Adenoidectomy information sheet

The adenoids are part of a ring of glandular tissue encircling the back of the throat. They are located high in the throat behind the nose and soft palate and, unlike tonsils, are not visible through the mouth without special instruments or X-rays. Chronic infection and/or enlargement of adenoid tissue can adversely affect such nearby structures as the Eustachian tube – the passage between the middle ear and the back of the nose, resulting in frequent or chronic ear infections (associated with earaches and hearing loss). Enlarged adenoids may also cause blockage of the back of the nose. This obstruction of breathing may cause excessive snoring, sleep apnea and disturbed sleep patterns which may manifest as behavioral problems in children. Some believe chronic mouth breathing from enlarged tonsils and/or adenoids may cause malformation of the face and improper alignment of the teeth. Removal of adenoid tissue may be recommended to alleviate the above described problems.

Surgery is generally done as a “day care” or ambulatory surgery at the hospital. Prior to surgery, you should avoid aspirin, motrin, advil, ibuprofen or similar types of medication for at least two weeks. Tylenol is fine. It is important to inform us of any problems that you (or your family) may have regarding possible bleeding disorders or anesthesia difficulties. Labs tests will be done about 2 weeks prior to surgery. Nothing should be taken by mouth after midnight the night before surgery.

The operation is performed through the mouth. The patient will stay in the hospital for approximately four hours after the operation for observation. Following adenoidectomy, there is normally only a mild to moderate amount of discomfort. It is important to drink a lot of fluid. There are no restrictions on diet, but avoid spicy foods.

For pain control, take Tylenol or Motrin (or similar medications) for one week after surgery. This is important to prevent bleeding. If you notice bleeding from the nose or mouth which doesn’t completely stop within 5-10 minutes, you should call the office. You should plan on 3 days of missed school/work after surgery. Vigorous exertion should be avoided for about two weeks. Work/school excuses will be provided if necessary. A postoperative visit will be scheduled.