these:
• There is enough blood to cause choking or coughing.
• You throw up (vomit) blood.
• Bleeding does not stop or it becomes heavy.

If bleeding persists, you will have to come to Gundersen Lutheran in La Crosse. **Do not** go to a clinic or the hospital in your community. There may not be a doctor trained to deal with bleeding in the throat. In rare cases, more surgery may be needed to control bleeding.

**Fever**
A low grade fever is normal for a few days after surgery. Medicine taken for pain should control fever as well.

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If fever rises above 102 degrees F, call one of the numbers on page 3. There may be an infection.

**Drinking**

Even if it hurts to swallow, drink plenty of fluids. **Fluids are the key to recovery.** Drink sports drinks or apple juice as often as you can. Even just a few sips each time will help. You can suck on ice chips or popsicles or eat Jell-O. Call one of the numbers listed below if you notice any signs of dehydration:

- You/your child does not pass urine more than 2 or 3 times a day.
- Urine is very dark yellow.
- Crying without shedding tears

If you/your child cannot drink enough fluids, contact the nearest clinic or emergency room. Fluids may need to be given through a needle in a vein in the arm or hand (IV fluids). If this service is not offered near you, call one of the numbers below. You may need to return to Gundersen Lutheran in La Crosse.

**Eating**

Any soft food is okay, but do not force yourself or your child to eat. Eating and chewing speed recovery. Do not worry about how much you eat as long as you are drinking enough. You /your child may eat less than normal for at least a week. There may be some weight loss. Most patients regain weight when they return to a normal diet.

**Activity**

Rest is required for healing. Become more active when you feel up to it. Even if you feel well, there is still some risk of bleeding for up to 14 days. Restrict active games and sports as needed. Most patients return to school or work in 7 to 10 days. Some return sooner. Others take a little longer to heal. School or work can resume when:

- Diet and fluid intake are normal.
- Pain relief medicine is no longer needed.
- Your or your child can sleep through the night.

**Follow-up**

Most patients do not need to see the doctor after this surgery. If you/your child have any concerns or trouble getting back to normal, please call. If you/your child had ear tubes placed or other nasal surgery, a follow-up appointment will be scheduled.

**Safe pain control**

Pain may affect how you or your child eat, drink and sleep. It may range from mild to severe and last up to 14 days. Most people have moderate to severe throat pain. You or your child may also have ear pain. This is because the same nerve goes to the throat and ears. Jaw and neck pain are likely to have been caused by the head position during surgery.

Here are ways to relieve pain:

- Put an ice collar on your or your child’s neck if your child will allow it.
- Put a humidifier in the room. Empty, clean and refill it daily.
- Take pain medicine or give your child pain medicine. A nurse will explain how much to give and how often.

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Pain relief instructions
Your child / you received ____________ for pain in the hospital at ______ (a.m. / p.m.). After you get home, give / take the first dose of pain medicine today at ______ (a.m. / p.m.)

For moderate to severe pain, oxycodone liquid or tablets may be prescribed. This is a strong narcotic. Follow dosing directions on the bottle you pick up from the pharmacy. A pharmacist will explain them to you. No refills are allowed. If you need more, contact the provider to have the prescription renewed.

Your child may not like the taste of oxycodone liquid. It is okay to mix it with a small amount of food, juice or other liquids that taste good.

If oxycodone makes your child / you very drowsy, queasy or throw up (nausea or vomiting), stop taking this medicine. **Call one of the numbers on this page right away if you / your child:**
- Have trouble breathing
- Feel too weak to get up and move around

Oxycodone can cause constipation. Watch for signs and treat this problem with diet and laxatives as needed.

For mild pain, acetaminophen or ibuprofen may provide enough relief. A nurse will show you the correct dose of each on charts in this handout. He or she will also explain how to switch back and forth with ibuprofen or acetaminophen every 3 to 4 hours.

Follow the dosing schedule in your discharge instructions. If you are told to switch back and forth, the schedule may look like this:

___ a.m. / p.m. Give / take acetaminophen
(dose _____ mL)
___ a.m. / p.m. Give / take ibuprofen
(dose _____ mL)
___ a.m. / p.m. Give / take acetaminophen
(dose _____ mL)
___ a.m. / p.m. Give / take ibuprofen
(dose _____ mL)

Adults and teenagers may use acetaminophen or ibuprofen tablets if they prefer. You may use regular strength or extra strength. Take the usual adult dose printed on the box or bottle unless your care provider has recommended a lower dose.

