

- The main concern following tonsillectomy is the risk of bleeding. A small amount of streaky red blood in the mucus is not of any great concern but if your child were to spit up a tablespoon of bright red blood any time up to two weeks following surgery you will need to present to your nearest emergency department
- After 2 ½ weeks vigorous activity such as sport can be commenced

Doctor's follow-up appointment



**Kareena
Private Hospital**

Part of Ramsay Health Care

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People caring for people.



Information
for Parents

Tonsillectomy



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Day of Operation

You can expect:

- Nursing staff to check that all details including name, next of kin and consent are correct for your child
- Your child's observations to be taken and recorded. This includes: Pulse, Temperature, Oxygen saturations, height and weight
- Your child to wear two identification bands, one on their wrist and one on their ankle
- To meet the Anaesthetist before going into the operating theatre
- Your child to be taken to the operating theatre on their own bed. Only one parent/carer is permitted to go into the operating theatre with your child. You will be required to wear scrubs, which will be supplied to you. These can be worn over the top of your regular clothes
- To be notified when one parent/carer may attend recovery to be with your child. This is often a noisy area with the sound of monitors and other patients waking up
- You may be asked to comfort your child either from a chair or in the bed with your child. Your child may be receiving pain management and oxygen via a mask. This is all normal
- Your child may wake up confused following their anaesthetic, this is normal and will only last for a short period
- You may ask the Recovery nurse any questions you may have and the nurse will endeavour to answer them or source answers for you from the relevant doctors
- You will accompany your child back to the ward when your child is comfortable and fully awake

Post Operation

You can expect:

- Your child to arrive back in their room and nursing staff will check all their observations. This will be attended every 30mins for four hours and then hourly overnight
- To have dinner and breakfast supplied to the parent/carer staying overnight with your child. Only one parent/carer will be required to stay overnight. Please indicate which parent will be staying prior to your child's procedure

- Your child to have a cannula (a soft plastic tube) inserted into a vein during the operation and to have intravenous fluids running throughout their hospital stay. This is not painful but can feel uncomfortable for your child
- Nausea and vomiting is common following tonsillectomy, if your child vomits, please inform nursing staff so they can check for signs of bleeding
- Your child to be encouraged to drink fluids regularly as this allows the tonsil bed to remain moist
- Your child to be offered a soft cool diet – Please avoid red and brown coloured foods as this can look like blood in mucous/vomit
- Pain relief is important following a tonsillectomy. Nursing staff will administer regular pain relief, either Paracetamol or Paracetamol with Codeine, until your child is discharged
- A bed/ recliner will be supplied for you overnight

Instructions for care at home

- Your child will be discharged at 9:30am. Before you leave make sure you have your discharge letter, follow-up details, medications and all personal belongings
- A whitish slough over the tonsil bed is normal for the first week after surgery
- Ear aches are common following a tonsillectomy and is due to referred pain from the throat to the ears
- Throat pain may get worse for the first 3–4 days. It can be moderate to severe up to 10 days following surgery
- The latest research indicates that antibiotics are not routinely necessary following tonsillectomy and therefore usually are not prescribed
- Continue using regular analgesia, either Paracetamol or Paracetamol with Codeine. Non-steroidal anti-inflammatory medications such as aspirin or Ibuprofen are to be avoided as they can upset platelet function and cause bleeding
- A soft diet is recommended for two weeks. This includes soft soggy cereal, scrambled eggs, ice cream, yogurt, soft fruits, soft pasta and soft sandwiches
- Encourage regular fluid intake to avoid dehydration and potential readmission to hospital