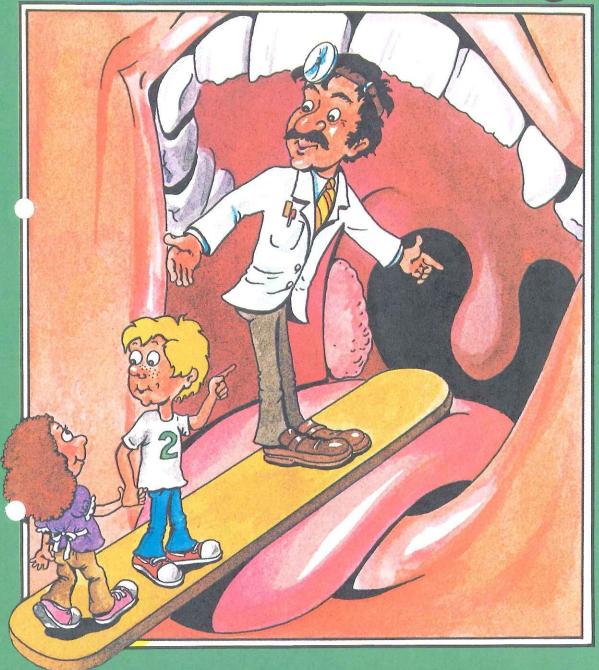
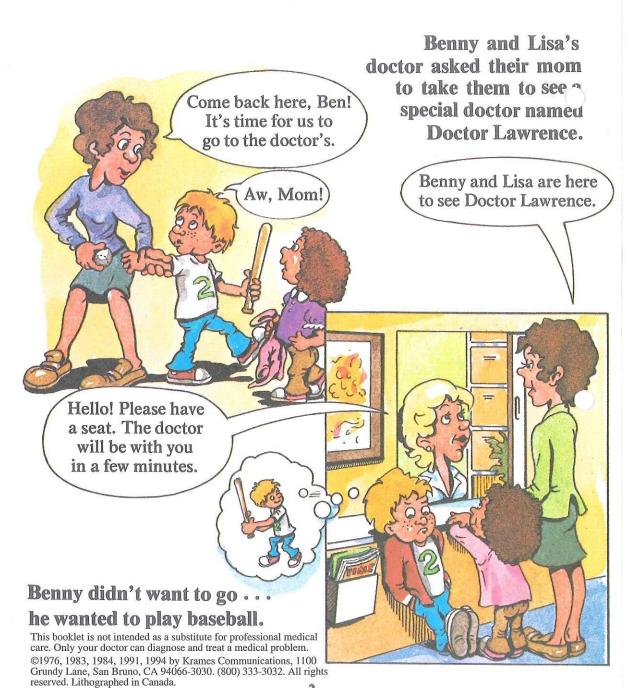
## Journey Journey

