



“The secret of the care of the patient is in caring for the patient” – Francis Weld Peabody

## Every patient, every time

Dr. York goes to great lengths to treat his patients as he would treat his family. Your understanding of your condition and treatment is an integral part of its success.

This is just a small reminder about key portions of your discussion with Dr. York in the office. Should you have further questions, please never hesitate to call.

## Pre-op instructions:

- Please do not eat anything starting at midnight before the surgery.
- Do not take any blood thinners (i.e. Motrin, Advil, Aleve, Aspirin, etc) 5 days prior to surgery.
- If you are on blood thinners, make sure you have clearance from your primary doctor before stopping them.
- If your surgery is at a surgery center, please arrive at least **an hour** before your scheduled surgery time.
- If your surgery is at a hospital, please arrive **two hours** before your scheduled surgery time.
- Please take your blood pressure medications the morning before your surgery unless specifically asked not to.
- Patients who are going home on the same day must bring another adult to drive them home.

## Post-op Instructions

- Call Dr. York immediately for any signs of bleeding.
- Softer foods will be more comfortable to eat for the first 1-2 weeks after surgery.
- Bad breath and a “hairy/white” appearance to the back of the throat is normal and to be expected.
- There is no need for antibiotics after surgery.
- Motrin/ibuprofen/Advil are strong pain relievers after this surgery and can be alternated with acetaminophen/Tylenol instead of the prescribed narcotic.
- **DO NOT DRIVE** or operate heavy machinery after using narcotic pain medicine.

# ENT Clinics of San Antonio

## Tonsillectomy with or without adenoidectomy

Brooks City Base: (210) 337-1050  
Downtown: (210) 224-9832  
Stone Oak: (210) 499-4589

**GOOD NEWS!** For routine/non-urgent questions, you can avoid the wait on the phones using the patient portal at [www.entclinicsofsa.com](http://www.entclinicsofsa.com)

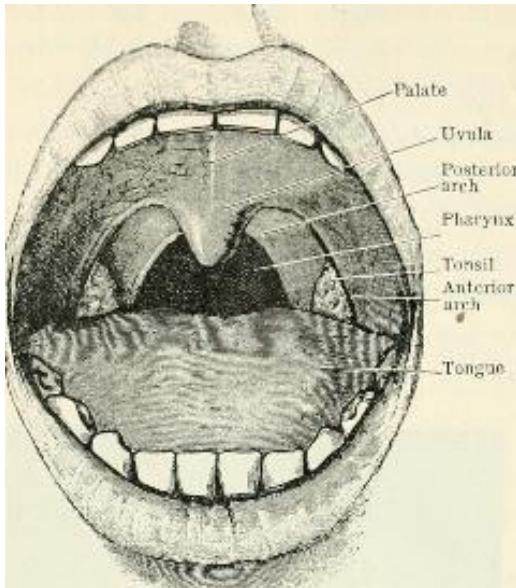


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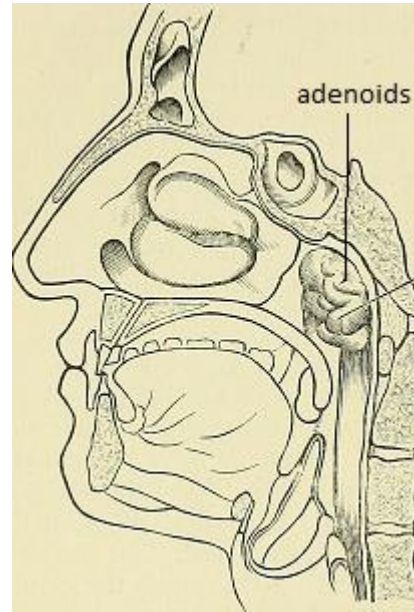
## Why do we have tonsils?

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- The palatine tonsils, more commonly known as “the tonsils”, and adenoids are a part of the lymphatic system of the human body.
- They join with hundreds of other lymph nodes in the head and neck to help the body fight infection. Removal of the tonsils does not impair the immune system.



Waldeyer's ring is composed of groups of tonsil tissue surrounding the throat. It starts behind the soft palate as the adenoids, continues down the sides as the tonsils, and merges again in the middle at the back of the tongue as the lingual tonsils.



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## How are they removed?

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Dr. York utilizes methods to remove the tonsils that both cut through tissue and stop bleeding at the same time. This is to ensure your safety and to minimize your time under anesthesia.

The adenoid tonsils are typically cut away and then cauterized due to their anatomic location. Though rare, these can grow back in certain individuals due to the anatomic constraints on their removal.

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## Why are they typically removed?

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### Physician recommendations

- Obstructive sleep apnea
- Recurrent infection
- Peritonsillar abscess
- Suspicion for cancer
- 2<sup>nd</sup> set of ear tubes, adenoids only

### Optional/Elective reasons

- Recurrent tonsil stones

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## What are the risks?

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- Primarily pain is the largest risk, and in the very young children can sometimes require a trip to the emergency room for IV fluids.
- There is a 3% risk for re-bleeding that usually happens between days 5 and 10 after surgery. This corresponds with the scab falling off of the operative wound.
- Rarely, patients may notice a change in her voice due to removal of the obstructing tissue.
- Rarely, fluids can reflux into the nose after the removal of large adenoids. This usually improves within a week to 2 weeks and only rarely requires an operation.
- Very rarely, tonsil or adenoid regrowth may occur requiring reoperation.