Instructions after Nose Surgery

You have just had surgery for the inside of your nose. The procedure is likely to help improve your breathing and decrease congestion and mucus buildup.

At this time you have a small folded piece of packing in each side of your nose. There is a long piece of black thread holding the packing together. You can see the end of the thread taped to your nose. It has been determined that you would rather have a small amount of packing associated with the steady, bloody nasal drainage oozing into the gauze roll beneath your nose, RATHER THAN a large amount of packing, no bloody discharge and a tremendous amount of pain. While the packing is in place, you will not be able to breathe through your nose at all. When you swallow food, liquid or saliva it will “feel funny” and your ears will plug momentarily. This is expected and will stop when the packing has been removed.

You will need to change the gauze roll under your nose each time it gets soaked with blood and/or mucus.

Approximately 24-48 hours after completion of your surgery, you will remove the packing from your nose. (On occasion, your surgeon may choose 48 – 72 hours.) On other occasions your surgeon will pull the packing out. Simply untape the black thread from your nose and gently pull threads from their respective sides. Pull firmly but slowly. Expect resistance (some extra care and coaxing may be needed before removing your packing).

Expect bloody mucus to run from your nose when the packing is out. This will be gross. Try Lamaze before pulling. This should last for only a few minutes. If, for some reason, you cannot get the packing out, call your surgeon.

You may want to wear a rolled piece of gauze beneath your nose for a few hours after the packing has been removed. You are not expected to have either “black eyes” or a swollen nose at any point after surgery. It goes without saying that if at any point after surgery there is voluminous bleeding from your nose such that you (or a family member) become concerned, go immediately to the emergency room.

Do not take aspirin or ibuprofen containing products for pain 10 days before or 10 days after your operation. These include Motrin, Nuprin, Advil, or Naprosyn. These promote bleeding. If you are not sure if your pain medication contains aspirin or ibuprofen, please call us.

If your doctor advises, use the hypertonic saline irrigation (below) twice or thrice daily until you come for your office visit. This will diminish excessive nasal crusting. Please call the office today for your appointment.

- During the first 24 hours, when the packing is still in, it is normal to experience quite a bit of gagging.
- Once you are allowed to blow your nose (after two weeks), it is likely large clots will pass.
- You may want to protect your pillow and other bedding during the first few nights because you can have bloody drainage during your sleep.
- Having your favorite hard candies or mints on hand will relieve the bad taste and odor in your mouth.
- Dryness of the lips is normal. Having lip therapy or balm on hand will comfort this condition.
- You may spritz your mouth with fresh water while the packing is in place.
- Occasional numbness of the front teeth and pain in the front teeth.
Nasal Irrigation


The Benefits
When you rinse your nose with this salt water and baking soda mixture, it washes crusts and other debris from your nose.

Salty water pulls fluid out of the swollen membranes of your nose. This decongests the nose and improves airflow. Not only does this make breathing easier, but it helps open the sinus passages.

Studies show that this mixture of concentrated salt water and baking soda (bicarbonate) helps the nose work better and moves mucus out of the nose faster.

The Recipe
Carefully clean and rinse a 1-quart glass jar. Fill the clean jar with tap water or bottled water. You do not have to boil the water.

Add 2 to 3 heaping teaspoons of “pickling/canning” [or Kosher] salt. Do not use table salt, which has unwanted additives. You can ask for pickling/canning salt at the grocery store.

Add 1 rounded teaspoon of baking soda (pure bicarbonate).

Stir or shake before each use. Store at room temperature. After a week, pour out any mixture that is left over and make a new recipe.

If the mixture seems too strong, use less salt – try 1-1/2 to 2 teaspoons of salt. For children, it is best to start with a weaker salt water mixture. Then gradually increase to using 2 to 3 heaping teaspoons of salt, or whatever the child will accept.
Part 2. How to Rinse the Nose with Salt Water (Buffered Hypertonic Irrigation)

The Instructions
Plan to rinse the nose with the salt water mixture 2 to 3 times each day. Make the salt water and baking soda mixture according to the recipe. You will need a bulb/ear syringe, a large medical syringe (30mL), or a Water Pik (better with an ENT-Sol bottle).

Pour some salt water mixture into a clean bowl. Many people like to warm the salt water in a microwave oven to about body temperature. Be sure that the salt water is not hot.

Fill the syringe with salt water from the bowl. Do not put your used syringe back into the jar, because that will contaminate your salt water.

[Chin on your chest] Stand over the sink or in the shower and squirt the salt water into each side of your nose. Aim the stream toward the back of your head, not the top of your head. This lets you spit some of the salt water out of your mouth. It will not hurt if you swallow a little.

Most people notice a mild burning feeling the first few times they use the salt water mixture. This usually goes away in a few days. Please call our office if you have any problems or questions.

For Young Children
You can put salt water into a small commercial spray container, like a nasal steroid spray bottle. Squirt it many times into each side of the nose. Do not force your child to lie down. This rinse is easier to do when sitting or standing.

If you have a Nasal Steroid
If you have a nasal steroid, always use the salt water mixture first, then use your nasal steroid spray (like Flonase, Vancenase, Beconase, Nasacort). The steroid works better when it is sprayed into the nasal membranes that have been cleaned and decongested by the salt water. Then the steroid medicine will reach deeper into the nose and sinuses.

[Please do this three or four times a day for four months]

From the University of Missouri School of Medicine, Columbia, Missouri; J. Parsons Otolaryngologic Clinics of North America Volume 29, Number 1, February 1994