



LARYNGOSCOPY, ENDOSCOPY, PHONOSURGERY GUIDELINES

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BEFORE Surgery

- See the speech pathologist for pre-surgery voice evaluation and counseling (617-632-7400 for appointment)
- Schedule follow-up, post-surgical visits with your physician and with speech-pathologist
Physician: _____ days after surgery
Speech pathologist: _____ days after surgery
(**NO** talking after surgery until this visit)
- Arrange for two weeks of voice rest; change your outgoing voicemail message, discuss your need for voice rest with family, friends, supervisors/coworkers as necessary.

IMMEDIATELY AFTER SURGERY

- **Voice Rest.**
Do not speak or use your voice **at all** for _____ days.
No whispering. Use a pad and pencil or other means to communicate.
The **first time that you talk** should be in your first follow-up appointment with the ENT or speech pathologist.
- **HYDRATION and LUBRICATION.**
Drink at least 2-3 quarts of water daily, unless there are medical reasons not to. This will help to hydrate you internally.

Use a **hot water** vaporizer in your bedroom at night, unless you are allergic to mold, have a history of nose bleeds, or have other medical reasons not to.

Perform steam inhalations for about five minutes twice daily. This will help to hydrate the vocal folds externally. You can purchase an inhaler in the Voice/Speech/Swallowing Division for \$40. For inhalations, be sure that you are far enough away from the source so that the steam is not too hot. Breathe alternately through your nose and mouth, whichever is most comfortable.

Avoid diuretics and drying medications (antihistamines, decongestants). No caffeine, alcohol, or smoke.

- **Medications.**
Antibiotics may be prescribed for a short period of time. Avoid Aspirin, Advil, and similar medication. Tylenol is fine. Most regular medicines can be resumed quickly. Check with physician regarding blood thinners and steroids.

- **Pain.**
May be felt in the throat, ears, jaw and/or neck, and is generally more noticeable when swallowing. Pain medication to facilitate swallowing, and therefore the maintenance of fluid intake, is acceptable. See medications above and discuss appropriate medications with your ENT.
- **Diet.**
Cool, bland, soft and boring food for the first 3-5 days, with plenty of fluids. Then ease into normal diet, but avoid spicy or hot foods and alcohol. Do not eat two to three hours before going to bed, as this may contribute to irritation of the throat from acid reflux.
- **Bleeding.**
The occasional expectoration of small streaks of blood is not cause for alarm. Minor “active” bleeding (teaspoon quantities mixed with saliva) is of some concern, but will often subside with relaxation, sipping of ice water, and avoidance of any irritants such as excessive coughing/throat cleaning, cigarette smoke, dry air, etc. Physicians should be notified, particularly if even “minor” bleeding persists. If the bleeding is severe, proceed immediately to the nearest fully staffed hospital Emergency Room and obtain care. Allow the hospital staff to contact your surgeon. Do not spend unnecessary time on the phone, or attempt to drive long-than-necessary distances.
- **Other reasons to call in.**
Reasons include fever, light-headedness, swallowing or breathing difficulty, chest pain, other concerns or questions.

STARTING TALKING

- Do not talk at all until you see the speech pathologist at the follow-up appointment time. When you start talking again, your voice will probably be weak, and will fatigue easily. However, most people notice that voicing is easier than before surgery.
- For about 2-3 weeks, the speech pathologist will probably want to see you in brief therapy sessions weekly. After that, sessions will be about once weekly for about six to eight weeks.
- The speech pathologist will gradually increase the amount of your talking during the first three weeks post-surgically. A typical pattern is:
Week 1: No talking at all.
Week 2: Minimal talking.
Week 3: Gradually more talking until almost normal amount the beginning of Week 4.
- During the first month after surgery, your voice will fatigue easily. This should gradually improve.
- You should not schedule any vocally demanding events for at least two months after surgery. The specific amount of time will depend on how you are doing. Discuss this with the speech pathologist.