



Laryngoscopy Post-Operative Instructions

Laryngoscopy is a procedure involving examination of the structures from the tongue base to the voice box and vocal cords. It is also used for surgery on the vocal cords or removal of a foreign body or tumor. It is frequently performed and considered to be one of the safest. Among the few complications that may occur are injuries to the teeth: risks of general anesthesia, bleeding after biopsy, and failure of the vocal cords to heal after biopsy. If polyps, nodules, or small well-circumscribed cancers are present, the laser may be used to remove these lesions. Voice changes and/or hoarseness are possible after such vocal cord surgery.

Indications:

- Diagnosis/Treatment of voice abnormalities (hoarseness, stridor)
- Evaluation of laryngeal trauma
- For removal of foreign bodies in the upper aerodigestive tract.

Post-Operative Instruction:

- Throat discomfort may persist for several days. Tylenol or prescribed pain medication should relieve the pain; if it becomes worse please notify our office.
- Do not take aspirin, Motrin, Advil, Aleve or any Ibuprofen containing products for 2 weeks after surgery.
- Absolute VOICE REST for 2 days after surgery and no voice excessive voice use (shouting or whispering) for 2 weeks after surgery when vocal cord polyps or lesions are removed.
- No smoking or alcohol.
- Maintain high humidity at home with a vaporizer or sauna.
- Follow up appointment should be about 2 weeks after surgery.
- Avoid steaming hot foods for 1-2 days.
- Drink plenty of liquids and eat a soft diet for 1-2 days.

If any of the following occurs, you may contact Cape Fear Otolaryngology at 910-323-9222:

- Spitting up bright red blood
- Fever higher than 101.5 F
- Inability to eat or drink
- Difficulty breathing, shortness of breath, abnormal wheezing, high-pitched crowing-like sound when breathing, or bluish discoloration of lips