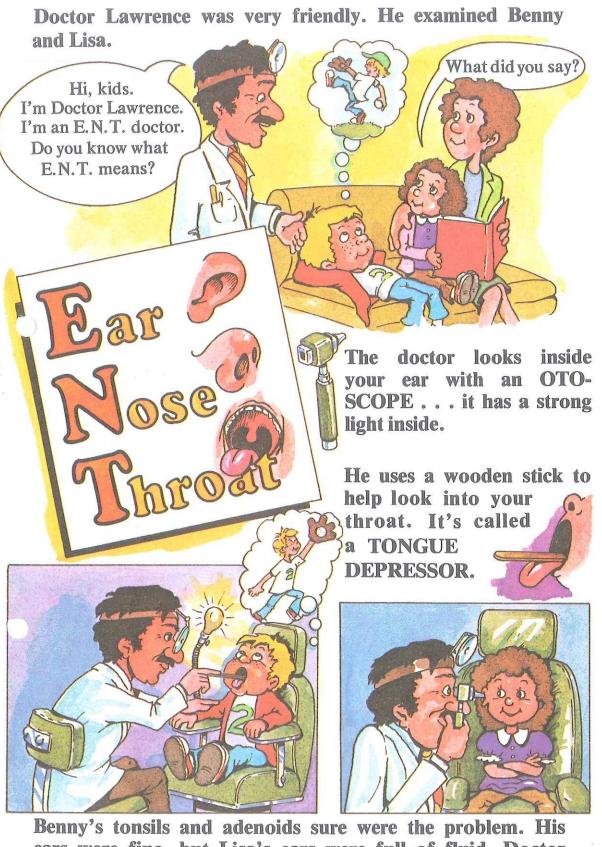


**Tonsillectomy and Adenoidectomy** 

## Your TEA Journey

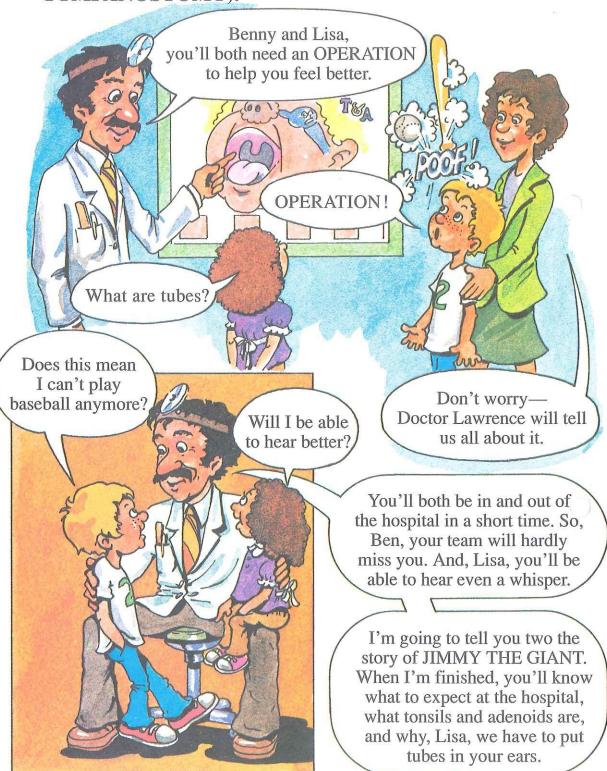
ur story is about a boy named Benny and his little sister Lisa. Benny loved to play baseball . . . except when his throat hurt and he had trouble breathing through his nose. And Lisa really liked to ask questions . . . except that sometimes she could hardly hear the answers.

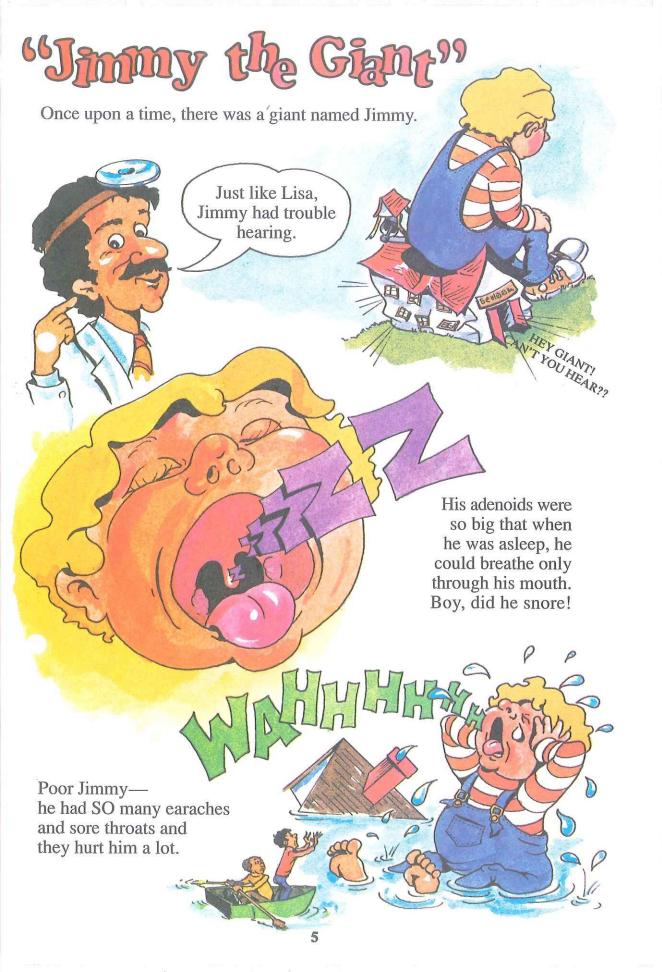




Benny's tonsils and adenoids sure were the problem. His ears were fine, but Lisa's ears were full of fluid. Doctor Lawrence tested Lisa's hearing and she really couldn't hear well.

