

# Instructions after Tonsillectomy and Adenoidectomy

---

## What can I expect after my child's surgery?

Your child will have pain for up to 10-14 days after the removal of their tonsils and adenoids. You may notice throat pain, ear pain, neck pain or stiffness, headache, and jaw, tongue, or teeth pain. Because of the pain, children may show these symptoms:

- Crying
- Pulling at their ears
- Refusing to chew
- Refusing to drink, or drinking very small amounts
- Drooling
- Not being willing to open their mouth fully

After surgery, white patches or “wet scabs” will form where the tonsils were. This is normal and not a sign of infection. These scabs usually fall off around 5-7 days after surgery, and your child's pain may get worse around this time.

## What medications can I give my child?

The best medications to start with are over-the-counter pain medications like acetaminophen (Tylenol®) and ibuprofen (Motrin® or Advil®).

- If your child is prescribed both Tylenol® and Motrin®, the best way to control their pain is to give them **both medications together every 6 hours**.
- For the first 48 hours after surgery, give your child over-the-counter medication around-the-clock (on a set schedule through the day and night, and not “only as needed”).

Oxycodone is an opioid medication that may be prescribed as a backup medication for **breakthrough pain**. Breakthrough pain is severe pain that is not helped by over-the-counter medications and non-medication techniques.

Opioids can treat pain, but they also have risks. If your child is using an opioid, you should still use acetaminophen and ibuprofen. This will allow you to use as little of the opioid as possible. You can find more information on pain control after surgery online at: [www.michigan-open.org/pediatrics](http://www.michigan-open.org/pediatrics)

- **Oxycodone should always be locked in a safe place and managed by a responsible parent or caregiver.**
- These types of medications should only be used by the specific person and condition it was prescribed for. Once your child no longer needs oxycodone, dispose of (get rid of) any extra medication safely. More information on this is included at the end of this handout.

### **What are other ways to help with my child's pain?**

- Chewing on soft food items or soft candies or gum can decrease ear pain and jaw pain or stiffness.
- Encourage them to drink often and stay well-hydrated.
- Use normal saline spray in your child's nose to help with stuffiness and to keep the scabs moist.
- Use a humidifier at night while your child sleeps.
- Put a warm or cold compress on their neck or head.
- Use distraction techniques including mindfulness, family time and activities, and special or favorite foods.

### **What can my child eat or drink after surgery?**

- It's very important for your child to drink fluids after surgery. Start offering them liquids, especially liquids with calories (like Gatorade®, Pedialyte®, vitaminwater®, etc.), immediately after surgery.
- Your child can use a straw to drink. Pacifiers and bottles are also okay.

- Your child can start eating soft food items whenever your child feels up to it. Examples include mac and cheese, applesauce, yogurt, pudding, and mashed potatoes.
- Acidic foods (like oranges or tomatoes) might make your child's throat hurt, but they are okay if your child wants them. Salty, hard, or crunchy foods may cause them discomfort. Milk and dairy products are okay.
- Your child's diet will slowly go back to normal, and you can add foods whenever they are comfortable.

### **What kinds of activity can my child do after surgery?**

- The full recovery period for this surgery is 2 weeks. During that time, your child may or may not feel like being active. Let your child to choose the level of activity they are comfortable with.
- It is okay for your child to go back to school as soon as they feel well enough and they don't need medication to control their pain. This is typically about 7 days after surgery.
- Your child should avoid swimming, contact sports (like football, hockey, etc.), strenuous activity (activities that make them breathe hard or get their heart rate up), and travel for 2 weeks after surgery.

### **Will my child have follow-up appointments after surgery?**

There is no need to schedule a follow-up appointment after their surgery unless you or your surgeon requests one, or if your child has concerning symptoms.

### **When should I contact the clinic or doctor on call?**

Contact the clinic or your doctor if your child has any of these symptoms after their surgery:

- Dehydration
  - They refuse to drink or eat popsicles or Jell-O

- They have not urinated (peed) 2-3 times in 24 hours
- They have no tears when they cry
- They're very weak or tired
- Neck stiffness with their head tilted to one side
- Vomiting more than 2 times a day
- Fever over 102 °F for 24 hours that doesn't come down after taking Tylenol® and Motrin®
- Uncontrolled pain

**If your child has bleeding, go to the nearest Emergency Room immediately.**

Bleeding may look like:

- Bright red bleeding or clots from their mouth
- Throwing up bright red blood (more than 1 teaspoon or the size of a quarter)

Bleeding at the surgical site can occur after surgery. Most commonly it happens within the first 24 hours or between 7-10 days after surgery when the scabs fall off. A small amount of blood in their spit is okay, and you should not be worried by this. If you notice over a teaspoon of bright red blood, you should bring your child to the Emergency Department so we can check on them.

