



**ENT SOUTH WEST**  
where individuals matter

# Tonsillectomy

## patient information leaflet

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The Consultant has suggested that you be admitted to The Ridgeway Hospital for a Tonsillectomy.

The following information has been compiled to provide you with a better understanding of your procedure/operation, your stay in hospital and your recovery after discharge. It is only a guide as each case is individual. If you have concerns or anxieties after reading this information, do not hesitate to contact your Consultant or a senior member of the nursing staff. Contact numbers can be found at the end of the information leaflet. Please read this leaflet in conjunction with the Coming into Hospital leaflet.

**PLEASE NOTE, ASPIRIN IS NOT RECOMMENDED FOR ANY PATIENT FOLLOWING TONSILLECTOMY**

### What is a tonsillectomy?

It is the removal of two lumps of tissue, called the tonsils. They are situated on both sides of the throat. They trap bacteria and viruses and help to fight infections. The Surgeon removes the tonsils through your mouth by cutting the tissue of the throat which holds the tonsils in place, and then snares the tonsil, removing it completely. The Surgeon then cauterises (heat seals) the blood vessels and sometimes ties the blood vessels with a stitch. These stitches drop off as the area heals and are swallowed with no ill effect.

It is possible to remove the tonsils using a laser, however this type of procedure is not undertaken at The Ridgeway Hospital.

Removing the tonsils does not reduce the body's ability to fight infection, other tissues in the body produce enough antibodies to fight infection.

The operation will last about 40 minutes.

### Why do I need a Tonsillectomy?

Your tonsils are enlarged and may eventually shrink on their own, however your Consultant Surgeon has recommended a tonsillectomy because you have one of the following.

- Recurrent sore throats or recurrent throat infections
- Enlarged tonsils which make it difficult to breath, particularly when asleep (obstructive sleep apnoea)
- Difficulty in swallowing

### Are there any alternatives?

It can be assumed that as your Consultant has suggested surgical intervention, that all alternatives have been reviewed. However, each individual is different, so it is essential that you discuss your individual needs with your Consultant.

## What happens prior to admission into hospital?

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4-14 days prior to your admission date you may be asked to attend the Pre-Admission Screening Clinic. This appointment will last for about 1-1.5 hours. The nurse will take a comprehensive nursing history and perform investigations such as blood samples, urine samples and ECGs (heart tracing). Please bring any medication you are taking to the Pre-Admission Clinic and details of your next of kin. The nurse will also be able to give you some information about your operation so please write down any questions you may have.

## What type of anaesthetic can I expect?

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A Tonsillectomy is performed under a general anaesthetic. A general anaesthetic is usually given by injection into the back of the hand. The patient is anaesthetised (asleep) until the operation is finished. Some patients report a sore throat following this method of anaesthetic which can be due to a tube being passed down into the throat to maintain the airway whilst the patient is anaesthetised.

## Starvation

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You will have been requested to follow a period of starvation prior to your anaesthetic and specific times will have been given to you alongside your admission details. A diagram follows to help ensure that you follow the correct instructions regarding starvation.

Admission time	Last food	Last fluid
Admitted for morning surgery	12 midnight	Water only 05.00
Admitted for afternoon surgery	07.30	Water only 10.30

The Anaesthetist requests that the fluids taken between your last food intake and fluid intake be still water only and that you do not chew 'gum' or suck boiled sweets on the day of surgery.

## What happens when I come into hospital?

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If you have not been invited to attend the Pre-Admission Clinic a member of the nursing team will ask you some information about yourself, which will assist in the planning of your care for the time you are in hospital and the period of recovery after you go home. They will also give you a detailed explanation of everything that will happen before, during and after the operation.

Your temperature, pulse and blood pressure will be taken to check that they are within acceptable limits before your operation. You may also be asked to provide a specimen of urine if you have not been pre-admitted.

Most patients undergoing surgery will be requested to wear a pair of anti-thrombosis stockings which will be issued on admission and you are expected to wear the stockings, night and day, for the duration of your stay.

Some patients may require an area on their thigh to be shaved also to accommodate the diathermy pad which will be placed on them in Theatre. Please do not attempt to shave the operation site at home - a member of the nursing team will be able to inform you of the preparations necessary for you to undergo surgery.

The Consultant will visit you before the operation to ask you to sign a consent form and mark the operation site if appropriate. Please pay special attention to the leaflet 'Don't Get Sore, Get Moving'. If necessary, a member of the nursing team will provide a 'special' mattress in order to minimise the risk of you getting any sore spots on your skin.

## Tonsillectomy

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Your Consultant Anaesthetist will see you to discuss any worries you may have about the anaesthetic. He/she will ask for details about your general health and about any anaesthetics you have had in the past. Some Anaesthetists ask for cream to be applied to the back of both hands to numb the skin as a small needle is inserted in a vein in the anaesthetic room. Please ask if you would like this.

A plastic bracelet with your name and hospital number will be placed on your wrist and you will be asked to put on a hospital gown and paper pants. Prior to leaving the Ward, a pre-operative checklist will be completed to ensure you have been correctly prepared for the operation.

Patients usually walk to Theatre, however if this is difficult you can be pushed in the bed.

