



Patient name: \_\_\_\_\_ Weight \_\_\_\_\_

Tylenol (acetaminophen) 160mg/5mL Take \_\_\_\_\_ mL by mouth every 4-6 hours as needed for pain

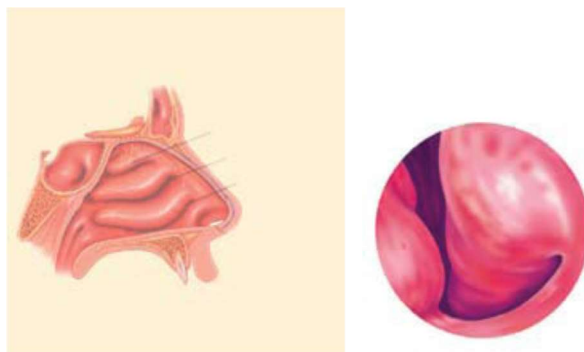
Motrin (ibuprofen) 100mg/5mL Take \_\_\_\_\_ mL by mouth every 6 hours as needed for pain

9900 Broadway Ext, Ste #200  
Oklahoma City, OK 73114  
Teléfono: 405.608.8833  
Fax: 405.608.8818

## **TURBINATES AND TURBINATE REDUCTION**

### **WHAT ARE TURBINATES?**

The turbinates are scroll like structures located in the nasal cavity. The purpose of the turbinate is to humidify and filter the air that is inhaled through the nose. Turbinate size (especially the larger inferior turbinate) will change dependent on numerous factors. They may become very swollen in response to allergies, infections, or other sources of inflammation. For example, when a cold causes severe congestion, it is usually the turbinates that swell.



### **TREATMENT OF ENLARGED NASAL TURBINATES**

- Enlarged turbinates are often the cause of chronic nasal congestion and nasal obstruction. Primary medical treatment usually consists of topical nasal steroids. Antihistamines, decongestants or other anti-allergy medications may also be used.
- Even after the underlying problem (such as allergies) is addressed, the turbinate enlargement may remain. For patients who do not respond to medical treatment, or those who find compliance with the medical therapy difficult, surgical intervention may be beneficial.

### **SURGICAL OPTIONS FOR TURBINATE REDUCTION**

- Turbinate reductions are done using various methods including submucosal debulking of the excess tissue versus complete reduction of the turbinate. This procedure will take place in the operating room under general anesthesia
- In most cases, it is important that the turbinate not be removed completely because its removal will may result in a very dry, crusty nose that is unable to adequately humidify and warm the air. Occasionally, turbinate tissue will re-grow after turbinate surgery and the procedure may need to be repeated. This is preferable to the situation of totally removing the turbinate.

## **RISKS**

As with any surgery, there are some associated risks.

- Your child will receive general anesthesia for the procedure. There is a small risk of complication occurring due to the anesthesia.
- Mild and in some cases moderate discomfort for generally 1 week. Crusting of the nasal cavity and healing will continue for 2-4 weeks.

## **THE DAY OF SURGERY....**

The surgery is performed in the operating room. The procedure will take approximately 20-40 minutes. Following the operation, your child will go to the pediatric recovery room (PACU or Post-Anesthesia Care Unit). You can be with your child at this time. Some children are disoriented and upset as they come out of the anesthesia. This is normal. Your child will be ready to go home once they are drinking and acting like themselves again. This normally takes an hour.

## **WHAT TO EXPECT FOLLOWING SURGERY...**

- Your child will have no limitations in diet following the surgery. They may eat or drink anything that they want.
- If your child is having postoperative pain, ensure that they are taking Tylenol and Motrin regularly as recommended. In older children – 6 + oral narcotics may be needed.
- Your child may be prescribed an ointment to put in the nose after surgery.
- It is recommended the child start using saline sinus rinses within 48 hours after surgery.
- Nasal congestion is to be expected for up to 2-4 weeks following surgery.
- Most children are feeling back to themselves within a week or 2 after surgery. Some of the common complaints following the surgery some mild nasal discomfort, oozing nasal drainage for 1-2 weeks, and occasional bleeding from the nose. Please contact our office if your child experiences a gushing nosebleed or for any bleeds uncontrolled by a full 10-15 minutes of pressure to the anterior (soft) portion of the nose.
- Your child may resume using nasal steroid spray (Flonase, Nasonex, Nasacort, Rhinocort, QNasl, etc.) about 4 days after surgery.
- There are no limitations in activity. Most children will return to school and other extracurricular activities within a week or two following the operation.

## **FOLLOW-UP**

We would like to see your child about 3 months after surgery to see how he/she is doing.

## **CONTACT US:**

- On weekdays from 8:00 AM to 4:30 PM, call our office (405) 608-8833.
- In the evening after 4:30 PM and on weekends, and holidays, call the after-hours answering service (405) 330-4420. The doctor is available for emergencies 24 hours a day, 7 days a week.

