



A Department of Lakes Region General Hospital

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SEPTAL AND TURBINATE SURGERY

Location

The nasal septum separates the left and right side of the nose. It is made up of cartilage and bone covered with nasal lining tissue. It extends from the tip of the nose to the level of the back of the roof of the mouth (within the nose).

Turbinates are bones and nasal lining tissue which shrink and swell constantly. They are located on the outer side of the nasal cavity. Between turbinates, the openings (ostia) of the sinuses are located.

Problems

Septal deviation, or curvature, can cause nasal obstruction. It can also change airflow causing sinus infections, crustings, bleeding, or excess mucus retention. Overgrowth of turbinates can cause nasal blockage and affect sinus function.

Surgery

Correction of septal cartilage and/or bony abnormalities allows for more normal nasal airflow. Removal of bony abnormalities or part of the lining covering the turbinates allows more room for airflow.

Complications

Nasal stuffiness - related to blood crusts in the nose and swelling. This improves over the first 2-3 weeks post-surgery.

Infection - rarely occurs but can lead to cartilage damage. If nose gets swollen and red and painful after any stents are removed, you should call the office.

Septal perforation - if nasal lining is damaged or does not heal properly, there can be a hole between the left and right side of the nose. This could possibly cause persisting nasal bleeding or crusting.

Bleeding - can occur anytime up to 2 weeks post-surgery. Patients should hold front of nose closed between 2 fingers and slightly tilt the nose toward the ground and hold for 10 minutes. If bleeding persists, call me. Chance of bleeding is low, about 5%, but is increased if turbinate surgery is done.

Patient Instruction Sheet

(Please keep and review immediately after surgery)

Post-Operatively

1. Take medicines as prescribed.
2. **NO** nose blowing until after the first post-op visit.
3. No stooping or bending over. No lifting objects over 15lbs until after the first post-op visit, keep head elevated.
4. Take **NO** aspirin, Advil, Motrin or other pain medicines except those prescribed or Tylenol. These other medicines promote bleeding.
5. May use nasal drip pad for as short or long as you desire.
6. Use saline nasal spray every 1 or 2 hours: begin the day after surgery when no more bright red blood is draining. This is available over the counter.
7. The patient should schedule a follow up appointment for 1 week after surgery.

If bleeding does occur:

- sit up straight in a chair
 - tilt your nose slightly down toward the floor
 - pinch the front of your nose closed so that no air or blood can come out. Continue this for **10** minutes without stopping. If you continue to have bleeding at this time, call the office immediately.
8. Patients should sit near upright for several days post surgery- a recliner would be ideal. This decreases chances for bleeding and helps reduce congestion somewhat.