## What can I expect when I wake-up after my Tonsillectomy?

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Initially you will be monitored in the 'recovery' area attached to Theatre and once your condition is satisfactory we will transfer you to the Ward.

You will be able to drink small amounts of water, (avoid fizzy drinks and squash to begin with) and eat a light meal when you feel ready.

You will have a sore throat after the operation, there are pain relieving medicines that may be given as necessary.

Once the effects of the anaesthetic have worn off sufficiently, you will be able to move around gently, (e.g. to the bathroom). When you get up the first time, a member of the nursing staff or a visitor should be with you, as you may feel unsteady or 'whoosy'.

### **What can you do when at home?**

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Most patients feel tired, lethargic and insecure when they get home, getting frustrated as they cannot do the things that they want to do – this is normal and largely related to the after effects of the anaesthetic. It is normal to experience both good and bad days. You may suffer from flu like symptoms, lack of concentration and enthusiasm. Even the smallest task can be exhausting whilst the body is trying to recover from surgery. It is essential that you listen to what your body is trying to tell you – i.e. rest if you feel tired. Some people can feel slightly depressed, tearful and very emotional. These symptoms are normal and will usually resolve within a short time. As a guideline, allow yourself a 2 week period of rest, walking short distances, resting or going back to bed for short periods throughout the day, and being reliant on family and friends to provide meals, do the shopping and general household chores.

For a few days after the operation, you will have a sore throat. Paracetamol syrup/soluble tablets can be given to ease the pain – following the directions on the bottle. It is very important for you to eat and drink as normally as possible, as doing so will aid the healing process. It helps if the Paracetamol is taken a half an hour before meals.

Crunchy foods are encouraged these days as it removes the 'scabs' that form in your throat, just like a graze, reducing the risk of infection and rare bleeding.

It is very important to avoid people with coughs and colds for two weeks after the operation as infection can occur. Therefore, you need to be off work for this time. Relatives and friend with colds need to stay away. Once you are feeling up to it, you can go out. However, places with lots of people should be avoided.

If you suspect you have an infection, i.e. running a temperature, feeling generally unwell or have more pain in the throat, then contact The Ridgeway Hospital Helpline as antibiotics may be required.

The risk of bleeding is very small indeed, but if you do start to bleed from the tonsil site you need to act quickly.

Signs of bleeding include fresh blood in and around the mouth, restlessness, frequent swallowing and vomiting of brown fluid. If any of these symptoms should occur, remain calm, and call The Ridgeway Hospital Helpline.

You will either be asked to come to The Ridgeway Hospital or to go to the Great Western Hospital, Accident and Emergency. In whichever case, bring with you any 'evidence' of bleeding, i.e. used tissues.

### **When can I resume driving?**

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Extensive research indicates that the decision to recommence driving relies on the patient assessing when they are fit enough to drive. Before recommencing the activity of driving it is advisable to contact your car insurance company to inform them of your recent surgery, ensuring you are still legally insured to drive. Remember that your movement and strength must be able to cope with an emergency stop as well as normal driving. Also power of concentration does not return to normal immediately. Beginning with short distances would be advisable and gradually increase the distance over a period of time.

### **When can I go back to work?**

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The time at which you return to work depends on both the type of operation you have had and what your job is. Most people aim to go back to work after 2 weeks following a Tonsillectomy. If you require a sick certificate to send to your employer, you can self certificate for your first working week. Longer periods of sickness do require a certificate so please ensure you ask a member of the nursing team about this before you leave The Ridgeway Hospital.

#### **PLEASE NOTE**

**If you are taking Aspirin or any Aspirin based products such as Ibuprofen before surgery, please inform your Consultant or the pre-admission nurse as it may be necessary to stop taking this medication before surgery.**

**Unless otherwise instructed, do not take Aspirin, drugs containing Aspirin, Ibuprofen or non steroidal anti-inflammatory drugs for four weeks following surgery, as these may cause bleeding.**

### Will I need to see the Consultant again?

You will be invited to attend the Outpatient Department for an appointment with your Consultant about 6 weeks after surgery.

### Should I expect any complications?

Complications are rare following Tonsillectomy, however, the following information is to inform you of some such complications. This list should not be seen as exhaustive and should be discussed with your Consultant. Complications can occur with any operation. Operations involving a general anaesthetic procedure carry the risk of complications such as chest infection, thrombosis, pulmonary embolism (clots in the lung), stroke, wound infection and allergic reaction. All of these complications total no more than 1%.

### If I have any questions, whom do I ask?

Many people are concerned at the length of time it takes to get over an operation, but time, nature and a bit of determination are usually effective. Do not be afraid to ask for advice however small your worry may seem. A few words can often save a lot of anxiety.

It is essential to remember that the information provided in this leaflet is a guide only. Should you experience any complications or have any concerns relating to your procedure/operation, then do not hesitate to contact The Ridgeway Hospital Helpline:

#### **DAY CARE UNIT PATIENTS**

01793 814848 Ext 320

(Monday to Friday, 0800 to 1900 hours)

#### **INPATIENTS AND OUT OF HOURS**

01793 814848 Ext 283

The Ridgeway Hospital staff wish you a comfortable and trouble-free recovery.