Doctor Lawrence told Benny and Lisa's mom that they should both have their TONSILS and ADENOIDS out (that's called a T & A) and Lisa should also have the fluid removed from her ears and tubes put in (that's called a TYMPANOSTOMY).





Jimmy's parents took him to the doctor.
Jimmy's tonsils and adenoids were huge and infected. His ears were full of fluid. The doctor said Jimmy needed a T & A and tubes.





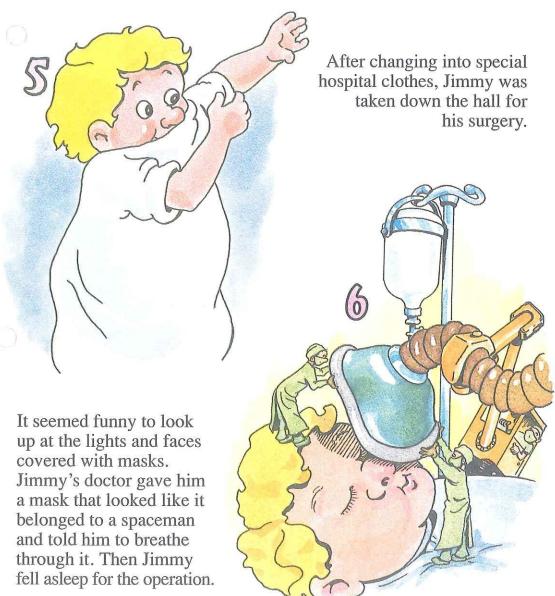
He had blood and urine tests that the doctor had ordered. These lab tests are often done before going to the hospital.

The night before surgery, Jimmy's mom told him he couldn't eat or drink until after his operation. Next morning, off to the hospital he went!





Jimmy's parents signed him in at the admission desk, and he was given a bracelet with his own name on it.



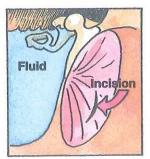


Now that Jimmy's sound asleep, we can take our "T & A Journey" by climbing inside his mouth and looking around. He's so big that he won't even feel us do it. Let's take a look at the T & A MAP so we can see exactly where we'll be going.

T is for TONSILLECTOMY (removal of the tonsils): The tonsils are located on each side of the mouth cavity behind the tongue. They are easily seen, especially if enlarged. The tonsils are sometimes removed because they are large and may interfere with breathing and swallowing. More often, they are removed because of repeated tonsillitis (infected tonsils).

A is for ADENOIDECTOMY (removal of the adenoids): The adenoids are in back of the nasal passages and upper throat near the Eustachian tube opening. They are hidden from view by the palate. Frequent ear infections and obstruction to breathing caused by enlarged or infected adenoids are common reasons for their removal.

TYMPANOTOMY (a surgical incision in the eardrum): If hearing loss is related to fluid in the middle ear, called Serous Otitis Media, a tympanotomy may be recommended. A ventilating tube may be inserted in the small surgical hole at this time. This is called a TYMPANOSTOMY (tube insertion).