Contact information
8 a.m. to 5 p.m. weekdays
Otolaryngology / Head and Neck Surgery (ENT)
(608)775-2374 or (800) 362-9567, ext. 52374
Ask to speak to a nurse. He or she will consult the doctor on call. You may need to come to the clinic or Trauma and Emergency Center in La Crosse.

After hours, weekends and holidays
Telephone Nurse Advisor
(608) 775-4454 or (800) 858-1050
Ask the nurse to page the otolaryngologist on call.
**Care After Tonsils and/or Adenoids are Removed – Age 6 to Adult**

**Acetaminophen – Generic or brands like Tylenol®**

- Give a dose every 4 hours as needed.
- Give no more than 5 doses in 24 hours.
- tsp = teaspoon (Do not use a spoon you eat or cook with.)
- ml or mL = milliliter

<table>
<thead>
<tr>
<th>Weight of Child</th>
<th>Acetaminophen suspension, elixir or syrup 160 mg in 5 mL</th>
<th>Acetaminophen chewable children’s tablets 80 mg chewable tablet</th>
<th>Acetaminophen junior chewable tablets or caplets 160 mg chewable tablet or caplet</th>
</tr>
</thead>
<tbody>
<tr>
<td>6-11 pounds</td>
<td>¼ tsp 1.25 mL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12-17 pounds</td>
<td>½ tsp 2.5 mL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-24 pounds</td>
<td>¾ tsp 3.75 mL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25-35 pounds</td>
<td>1 tsp 5 mL</td>
<td>2 tablets</td>
<td></td>
</tr>
<tr>
<td>36-47 pounds</td>
<td>1½ tsp 7.5 mL</td>
<td>3 tablets</td>
<td></td>
</tr>
<tr>
<td>48-59 pounds</td>
<td>2 tsp 10 mL</td>
<td>4 tablets</td>
<td>2 caplets or tablets</td>
</tr>
<tr>
<td>60-71 pounds</td>
<td>2½ tsp 12.5 mL</td>
<td>5 tablets</td>
<td>2½ caplets or tablets</td>
</tr>
<tr>
<td>72-95 pounds</td>
<td>3 tsp 15 mL</td>
<td>6 tablets</td>
<td>3 caplets or tablets</td>
</tr>
<tr>
<td>Over 95 pounds</td>
<td>4 tsp 20 mL</td>
<td>8 tablets</td>
<td>4 caplets or tablets</td>
</tr>
</tbody>
</table>

**Look for these numbers on the package or bottle:**

160 mg per 5mL
or
Acetaminophen 160 mg in each 5mL

**Drug Facts**

**Active ingredient (in each 5 mL)**

Acetaminophen 160 mg. Fever reducer/pain reliever

**Purposes**

Fever reducer/pain reliever

**Uses** temporarily:

- Reduces fever
- Relieves minor aches and pains due to: the common cold, flu, headache, sore throat, toothache
## Ibuprofen – Generic or brands like Motrin® and Advil®

- Give a dose every 6 hours as needed to a child **6 months or older**.
- Give no more than 4 doses in 24 hours.
- tsp = teaspoon (Do not use a spoon you eat or cook with.)
- ml or mL = milliliter

<table>
<thead>
<tr>
<th>Weight of Child</th>
<th>Ibuprofen infant drops 50 mg in 1.25 mL syringe</th>
<th>Ibuprofen suspension 100 mg in 5 mL</th>
<th>Ibuprofen chewable children’s tablets 50 mg chewable tablet</th>
<th>Ibuprofen junior chewable tablets or caplets 100 mg caplet or chewable tablet</th>
</tr>
</thead>
<tbody>
<tr>
<td>12-17 pounds</td>
<td>1.25 mL</td>
<td>½ tsp 2.5 mL</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>18-23 pounds</td>
<td>1.875 mL</td>
<td>¾ tsp 3.75 mL</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>24-35 pounds</td>
<td>2.5 mL</td>
<td>1 tsp 5 mL</td>
<td>2 tablets</td>
<td>---</td>
</tr>
<tr>
<td>36-47 pounds</td>
<td>---</td>
<td>1½ tsp 7.5 mL</td>
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</tbody>
</table>

**Medicine Spoon**

Marked in milliliters (mL or ml)

**Syringe**

Marked in teaspoons (tsp)