

Procedure Information Sheet – Endoscopic Adenoidectomy

1. Introduction

- 1.1. Removal of adenoid (enlarged lymphoid tissue located at nasopharynx, the back of the nose).
- 1.2. Indications:
 - 1.2.1. Nasal airway obstruction
 - 1.2.2. Obstructive sleep apnea syndrome (OSAS)/ Snoring
 - 1.2.3. Otitis media with effusion
 - 1.2.4. Recurrent acute otitis media
 - 1.2.5. Chronic or recurrent rhinosinusitis

2. Procedural Preparation

- 2.1. It is possible to undergo preoperative examination including blood tests, Chest X-Ray and Electrocardiogram (ECG).
- 2.2. The indication of operation, procedure and possible complications will be explained by the surgeon and consent will be signed before operation.
- 2.3. Pre-operative anesthetic assessment will be performed. The anesthetic management and its possible risks will be explained by the anesthetist.
- 2.4. Inform doctor for any drug allergy, regular medications or other medical conditions.
- 2.5. Inform doctor if you have a recent upper respiratory tract infection. The operation date may need to be changed.
- 2.6. Do not eat or drink for 8 hours before operation.

3. Procedure

- 3.1. The operation will be performed under general anesthesia.
- 3.2. The surgeon will use an endoscope to remove enough adenoid to improve airway opening.

4. Recovery Phase

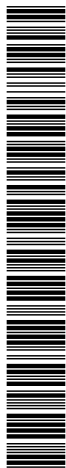
- 4.1. Mild discomfort at the back of the nose and nasal stuffiness.
- 4.2. Small amount of blood-stained saliva or nasal discharge is normal.
- 4.3. Please attend the nearest emergency department when you have persistent bleeding from nose or mouth.

5. Risks and Complications

- 5.1. Common Risks and Complications ($\geq 1\%$ risk)
 - 5.1.1. Bleeding
 - 5.1.2. Infection
 - 5.1.3. Trauma to oral and nasal tissue
- 5.2. Uncommon Risks with Serious Consequences ($< 1\%$ risk)
 - 5.2.1. Eustachian tube injury and stenosis causing otitis media with effusion, tinnitus and hearing loss.
 - 5.2.2. Velopharyngeal incompetence causing voice change and fluid regurgitation on eating and drinking.
 - 5.2.3. Nasopharyngeal stenosis causing obstruction of nasal breathing, snoring, sleep apnea.
 - 5.2.4. Voice change.
 - 5.2.5. Temporomandibular joint injury causing pain, subluxation and trismus.
 - 5.2.6. Teeth injury causing fracture, loosening and pain.
 - 5.2.7. Cervical spine injury causing neck pain, decreased range of movement, sensory and motor nerve deficit.
 - 5.2.8. Death due to serious surgical and anesthetic complications.

6. Follow Up

- 6.1. Follow up as scheduled.



Hosp No. : HKID No.:
Case No. :
Name :
DOB : M / F
Adm Date :
Contact No.:

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7. Remark

7.1. The above-mentioned procedural information is not exhaustive, other unforeseen complications may occur in special patient groups or individual differently. Please contact your physician for further enquiry.

8. Reference

8.1. Hospital Authority. Smart Patient Website.

I acknowledged the above information concerning the operation or procedure. I have also been given the opportunity to ask questions and received adequate explanations concerning the condition and treatment plan.

Patient/ Relative Signature: _____

Patient/ Relative Name: _____

Date: _____