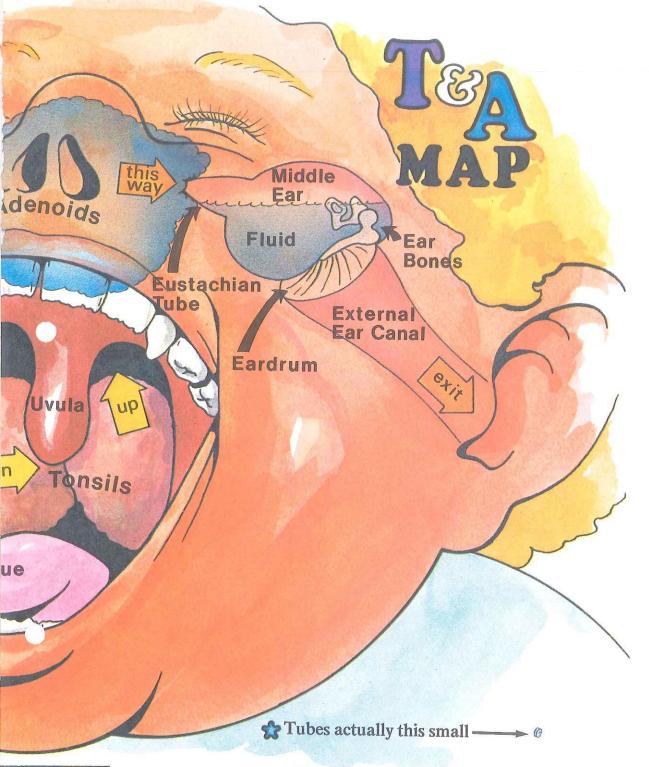
A tiny hole is made in the eardrum; this hole is called a tympanotomy. The procedure is a safe, simple operation.



When the fluid has been removed through this hole by suction, the eardrum is then able to vibrate normally.

