



Septoplasty

Self-care and what to expect after your operation

This handout explains what to expect and self-care after septoplasty surgery.

Activity

- We encourage you to do your normal activities after your surgery, such as walking or moving about the house or office.
- Keep your head elevated as much as possible. For the first 2 nights after your surgery, put several pillows under your head, or sleep in a recliner chair if that is more comfortable.
- Avoid strenuous activity, including aerobics, heavy lifting, pushing, or pulling.
- Avoid blowing your nose for 2 weeks after surgery. Sneeze with your mouth open to relieve pressure.

Eating

- You may eat your normal foods.

Nasal Care

- You may have some oozing from your nose for the first 48 hours.
- Place a rolled-up gauze bandage under your nose. Change it as needed.
- Your nasal splints will stay in place for the next 7 days.
- To help remove debris and lessen crusting and dryness:
 - Use saline nasal spray in each nostril 6 to 10 times a day.
 - Try using a bedside humidifier.
- Gently clean each nostril 2 times a day. Use the tip of a cotton swab (Q-tip) soaked in hydrogen peroxide.
- After cleaning, apply a small amount of antibiotic ointment (such as Bacitracin, Polysporin, or Bactorban) to the outermost part of each nostril to prevent dryness.

Questions?

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff are also available to help.

For questions about your care, call the **Otolaryngology Clinic Nurse Advice Line, 206-598-7535**. Leave a message with the best time to reach you.

Otolaryngology Clinic 206-598-4022

For urgent issues, ask for page a nurse to be paged.

After hours, call 206-598-6190 and ask for the resident on-call for the Otolaryngology Service to be paged.

Managing Pain

- Facial discomfort is usually caused by pressure from the splints.
- You may only need the prescription pain medicine for the first 24 to 48 hours after surgery. Take this medicine exactly as prescribed.
- You can also take acetaminophen (Tylenol) for pain. Alternate this with the prescription pain medicine.
- Avoid aspirin, or products that contain aspirin products (such as Alka Seltzer), ibuprofen (Advil, Motrin), and other anti-inflammatories for 1 week.
- Pain medicine can cause constipation. To prevent constipation, take stool softeners (you can buy these at a drugstore without a prescription) and drink plenty of fluids.

When to Call Your Doctor

Call your doctor if you have:

- Fever higher than 100°F (37.8°C)
- Pain that is not controlled by your pain medicine
- Bright red bleeding that will not stop
- Signs of infection at your incision such as redness, swelling, warmth, or foul-smelling drainage
- Problems with the pain medicine, such as nausea and vomiting, rash or itching, or difficulty passing urine

Call 9-1-1 right away or go to the emergency room if you have severe reactions to your medicines such as:

- Difficulty breathing
- Hives
- A lot of bleeding

Follow-Up Visit

Your follow-up visit for splint removal will be about 1 week after your surgery. Your appointment is:

Date: _____ Time: _____

UW Medicine

UNIVERSITY OF WASHINGTON
MEDICAL CENTER

**Otolaryngology – Head and
Neck Surgery Center**

Box 356161

1959 N.E. Pacific St. Seattle, WA 98195
206-598-4022