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Post-Operative Instructions for Uvulopalatopharyngoplasty

This procedure requires about two weeks for recovery depending on age. The secrets to a quick recovery are: adequate hydration, good pain control and communication with the office for any problems or questions.

What to Expect:

- 1. **Sore Throat** This usually starts to get bad after the second day and may persist for 7-10 days. It is worse in the mornings because of dryness from not drinking in the night. A humidifier sometimes helps with this. Remember good pain control is imperative so take your pain medication every 4 hours if needed. (Alternate the Tylenol with Codeine or Lortab with the Hydrocodone Cream as both are narcotics and cannot be taken at the same time. The Tetracaine Lollipop is a topical anesthetic which will numb the area and is not a narcotic and therefore can be taken with any of the other medications)
- 2. **Fever** This usually occurs at night during the first few post-operative days. It is important to encourage fluids as this helps with fever. It is acceptable to use Tylenol or Motrin to reduce the fever. (Be aware that Tylenol must be alternated with the Lortab or Tylenol with Codeine to not give too much Acetaminophen)
- 3. **Nasal Speech** This can occur after the first few days after surgery as the palate learns to close the space previously occupied by the tonsils and/or adenoids.
- 4. **Ear Ache** This occurs more commonly in adults around post-operative days 3-5. This occurs as referred pain or "sympathy" pain from the throat because the nerves to the tonsil also give sensation to the ear. (If this is severe, call because I can prescribe a drop to numb the ear canal and ear drum.)
- 5. **Bad Breath** This usually occurs after the first day or two and persists for about a week because of the scab where the tonsil was removed. It is okay to gently brush the teeth, but the smell will not resolve until the scabs have fallen off. If you look into the back of the throat, you will notice the scabs are a white, gray, yellow color and may even look like pus, but this is the normal appearance for a scab in the oral cavity.
- 6. **Constipation** The combination of pain medication and reduced diet and activity can lead to post-operative constipation. We recommend an over the counter Miralax and/or glycerin suppository(children) or Dulcolax suppository (adults). If this does not help, please call.

Diet:

Start with a clear liquid diet (Water; Juices-apple and grape, not orange, grapefruit, or lemonade; Sports Drinks – 10-K, Gatorade, Powerade; 7-UP or Sprite; Popsicles, or Jell-O) to prevent nausea and/or vomiting. All drinks and foods should be lukewarm or cool, not hot. Everyone advances differently, but I recommend advancing to puddings, ice cream, milkshakes, smoothies, and then to soft foods like grits, oatmeal, yogurt, mashed potatoes, scrambled eggs, applesauce, well cooked rice and gravy, and pastas/noodles. **No scratchy foods for 2 full weeks**. (i.e. – chips, popcorn, pretzels, crackers, cookies.)

Activity:

No heavy activity or exercising is recommended for 2 weeks following surgery. Please do not drive if taking narcotics.

Bleeding:

A little blood tinged sputum is normal after surgery, anything more, please call.

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Post-Operative Pain Management for Adults

You will be prescribed either a liquid or a pill analgesic. Typically pain medication that is taken by mouth has a faster onset of action with a stronger dosage of medication, however sometimes after oral cavity procedures, patients have difficulty swallowing pain medication by mouth. Thus we offer the following options:

TETRACINE LOLLIPOP

This lollipop releases a topical anesthetic that numbs everything it comes in contact with. The advantage of this is that it can soothe the oral cavity allowing for relief that sometimes makes swallowing oral medications more manageable. Because of the numbing agent some patients find the numbing sensation unpleasant. It can also be dissolved in a small amount of liquid, swished around the oral cavity and swallowed. The lollipop CAN be used with either the liquid or gel pain relief medication because it is not a narcotic.

TOPICAL NARCOTIC PAIN GEL

This can be applied to thin parts of skin like the wrist, neck or back of knees and is absorbed directly into the blood steam through the skin. Some patients are unable to tolerate oral pain medications because of oral cavity pain or nausea. Advantages of the gel include pain relief without swallowing medication, an option for pain control if vomiting and for use to help ease pain if patient is sleeping. The disadvantage is that many patients feel it is not as strong as the liquid narcotic. It also contains no acetaminophen or ibuprofen so these medications can be given with it. **Do not give the oral narcotic pain medication and the narcotic gel together as it can cause an overdose.**Read all compounded medication directions well.

All medications should be used as directed Please read the instructions about how much and how often medications can be administered. We cannot stress enough how much hydration helps with pain control! The transdermal nausea medication can be given with any of the above medications as well.

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Post-Operative Pain Management for Children

For children, we like to use as little narcotic as possible. We recommend only using the liquid narcotic in twelve hour intervals. Use the tetracaine lollipop for severe/break through pain. Transdermal narcotics can be used if the child is too sore to swallow the liquid narcotic and may be given along with children's Tylenol or Motrin and with the tetracaine lollipop. Transdermal nausea medication can be given with any of the previously mentioned medications.

Home medication management

- Hycet elixir when awake in AM the every 12 hours
- Children's Motrin 3 hours after Lortab elixir
- Children's Tylenol and hydrocodone gel 3 hours after the Motrin
- Children's Motrin 3 hours after Tylenol and Hydrocodone gel
- Repeat process with the Hycet elixir 3 hours after Motrin

It is not necessary to wake child during the night for oral medications, but the hydrocodone gel can be used without waking the child to ease morning discomfort.

Typically pain medication that is taken by mouth has a faster onset of action with a stronger dosage of medication. If having trouble taking medications by mouth, we offer the following options:

TETRACINE LOLLIPOP

This lollipop releases a topical anesthetic that numbs everything it comes in contact with. The advantage of this is that it can soothe the oral cavity allowing for relief that sometimes makes swallowing oral medications more manageable. Because of the numbing agent some patients find the numbing sensation unpleasant. It can also be dissolved in a small amount of liquid, swished around the oral cavity and swallowed. The lollipop CAN be used with either the liquid or gel pain relief medication because it is not a narcotic.

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