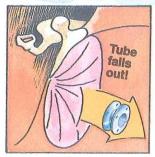


Tong



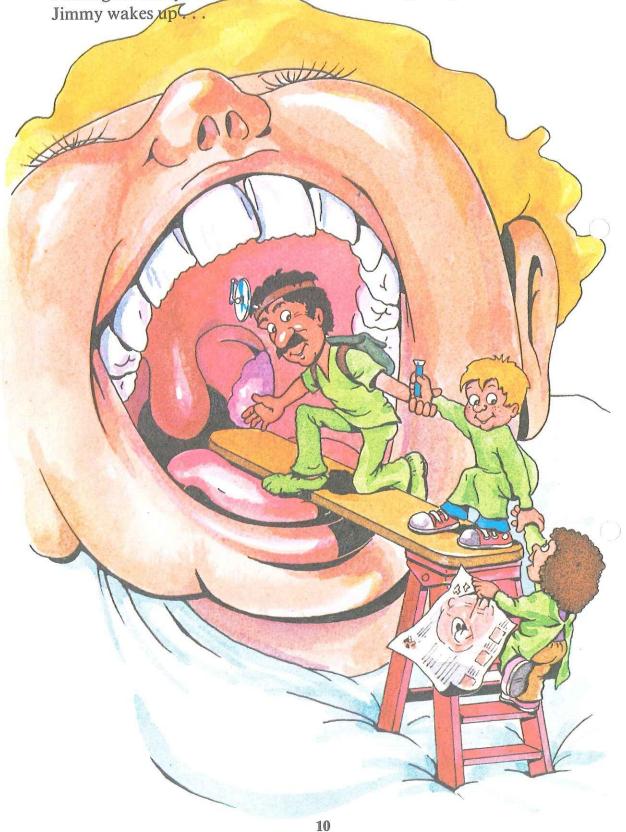


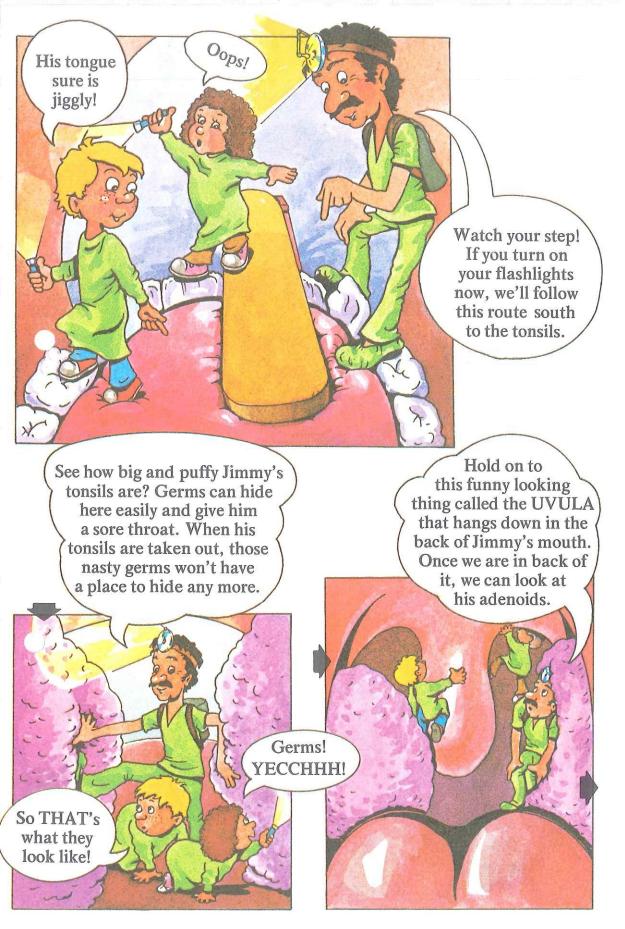
A tiny tube may be placed in the hole, letting air go into the middle ear from the outside ear canal.



After a variable period of time, the tube falls outward into the ear canal and your doctor can easily pluck it out during an office visit. The hole heals and hearing should be as good as new!

Are you ready, Ben and Lisa, to take our T & A Journey through Jimmy's mouth, throat and ears? Lisa has the T & A MAP so we can find the way. I've got some special gear we might need in my backpack. Flashlights ready? . . . let's hurry so we can get a good look before

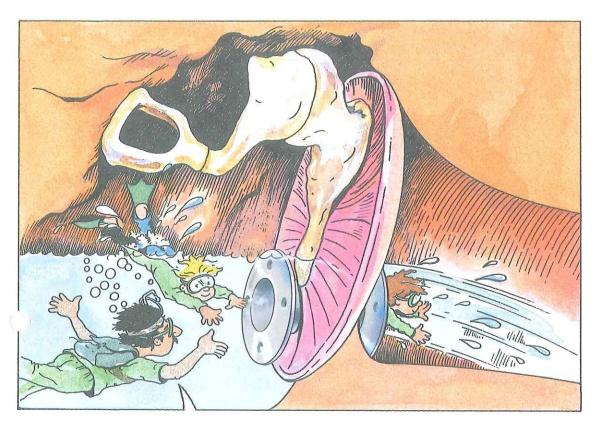






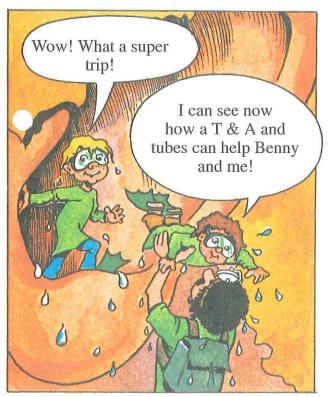
Well, I'll put
this tube in. It's
very much like
the tube we'll put
in Lisa's EARDRUM,
only hers will be
very tiny. Now
we'll make a hole
in Jimmy's eardrum, put the tube
in the hole and swim
out. Let's put on our
masks and flippers . . .



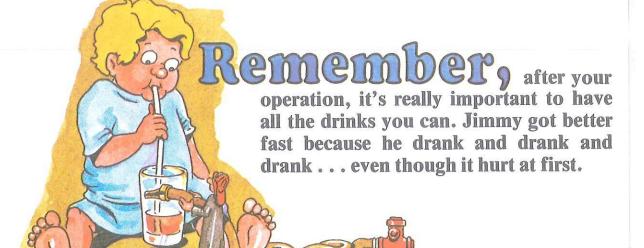


Of course, the little hole in your eardrum, Lisa, will be made from the outside ear canal . . . but we have to get out and the only way is to swim along with the fluid . . . Here we go!

Jimmy will be able to hear much better now.

