

FUNCTIONAL ENDOSCOPIC SINUS SURGERY

A PATIENT'S GUIDE

What is functional endoscopic sinus surgery (FESS)?

The sinuses are air filled spaces within your skull with very small openings for drainage. Infection and swelling may cause these openings to become blocked. Sinus surgery is performed to open the drainage pathways. A small telescope and other instruments are passed through the nostrils to view and open the sinus drainage pathways. The term "endoscopic" refers to the use of small cameras that allow all of the surgery to be performed through the nostrils, without the need for any skin incisions.

What are the risks of functional endoscopic sinus surgery?

As with any surgical procedure, FESS has associated risks. Although the chance of a complication occurring are very small, it is important that you understand the potential complications and ask your surgeon about any concerns you may have. These risks may include: Bleeding, recurrence of disease, spinal fluid leak, injury to tear duct visual problems, change to sense of smell/taste, swelling or bruising around the eye.

What restrictions will I have during the postoperative recovery period?

- Do not blow your nose for 1 week following surgery. You may sniff back gently to clear your nose. Nasal irrigations, using saline to rinse the inside of the nose, can also help clear mucous.
- No strenuous activity for one week after surgery. This includes bending over to pick things up (OK to bend at the knees, with your head up), straining, or lifting more than 20 lbs. Light walking and normal household activities are acceptable immediately after surgery. You may resume exercise at 50% intensity after one week, and full intensity at two weeks. You may drive the day after surgery if you are not requiring opioid medication.
- You should plan to take one week off from work and ideally have a half-day planned for your first day back.
- Do not fly without your doctor's clearance for 7 days after surgery.

What should I expect before surgery?

- DO NOT TAKE THE FOLLOWING MEDICATIONS FOR AT LEAST 7 DAYS PRIOR TO SURGERY:
 aspirin, ibuprofen (Motrin/Advil), naproxen (Aleve), other non-steroidal anti-inflammatories
 (NSAIDS), vitamin E (multivitamin is OK), gingko biloba, garlic (tablets), and ginseng. These
 medications can thin the blood and create excessive bleeding. Tylenol is safe and may be taken
 anytime up to the day of surgery. St. John's Wort should also be avoided for 2 weeks prior to
 surgery because of possible interactions with anesthesia medications. If you take the blood
 thinner Coumadin, you must discuss this with your surgeon so the medication can be
 discontinued before surgery and restarted appropriately.
- If you smoke, you MUST stop smoking for at least 2 weeks prior to surgery, and at least four weeks after surgery. Smoking can contribute to scarring, poor healing, and failure of the operation.
- It is important that you personally inform your PCP that you are planning to have surgery. If you have underlying medical conditions, your primary care physician may help to clear you medically for surgery. Most of the necessary pre-operative testing will be performed at UC Davis during your preoperative visit. This takes place approximately 1 month prior to your surgery.

What should I expect during surgery?

- In most cases, your procedure will be performed under general anesthesia. The procedure generally lasts 1-3 hours, but may vary for any given patient. The time that the patient will be away from their family members travelling to the operating room, going to sleep, awakening from anesthesia, and recovering from the procedure will add several hours.
 - Septoplasty: The nasal septum is the cartilage that divides the two sides of the nose. Some patients have a crooked nasal septum ("deviated septum") that may need to be straightened at the time of surgery to allow your surgeon to access the sinuses or improve breathing through the nasal passages. If it performed through a small incision hidden inside the nose.
 - <u>Turbinate reduction</u>: The turbinates are structures within your nose that act to clean, warm and humidify the air. There are three on either side of the nose. When patients have problems with nasal obstruction, the bottom turbinate on one of both sides may be reduced in size by removing some of the thin bone and soft tissue that makes up the turbinate.

What should I expect after surgery?

- After your surgery you will spend approximately 2-3 hours in the recovery area. Approximately 1
 hour after you arrive in the recovery area, a family member or friend should be able to visit with
 you. Most patients feel well enough to go home the same day.
- Most patients do not require nasal packing.
- You can expect mild bleeding for 1-2 days after surgery and a general sense of fatigue for 1-2 weeks after surgery.
- Pain can generally be controlled with alternating doses of Acetaminophen and Ibuprofen. Some patients may need narcotic (prescription) medication for pain. Please try to avoid taking narcotic medications if your pain can be controlled with Acetaminophen and Ibuprofen.
- You may eat a regular diet.
- You will have return visits to the ENT clinic after surgery. Please refer to "Postoperative Care Instructions" handout attached for further information about these appointments.
- Post-operative visits are usually scheduled at the time of surgery scheduling, however if you have any questions about your post-operative visit you can contact our clinic
- You should plan to take one week off from work and ideally have a half-day planned for your first day back.
- Call our office if you experience any of the following:
 - o Any visual changes or marked swelling of the eyes
 - Severe headache or neck stiffness
 - Severe diarrhea
 - o Brisk bleeding
 - o Fever higher than 101°F

Your surgeon is committed to providing you with the highest level of care in a comfortable and caring environment. We want you to have all of your questions answered and provide you with a complete understanding of your sinus condition and treatment plan. Please feel free to ask questions about any aspect of your care.