



# Linear cautery to the nasal turbinates (reducing soft tissue inside the nose)

**This leaflet is for parents and carers of children having surgery on their nose. It aims to answer some of the questions that you or your child may have about their operation. You will also have an opportunity to discuss any further concerns with us, on admission.**

A general anaesthetic requires your child to be starved beforehand.

**Morning admission:**

Last food: 2.30am

Breastfeed: 4.30am

Water or weak squash until 7.30am

**Afternoon admission:**

Last food: 7.30am

Breastfeed: 9.30am

Water or weak squash until 12.30pm

*Please be aware that milk and chewing gum is considered food.*

**If you do not follow these instructions your child's procedure may be delayed or even cancelled.**

## What is linear cautery to the nasal turbinates?

Linear cautery to the nasal turbinates is the name given to the procedure used to reduce the size of the tissues covering the turbinates bones (a set of bony ledges inside the nose).

## Why does my child need linear cautery?

Children suffering with rhinitis (inflammation of the nasal mucous membrane tissue) may have some degree of nasal blockage. If this has not responded to medical treatment or if the main symptom has been nasal blockage, this can be helped by surgery.

## Risks of surgery

The risks of the surgery include a slight chance of infection and the rare risk of bleeding. Every anaesthetic carries a risk, but this is small. The anaesthetic will be given by an anaesthetist (a specially trained doctor). After having an anaesthetic some children may feel or be sick. They may have a headache, sore throat, feel dizzy or be upset.

These side effects are usually not severe and are short-lived.

## **What shall I bring?**

Some children find it reassuring if they can bring a familiar toy from home. A play specialist may be involved in your child's care, and will be able to provide a range of suitable toys and activities. A hospital gown will be provided to wear to theatre; however, children may want their own nightwear, slippers and dressing gown to change into.

## **What happens on admission?**

The surgeon will explain the procedure to you on the ward, and can discuss any worries that you may have. An anaesthetist will also visit you to explain the anaesthetic. Your child may also have 'magic cream' (local anaesthetic) applied to the back of their hands so that the anaesthetic injection will be less painful.

One parent/carer will be able to accompany your child to the anaesthetic room and stay with them until they are asleep.

## **What happens after the operation?**

After your child has had their operation they will be taken into the recovery room to wake up. Once they are sufficiently recovered, you may be able to accompany the nurse to collect them and bring them back to the ward. Children are given pain relief during their operation. If necessary, further pain relief will be given on the ward. It is possible that your child may vomit following surgery – medicine can be given to relieve this if the vomiting persists.

## **When can we go home?**

Your child must remain on the ward for two hours following the operation. Your child should be comfortable and alert and must have had something to eat and drink before we will allow them to go home.

## **Advice after linear cautery**

- Your child may need Paracetamol, e.g. Calpol, after the operation so ensure you have some at home and follow the dosage on the bottle.
- Your child will need to have 5-7 days off school. All contact sports should be avoided for two weeks.
- Your child's nose will become blocked and may be very runny, like a bad cold, occasionally blood stained, for 1-2 weeks after the surgery. This will resolve by itself.
- Your child should avoid blowing their nose for at least one week and sniff gently if need be. If they sneeze they should try to do this with their mouth open.

There is a chance that your child may experience some bleeding from the nose following surgery. If your child's nose starts to bleed, gently pinch the soft parts of their nose (nostrils) together for 5 minutes. If this does not stop it, then wrap some ice in a tea towel and press it to

the bridge of their nose, while pinching the tip of the nose for 15 minutes. If bleeding continues, then seek advice from your GP or NHS 111.

### Contact us

Pre-clerking nurse: 0118 322 7686  
Lion Ward: 0118 3227519  
Kempton Day Bed Unit: 0118 322 7512  
ENT Clinic 0118 322 7139

**Please ask if you need this information in another language or format.**

RBFT Paediatric Unit, May 2024. Next review due: May 2026