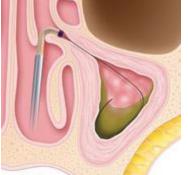
Endoscopic Sinus Surgery (ESS) and Balloon Sinuplasty

Endoscopic sinus surgery along with balloon sinuplasty is a surgical procedure used to remove blockages and restore drainage and ventilation of the sinuses for recurring or chronic sinus infections. The endoscope, a thin lighted tube with an attached digital camera, is inserted into the nose for visual examination and navigation. Microsurgical instruments are then used to remove abnormal or unhealthy tissue and to improve function. Endoscopic sinus surgery does not require external incisions or intranasal packing and most procedures are performed as an outpatient.

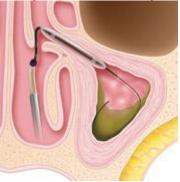
Step 1. A balloon catheter is inserted into the inflamed sinus.



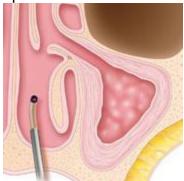
Step 3. Saline is sprayed into the inflamed sinus to flush out infection and obtain culture.



Step 2. The balloon is inflated to expand the sinus opening.



Step 4. The balloon is then removed, leaving the sinuses open.



** 1-2 days prior to your surgery, you will be contacted by the Surgery center regarding arrival time. **

**You will also be contacted by the Registered Nurse a few days prior to your surgery regarding medications to be taken <u>after</u> your procedure. You will be prescribed medicated rinses called Mupirocin (topical antibiotic) and Budesonide (topical steroid) through a pharmacy called Health Dimensions. They will contact you regarding billing/delivery information. Health Dimensions: 248-489-1573. You will also be prescribed a broad spectrum oral antibiotic, Methylprednisolone (oral steroid), and Norco (pain medication.)

ENDOSCOPIC SINUS SURGERY (ESS) AND BALLOON SINUPLASTY <u>PRE-OPERATIVE INSTRUCTIONS</u>

<u>DIET</u>

It is very important for the safety of surgery, to have an empty stomach at the time anesthesia is administered. Please follow the instructions given to you during your pre-operative phone call. A good general rule of thumb is to eat or drink nothing after 10 pm on the night before surgery.

INFANTS TO AGE 6

- May have formula if completed 6 hours prior to arrival time
- May have breast milk if completed 4 hours prior to arrival time
- May have clear liquids (water, pedialyte, clear apple juice) if completed 2 hours prior to arrival time

MEDICATIONS

Since aspirin and aspirin containing products can cause increased bleeding in some people, it is important to avoid these medications 2 weeks prior to surgery, unless otherwise advised by your physician.

AVOID THESE MEDICATIONS BEFORE SURGERY

- Alka-Seltzer, Anacin, Ascpritin, BC, Bufferin, Cheracol Capsules, Cope, Coricidin, Darvon Compound, Firoinal, Dristan, Empirin, Excedrin, Midol, Sine-Aid, Sine-Off, Percodan, Naprosyn, Motrin, Clinoril, Stendin, Tramancin, Vanquish and many others
- If you are in doubt about a medication, please call our office.
- You will be advised on other meds to stop when you receive your pre-operative nurse call from Beaumont about 2 weeks before surgery.
- It is very important that you provide information about ALL medications you take, including vitamins, herbal supplements, diet pills and over the counter medications.

POST-OPERATIVE INSTRUCTIONS

MEDICATIONS

- You will be prescribed a broad spectrum antibiotic, methylprednisolone (steroid) and pain medication. You will also be prescribed medicated rinses, Mupirocin (topical antibiotic) and Budesonide (topical steroid) through a pharmacy called Health Dimensions. They will contact you regarding billing and delivery information. These won't be taken until after your 1st post-operative appointment
- 2. You should use Saline nasal spray (Simply Saline or Ocean Spray) to keep the nose clean and moist.
- 3. NO ASPIRIN products should be taken until advised by your physician.

NOSE CARE AFTER SURGERY

- You should keep your HEAD ELEVATED as much as possible, even while sleeping, until otherwise advised at your first post-operative visit.
- You will begin rinsing with saline water the day after surgery. It is preferred for you to use the Neil Med bottle with salt water as instructed by your physician.
- You will begin rinsing with Mupirocin and Budesonide the DAY AFTER YOUR 1ST POST-OPERATIVE APPOINTMENT. Fill the Neil Med bottle to the dotted line with distilled water and warm in the microwave. Dissolve both medications and mix well. DO NOT put medications in the microwave. Leaning over a sink, gently squeeze the bottle in through 1 nostril and out the other. This is possible if you breathe with your mouth open and slightly pant, closing off the soft palate and preventing the rinse from going down the back of your throat. Rinse with ½ bottle in each nostril twice daily.

NORMAL FINDINGS AFTER SURGERY

- A nasal pad will be placed under your nose during surgery. You may soak through a gauze pad 4 times in an hour. If you are bleeding more than this, please call the office.
- > You may feel general fatigue for a few days due to the anesthesia.
- > You may experience nasal congestion/stuffiness.
- You should blow your nose with both sides open at the same time. When you do this or the rinses, you may see old blood (dark-colored) or mucous.
- > You may experience headaches or facial discomfort for the first few days.

LIMITATIONS AFTER SURGERY

- You should avoid bending over and strenuous activity for about 10 days to allow sufficient healing.
- Walking is good to help decrease nasal swelling; however, frequently getting up and down can increase nasal swelling.
- Usually, patients are able to return to work when feeling better, in about 5-7 days, unless your work involves heavy manual labor
- YOU NEED TO FOLLOW UP IN THE OFFICE 5-7 DAYS AFTER SURGERY. THE PHYSICIAN WILL INFORM YOU OF UPDATED ACTIVITY GUIDELINES.

COMPLICATIONS AFTER SURGERY

If excessive nose bleeding occurs, sit up and apply an ice pack to the nose. If it continues or gets worse, call the office.

IF YOU HAVE ANY FURTHER CONCERNS, PLEASE CALL OUR OFFICE.586-799-1212