Nasal Septum Repair: After Your Surgery

Your Kaiser Permanente Care Instructions

Nasal septum repair is surgery to fix the wall of cartilage inside your nose that divides your nostrils. The surgery is called septoplasty. Doctors usually do the surgery through the inside of the nose. In most cases, no cut is made on the outside of the nose.

You may have some swelling of your nose, upper lip, or cheeks, or around your eyes after nasal surgery. You may have some bruises around your nose and eyes. Your nose may be sore and will bleed. This may last for several days after surgery.

The tip of your nose and your upper lip and gums may be numb. Feeling will return in a few weeks to a few months. Your sense of smell may not be as good after surgery. But it will improve and will often return to normal in 1 to 2 months.

You will have a drip pad under your nose to collect mucus and blood. Change it only when it bleeds through. You may have to do this every hour for 24 hours after surgery.

You will probably be able to return to work or school in about 1 week and to your normal routine in about 3 weeks. But this varies with your job and how much surgery you had. Most people recover fully in 1 to 2 months.

You will have to visit your doctor or other health care professional after your surgery. Your doctor or other health care professional will check to see that your nose is healing well.

This care sheet gives you a general idea about how long it will take for you to recover. But each person recovers at a different pace. Follow the steps below to get better as quickly as possible.
You can expect to feel better and stronger each day. You may get tired easily or have less energy than usual. Rest as you need to, but staying comfortably active will help you heal.

How can you care for yourself at home?

Activity

- Arrange for extra help at home after surgery, especially if you live alone or provide care for another person.
- For your safety, you must not drive until you are no longer taking pain medicines and you can move and react easily.
- Rest when you feel tired. Getting enough sleep will help you recover.
- Be as active as you comfortably can. Do a little more each day. Moving boosts blood flow and helps prevent pneumonia, blood clots, and constipation. Simply walking is excellent activity.
- Avoid strenuous activities for about 1 week. Examples of these might include bicycle riding, jogging, weight lifting, or aerobic exercise.
- Do not bend over or lift more than 10 pounds for 1 week after surgery.
- Use lukewarm, not hot water, when you shower or take baths.
- You will probably need to take 1 week off from work. This depends on the type of work you do and how you feel.

Diet

- You can return to your normal diet when you feel well. If your stomach is upset, try bland, low-fat foods like plain rice, broiled chicken, toast, and yogurt.
- Avoid alcohol while you are taking prescription pain medicine.
- Many people are constipated after surgery. This can be due to the pain medicine and a lack of activity. Be sure you get plenty of fluids, and take a fiber supplement such as methylcellulose (Citrucel) or psyllium (Metamucil) or a stool softener like docusate (Colace).

Medicine

- Take pain medicine as needed, following the directions carefully. Do not wait until you are in severe pain. You will get better results if you take it sooner.
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- Talk to your doctor or other health care professional before starting any new medicine, including an over-the-counter medicine.
- Do not take aspirin, aspirin-containing medicines, or anti-inflammatory medicines such as ibuprofen (Advil, Motrin) or naproxen (Aleve) for 3 weeks following surgery unless your doctor or other health care professional says it is okay.
- Do NOT take more than one pain medicine that contains acetaminophen (Tylenol) at the same time. Many over-the-counter medicines, as well as the commonly prescribed pain medicines hydrocodone with acetaminophen (Vicodin, Norco) and oxycodone and acetaminophen (Percocet), contain Tylenol. Too much Tylenol is dangerous. Check the labels carefully.
- To avoid an upset stomach, take your pain pills with food.
- After surgery, your doctor will tell you when you can take your regular medicines again. Ask your doctor or other health care professional if you do not know when to restart your regular medicines after surgery.
- If you are given antibiotics, be sure to finish them all. Do not stop taking them just because you feel better.

**Nose care**

- Ice and elevation can help prevent swelling and soreness after surgery. Put ice or a cold pack on your nose for 10 to 15 minutes at a time. Put a thin cloth between the ice and your skin. This is especially important for the first 1 to 2 days, and may greatly reduce your need for pain pills. Do not lie flat. Raise your head with 3 or 4 pillows. This can reduce swelling. Try to sleep on your back during the month after surgery. You can also sleep in a reclining chair.
- You will have a drip pad under your nose to collect blood. Change it only when it has bled through. You may have to do this every hour for 24 hours after surgery. When bleeding stops, you can remove it.
- If you have packing in your nose, leave it in. Your doctor or other health care professional will take it out.

**Other instructions**

- Do not blow your nose for 1 week after surgery.
- Do not put anything into your nose.
- If you must sneeze, open your mouth and sneeze naturally.
• Keep your mouth clean. Rinse your mouth with salt water or an alcohol-free mouthwash after each meal and before bedtime.

• After any packing is removed, use saline (saltwater) nasal washes to help keep your nasal passages open and wash out mucus and bacteria. You can buy saline nose drops at a grocery store or drugstore. Or you can make your own at home by adding 1 teaspoon of salt and 1 teaspoon of baking soda to 2 cups of water. If you make your own, fill a bulb syringe with the solution, insert the tip into your nostril, and squeeze gently. Blow your nose.

• You can wear your glasses when you wish. Do not wear contacts until the day after the surgery.

Follow-up care is a key part of your treatment and safety. As a partner in your health care, you can do things like keep all scheduled visits, be sure you know the results of all tests and labs ordered as part of your care, and keep an up-to-date personal list of the medicines you are taking. Know how to contact us between visits, and call your doctor or other health care professional if you have signs that you are having problems.

When should you call 911?

If you think you are experiencing a medical emergency, call 911 immediately or seek other emergency services. Examples of symptoms that may be an emergency include:

• You pass out (lose consciousness).
• You have chest pain.

When should you call your doctor or other health care professional?

• The drip pad soaks through with blood and needs to be changed more than every 15 minutes.
• You have a fever with a stiff neck or a severe headache.
• You are sensitive to light, or you feel very sleepy or confused.
• You have pain that does not get better after you take pain pills.
• You have a fever over 100.4°F.
• You have double or blurred vision, cannot close your eyes, or have eye pain.
• You are not feeling better day by day.
• You have any problems with your medicine.
How can you learn more about nasal septum repair?


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