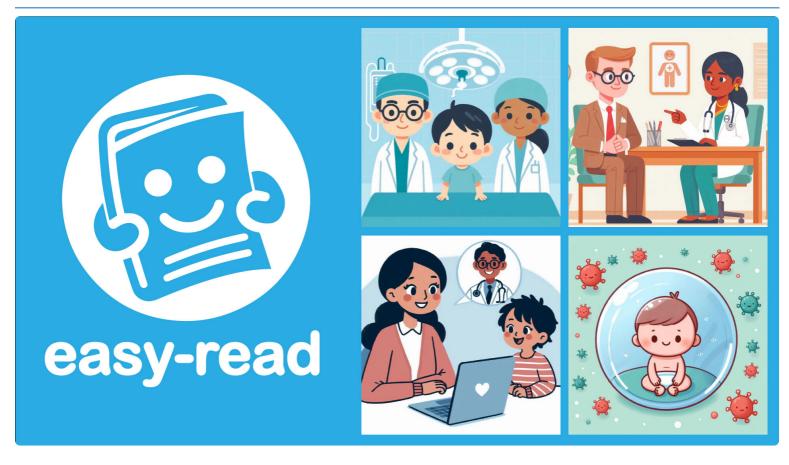




Adenoid Surgery (2 of 3) - The operation and the risks



This leaflet is part of the EASY-READ series for people with learning difficulties.

The original leaflet is available here.

Adenoid Surgery

PART 2 OF 3

The operation and the risks



Click on each of the following questions to discover the answers.

BEFORE YOUR CHILD'S OPERATION: WHAT TO KNOW?



Let the surgeon know if your child gets sick within a week of the operation.

The operation will need to be delayed.



Tell the surgeon if your child has any unusual bleeding or bruising.

Tell the surgeon if there is a family history of unusual bleeding or bruising.

THE SURGERY: WHAT TO KNOW?



The adenoids can be removed through the mouth or nose.

There are no cuts or stitches on the outside.

The surgery takes about 10-15 minutes.



The surgery is done under general anesthesia, so your child will be asleep.



Anesthesia is a special medicine that makes you fall asleep.

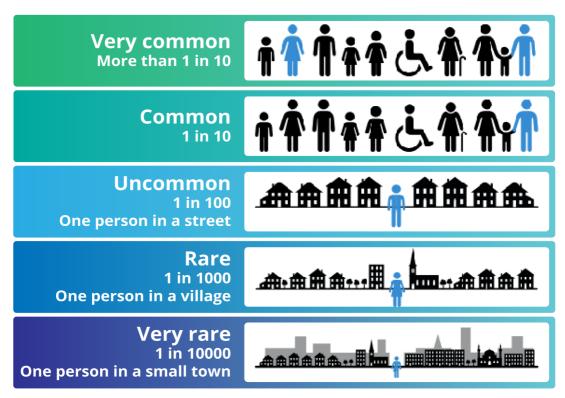
It is used during operations.

ARE THERE ANY COMPLICATIONS TO THIS OPERATION?



Adenoid surgery is a safe procedure.

But there are some risks. The risks can be divided into the following groups:





BLEEDING is the most serious risk and may need surgery to stop.

Bleeding after adenoidectomy is RARE.

This happens in about 1 in every 200 operations.



If you notice any bleeding from your child's throat, take them to see a doctor as soon as possible.

Call your doctor, the ward, or go to the nearest emergency department to have it checked out.



DENTAL DAMAGE. There is a SMALL CHANCE a tooth may be chipped or knocked out during surgery.

Please tell us if your child has any loose, capped, or crowned teeth.



NASAL REGURGITATION or leaking fluids through the nose while drinking is RARE.

It usually goes away on its own.

If severe, your child may need to have more surgery.



VOICE CHANGE. Some children may have a nasal voice after surgery.

This usually goes away within a few weeks.

Speech therapy can help if it does not go away.



ADENOIDS can grow back, but this is UNCOMMON.

CONTRIBUTIONS TO THIS DOCUMENT







Disclaimer: This publication is designed for the information of patients. Whilst every effort has been made to ensure accuracy, the information contained may not be comprehensive and patients should not act upon it without seeking professional advice.

our Notes





ENT UK has recently gained PIF TICK accreditation to become a 'trusted information creator'.

Kindly submit your feedback to help us improve our Patient Information Leaflets.

We greatly value your input and appreciate the time you take to provide it.

FEEDBACK SURVEY



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