Splints:

For **functional (breathing) septoplasty** procedures, you will have two internal splints; one in each nostril. You will likely feel like you can’t breathe well after surgery through your nose, but once the internal splints are removed, you will have immediate relief. These will be removed in the office 2 weeks post-op.

For **cosmetic (aesthetic) rhinoplasty**, you may have an external splint on your nose on the outside. This will be removed in the office 1 week post-op. Sometimes, the external nasal splint falls off before a week. Sometimes, for cosmetic rhinoplasty an shorter internal splint is placed that is removed also at one week.

Pain: Pain medications will be given to you at discharge. You can also take Tylenol. You may take up to 3g of Tylenol in a 24 hour period. Do not take Aspirin, Ibuprofen, or Motrin until 1 week post-op. Antibiotics are given frequently. If so, please take them as prescribed and finish the prescription.

Precautions: Do not blow your nose for 1 month. There will be drainage, which is to be expected. You may need to keep gauze in place to wipe your nose externally.

If you need to sneeze, please do so with your mouth open.

Do not use straws for 1 month.

Saline: Please start saline (salt water) rinses at 1 day post-op. This is to be done 3-4 times a day for irrigating the inside of the nose through the nostrils. You should point the rinse toward the outwards on each side, outside of the nose.

Swelling/Bruising: You may have bruising and this usually subsides within the first few weeks. You will also experience some swelling. This should go down within 4-6 weeks. At two weeks post-op, you may start to use Preparation H on the outside of your nose to help decrease swelling for **cosmetic (aesthetic) rhinoplasty patients only**.
Follow Up: For functional (breathing) septoplasty patients, you will return to have your internal splints removed at 2 weeks post-op. Then you may follow up in 4-6 weeks.

For aesthetic (cosmetic) rhinoplasty patients, followup is in one week postop.