

Tonsillectomy and Adenoidectomy

Information for parents and/or caregivers

Welcome to the Southern Adelaide Local Health Network. This information sheet aims to answer any questions you may have about your child having their tonsils and adenoids removed.

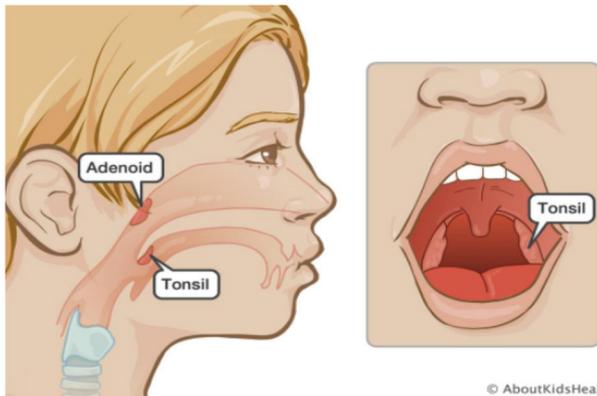
What is a Tonsillectomy and Adenoidectomy?

Tonsillectomy (removal of the tonsils) and adenoidectomy (removal of the adenoids) are two different operations which are often needed at the same time because they can cause:

- Problems with breathing and sleeping usually at night if the tonsils or adenoids are big
- Difficulty swallowing if the tonsils are big
- Frequent infection or abscess of the tonsils

A tonsillectomy and adenoidectomy done together is also commonly referred to as a T&A.

Tonsils and adenoids



Tonsils and adenoids are made of lymphatic tissue and are part of the body's defense system against infection. They may become enlarged after repeated infections.

Before surgery

You will be given instructions from your doctor or nurse on fasting before the surgery. It's important to follow these directions.

Your child will have a general anaesthetic, which will put them to sleep before the surgery. The surgeon, anaesthetist (doctor who puts your child to sleep during the operation) and nurses will explain all the procedures to you before they begin. If you have any questions or anything is unclear, ask staff to explain as many times as needed.

During surgery

The surgeon removes the tonsils and adenoids through your child's mouth. This means there are no incisions (cuts) needed on the outside of the skin.

T&A surgery usually takes about 30 minutes, but your child will be away from you for up to two hours. This time is used for preparing your child for surgery, and allows for transfer and recovery time.

After surgery

When the surgery is over, you will be called to your child's bedside, to be there when they wake up. Some children take longer than others to wake up, and they may cry, be confused, feel sick or vomit.

Most children will need to stay in hospital overnight, and one parent or caregiver can stay with them. Your child will be monitored overnight, and sent home when their doctor is happy that they are recovering well.

Length of hospital stay?

- If your child is under 5 years old, your child will stay in hospital for one night and go home the next morning if well. Before your child goes home in the morning they must have had something to eat and drink at breakfast time.
- If your child is over 5, you may be discharged home if:
 - The operation was in the morning and your child is well 6 hours after the operation
 - If you live within 15kms to Flinders Medical Centre
 - If you have telephone access and a car at home

Please ask nursing staff if you have any questions or concerns.

If your family lives in the country please ask your child's surgeon how long your child will need to stay near Adelaide after leaving the hospital.

Eating and Drinking

Children need to be encouraged to drink lots of fluid for the next 10 days to prevent dehydration. They should not have hot drinks, citrus juices, or fizzy drinks. Your child should eat a normal diet it is best to avoid spicy foods, anything that is acidic (such as oranges and tomatoes), and anything that is hot. Soft foods are allowed but 'rougher' foods help remove 'slough' away from where the tonsils were and may prevent infection. School age children may chew gum between meals as this can help with swallowing.

Nausea and vomiting

Do not worry if your child vomits once or twice after leaving hospital. If they vomit or feel sick, stop giving food for about an hour, then try a small amount of food like toast. Give more as your child can manage without feeling sick.

If your child keeps vomiting, please seek help by either calling your child's surgeon, G.P or your nearest Emergency Department.

Bleeding

There is a risk of bleeding in the first week, and for up to two weeks after the operation.

Return to your nearest **Emergency Department *immediately*** if your child has any signs of bleeding:

- Vomiting or spitting fresh blood (bright red),
- Nose bleeds

Mouth care

Your child may have bad breath for a few days. They should clean their teeth as normal. White 'slough' on the tonsil bed at the back of the throat is normal and will go away after a week.

Activity

Your child should rest for a few days and will need to stay home from school or childcare for one to two weeks. During this time your child should avoid:

- rough play and sporting activities including swimming
- plane travel

Pain relief

Having tonsils taken out can be very painful. Medicines to treat discomfort will be needed for at least 7 to 10 days. Pain medicines work better when given all the time rather than waiting for your child's pain to get worse. As your child gets better and their body heals they will need less pain medicine and it can be given when needed. If your child does not like the taste of the pain medicine, you may try another brand with a different flavour that your child likes. The dose for their weight is on the label on the bottle.

All children should be given both paracetamol and ibuprofen **regularly**:

- paracetamol for at least six days after their operation, four times a day (e.g. 7am, 12pm, 5pm and 10pm)
- Ibuprofen for four days after their operation three times a day (e.g. 8am, 2pm and 10pm). In rare cases, there might be a medical reason that your child does not receive ibuprofen.

Some children may have stronger pain medicines recommended. Special care must be taken with these medicines. Medicines containing codeine or aspirin must not be given to any child after a tonsil operation as they can have serious side effects. Please check with your doctor or pharmacist if you are unsure if a medicine contains codeine or aspirin.

Stop giving strong pain medicines and contact the emergency department of your nearest hospital if your child is very sleepy or having trouble staying awake

If your child has any of the following problems or you have any concerns after your child's discharge please telephone your private surgeon, local GP or Emergency Department

- Repeated vomiting with or without fresh blood
- Constant higher than normal temperature
- Worse throat / ear pain not relieved by regular pain medicine
- 'Flat' or 'sick' looking
- Dehydration with signs such as dry mouth, dark urine, sunken eyes, dry or loose skin

In an emergency call an ambulance on 000 or take your child to the nearest doctor or hospital

Follow up appointments

You will either be given an appointment time for a check-up with the surgeon or a phone call from the ENT Nurse after the operation.

For more information

If you have any concerns after your child's discharge please see your family doctor or the Flinders Medical Centre Ears Nose and Throat registrar on call.

Patient Label

Pain relief record after having tonsils out

		Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Day 8	Day 9	Day 10
Date		_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Paracetamol	7 AM	<input type="checkbox"/>									
	12 PM	<input type="checkbox"/>									
	5 PM	<input type="checkbox"/>									
	10 PM	<input type="checkbox"/>									
		SHOULD TAKE				CAN TAKE					
Ibuprofen	8 AM	<input type="checkbox"/>									
	2 PM	<input type="checkbox"/>									
	10 PM	<input type="checkbox"/>									

Other pain relief given:

You can use this table to record the doses and times that pain relievers are given (tick once given)
 Give paracetamol for 6 days and ibuprofen for 4 days. After this, they can be given when needed.
 The times are suggestions only. Paracetamol can be given every 4 - 6 hours and ibuprofen every 6 - 8 hours.

Adapted from

Tonsillectomy and Adenoidectomy (T&A) The Royal Children's Hospital: Melbourne
 Tonsillectomy and Adenoidectomy: The Women's and Children's health network
 Patient education: Tonsillectomy and adenoidectomy in children (the basics) UptoDate

For more information

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This document has been reviewed and endorsed by consumers.