### **What is the contact information?**

- On Monday through Friday from 8:00 AM - 5:00 PM, call the ENT (ear, nose, and throat) office at (734) 936-5730.
- After 5:00 PM or on weekends and holidays, call (734) 936-6267 and ask the operator to page the Otolaryngology resident on call.

### **Other common questions after surgery:**

**Should I be concerned if my child has a stiff neck?**

It is common for children to complain of a stiff neck after tonsillectomy and adenoidectomy. Use a warm heating pad or cold pack (whichever is most comfortable to them) to help. You can give them ibuprofen and acetaminophen on a schedule while they have neck pain.

- Your child should be able to move their head up and down and side to side. If their chin is tilted and they can't move their head into a straight position, call the office immediately.

### **Why does my child cough after surgery?**

Their body will produce large amounts of mucus (thick fluid) in the back of their throat for 2 weeks after surgery, causing them to cough. They may cough more when they lie down at night. We recommend that your child sleep with their head raised up with 2 pillows. Use salt water nasal spray every 2-3 hours during the day to thin the mucus. Drinking lots of liquids can also help thin mucus.

### **Why does my child's voice sound funny?**

Your child's voice may sound "nasal" (like it's coming from their nose) or high pitched and breathy. This can happen when the adenoids are removed, which leads to increased airflow through the nose. It can take some time for the soft palate (the tissue on the roof of their mouth that helps them make sounds and form words) to learn to work differently with adenoid removal. Their voice will usually return to normal around 3 months after surgery.

- Liquids can come out of their nose after surgery for the same reason. Call us if these symptoms last more than 3 months after surgery.

### **How will I know if my child is constipated?**

It is normal for children not to have a bowel movement for several days after surgery. However, opioid medications like oxycodone can cause constipation

(having fewer or difficult bowel movements). Symptoms of constipation include belly pain, nausea, swelling, and a belly that is hard to the touch.

- If your child feels the need to have a bowel movement but they can't, we recommend a glycerin suppository (you can buy this over-the-counter from a pharmacy). If there is no bowel movement after giving them the suppository (a medication you insert into their anus), contact your pediatrician for recommendations or use a laxative.
- To help with constipation, we also recommend having them drink more and increasing the amount of fiber in their diet. Drinking milk of magnesia, prune juice, or Sunsweet Plum Smart® juice every evening can help prevent and treat constipation.

#### **Is it normal for my child to have bad breath?**

Yes, it is common for children to have breath that smells bad for 2-4 weeks after surgery.

#### **How do I dispose (get rid) of leftover medication?**

**Old medications are the main cause of poisonings in children younger than age 5.** If you received a prescription from the University of Michigan pharmacy on the day of surgery, they should also have given you an at-home drug disposal bag. As soon as your child is no longer using their prescription medication, use the bag to dispose of the extra medication at home. If you did not receive a drug disposal bag, find more information on how and where to safely dispose of old medications at: [bit.ly/MM-MedDisposal](http://bit.ly/MM-MedDisposal)

Disclaimer: This document contains information and/or instructional materials developed by University of Michigan (U-M) Health for the typical patient with your condition. It may include links to online content that was not created by U-M Health and for which U-M Health does not assume responsibility. It does not replace medical advice from your health care provider because your experience may differ from that of the typical patient. Talk to your health care provider if you have any questions about this document, your condition or your treatment plan.

Authors: Lindsey Frazier, RN, Aurora Stienstra, RN, Elaine Turner, RN, Karen Cooper, MD  
Reviewers: Alexis Panches, MSN RN, Marc Thorne, MD MPH FACS  
Edited by: Brittany Batell, MPH MSW

Patient Education by [U-M Health](#) is licensed under a [Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International Public License](#). Last Revised 10/2023