Let's Talk About...

Nose fracture surgery

This handout will explain the surgery for your child's broken nose. Your child's anesthesiologist (special doctor to help with the surgery) will give your child medicine to sleep. The surgeon will move the bones gently back into place. After the surgery, your child will receive medicine to decrease bleeding and pain. The surgeon will put some packing material in your child's nose and put a splint on the outside of your child's nose. This will help keep the bones in place.

Diet

When can my child eat?

After surgery, make sure you give your child plenty of clear liquids. Some clear liquids are Pedialyte®, water, apple juice, Gatorade®, Popsicles®, and plain Jell-O®. You may also give your child soft foods such as soup, pasta, yogurt, cereal, eggs, and bread. Try to stay away from high fat or greasy foods like hamburgers and pizza for 24 hours after surgery.

What should I do about nausea and vomiting?

Sedation from the surgery, car movement, and pain medicine can all cause nausea and vomiting. A small amount of blood mixed with the vomited material is common right after surgery. To help control nausea and vomiting, have your child lie quietly and decrease movement. If your child has nausea or vomiting, wait 30-45 minutes before giving any food or drink. Have him take small sips of clear liquids or ice chips every 5 to 10 minutes. If your child is younger than 2 years old, try giving him water, apple juice, or Pedialyte®. If he is older than 2 years, try a Popsicle®, Gatorade®, Jell-O®, or 7-UP®. Help your child drink every 15 to 30 minutes, but don't force it. If the nausea returns, wait another 30 minutes and try again. Once your child has stopped feeling sick, slowly begin giving him solid foods. Nausea and vomiting should stop by the end of the first day. If your child continues to vomit after the first day or if he vomits a large amount of blood, please call the ear, nose and throat (ENT) nurse or ENT doctor on call.

How will I know if my child is drinking enough?

After surgery, your child will have low body fluids. Some signs of not having enough to drink include dark yellow urine, a dry mouth (no spit), chapped lips, and the soft spot on a baby's head sinks inwards. If you notice any of these, give your child more to drink. He should urinate (pee) normally within 24 hours after the procedure. A baby should have six to eight wet diapers in a 24-hour period. An older child should urinate every six to eight hours. It is important to have your child drink a small amount of liquid every 15–30 minutes while he is awake to prevent dehydration.

Pain

How can I tell if my child is in pain?

This can be a very painful operation. Your child may be more uncomfortable after the nose repair than when he first broke his nose. This is because the bones have already begun healing. The nose pain may last 3–4 days.

Your child may be fussy or irritable after surgery. Some children can tell you they are in pain. Others may moan, whimper, make a face of pain, cry, be irritable, be less active, or not sleep. Your child may experience a sore throat or neck discomfort after surgery. The soreness usually goes away after one day.

How can I help with my child's pain?

Keep your child's head raised on a few pillows to

decrease swelling. You may also use an ice pack on the surgery site for the first two days after surgery. Your child may prefer a cool cloth instead of an ice pack.

When should I give pain medicine to my child?

Your doctor will order pain medicine. Give this to your child regularly for the first few days until he has less pain. The pharmacy can flavor the medicine to make it easier to take. As your child becomes more comfortable, switch to over-the-counter Tylenol® to relieve the pain. Note: Do not give your child aspirin or an anti-inflammatory drug such as ibuprofen, Advil® or Motrin®. These medicines can cause excessive bleeding.

The doctor will give your child a prescription for antibiotics to help prevent an infection. Please let your doctor know if your child is already taking antibiotics.

Wound Care

How should I care for the wound?

Your child will have a metal or plastic splint placed across the nose to protect it from small bumps.

Your child will have a dressing. A small amount of blood or drainage is normal. The drainage should not soak through the dressing. You may catch some of the drainage from the nose with some gauze or tissue. If bleeding from the nose or mouth does not stop, call the ENT RN, (801)-662-1740, or call Primary Children's operator 801.662.1000 for the ENT doctor on-call, or go to the closest emergency room.

When can the dressing come off?

Keep the splint on for the first week after surgery. If the splint comes off, place it over your child's nose with regular adhesive tape.

Bathing/Showering

When can my child take a bath or shower?

Your child may bathe as needed. Keep his nose dry so the metal splint does not come off.

Activity

How active can my child be?

Your child will be more tired than usual for about 24 hours after surgery. Sedation can also affect your child's coordination. Have him avoid activities such as sports, riding bikes, or swimming for the first 24 hours after surgery. Teenagers and young adults should not drive a car for 24 hours. Your child should not drive if he is taking narcotic pain medicine. Your child should not participate in gym, recess, or organized sports for 4-6 full weeks while the bones are healing. After two weeks, there is still some weakness in the bones, but it is unlikely that your child's nose will easily break again. Full healing takes six weeks. Your family may have to decide the importance of organized sports before your child plays sports again. If his nose gets bumped, your child may have to have surgery again.

Behavior

What is normal behavior after surgery?

It is normal to see behavior changes after surgery. If behavior changes last longer than three to four weeks, call your doctor. Some examples of changes include regression (bed-wetting or acting out), changes in sleep and eating patterns, or nightmares. Be patient with your child; this will help reduce these changes.

Calling the doctor

When should I call the doctor?

Call your doctor if you notice any of the following symptoms:

- Excessive bleeding
- Temperature over 101°F
- Your child injures his nose again
- Uncontrolled pain
- Numbness of fingers and toes
- Signs of dehydration (dry mouth, fewer than six to eight wet diapers, lack of tears)
- Excessive diarrhea or constipation

- Chest pain or shortness of breath: Go to the Emergency Room!

How do I call the doctor?

If it is an emergency, go to the nearest Emergency Room or call 911. Otherwise, contact your doctor or nurse. If the office is closed, call the operator at Primary Children's Hospital, 801.662.1000, and ask for the Pediatric Ear, Nose, and Throat Resident. You can reach the resident at any time.

Follow-up appointment

Call your doctor's office as soon as possible for a follow-up appointment.

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Pediatric Education Services, 801.662.3500 | Rev. 10/14, LTA520407980 | *Available in Spanish*