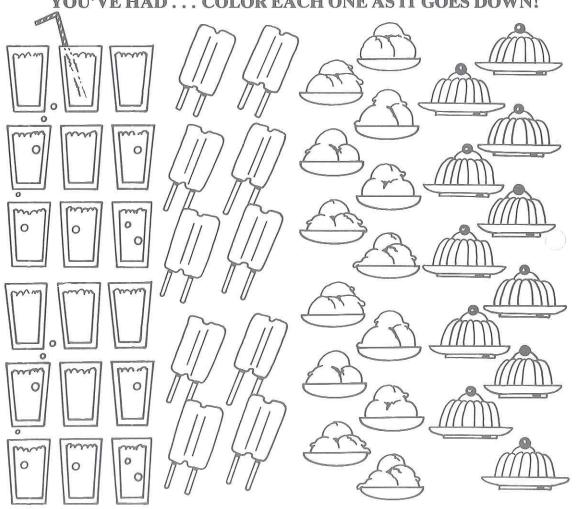


That's almost the end of our T & A Journey. But before you finish, you might want to read this story a few more times with Mom or Dad so they can help explain what will happen during your hospital visit and your own very special operation. And if you still have any questions, you can even ask your doctor.

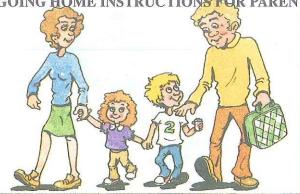


## Here's your scorecaid

SHOW HOW MANY DRINKS AND COLD DESSERTS YOU'VE HAD . . . COLOR EACH ONE AS IT GOES DOWN!



GOING HOME INSTRUCTIONS FOR PARENTS



## WARNING SIGNS

- Fever over 101°
- Severe pain unrelieved by prescribed medication
- Bright red bleeding that lasts more than a few minutes

CALL YOUR DOCTOR!

An important part of our T & A Journey is the recovery period at home. The following general information and suggestions may be of some help.

**REST:** Your child's first two days at home should be spent in bed; then allow only limited activity at home until the first postoperative visit. Visitors should be kept to a minimum since they may unknowingly bring in infection and overexcite your child.

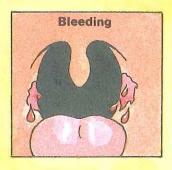
DIET: FLUIDS ARE VERY IMPORTANT to maintain adequate hydration and ensure rapid healing without complications. Mild, nonacidic juices (such as apple and apricot), soft drinks, and frozen drink bars are suggested. SOFT FOODS like gelatin, ice cream, custards, puddings, and mashed foods are helpful to maintain adequate nutrition. Hot, spicy, rough, and scratchy foods such as fresh fruits, toast, crackers, and potato chips should be avoided since they may scratch your child's healing throat and cause bleeding.

MEDICATIONS: A moderate amount of throat discomfort and ear pain is to be expected. Pain medication will be provided if needed and may be given a half hour before eating to help your child swallow more comfortably. Give only medications provided by your doctor. Follow instructions carefully. Aspirin medications should be avoided since they may cause bleeding.



WHITE PATCHES: You may see crusty white patches in your child's throat. This is a temporary normal covering during the healing period and is NOT a sign of infection.

BLEEDING: After the first week, the white patches can be expected to come off and may cause a little bleeding. The best way to prevent build-up of too much crusting and bleeding is to keep the throat moist with LOTS OF FLUIDS.



**EAR TUBES:** If tubes are present, keeping water out of your child's ears is important to help prevent infection. Several methods are available—check with your doctor's office.

Dear Parent,

We realize that your child's surgery, as a major event in your family, may lead to questions for both you and your child. As a parent, you probably want to understand as much as possible and to know what you can do to help. And children are naturally inquisitive—they want to be informed, too. Your T & A Journey addresses their questions in a way that is entertaining and reassuring.

This booklet speaks to both you as a parent and your child. At its heart is a story that takes your child on a journey through the surgical procedure, a journey that is fascinating and fun. Information and postoperative instructions are also provided for you. Preview the book, then read it with your child. You can share the story again and again as questions arise during your child's surgical experience.

Please check with your doctor to make sure all your questions are answered, and ask about special instructions that may apply.

We wish you and your child a successful T & A Journey; we trust this booklet will be helpful and enjoyable. Dr. Lawrence



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Consultants: Philip C. Bartlett, MD, FACS Lawrence A. Krames, MD



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