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POSTOPERATIVE INFORMATION: Trans-sphenoidal Surgery

The trans-sphenoidal approach is used for pituitary tumors and for problems around the pituitary gland (craniopharyngioma, Rathke's Cleft cyst, etc). It is done in conjunction with an ENT surgeon. There are very often no visible incisions. However, you need to follow up with both the neurosurgeon and the otolaryngologist (ENT) after surgery. You will be in the hospital for a minimum of 3-4 days. If you have excessive fluid coming from the nose especially when you get up in the morning, please call the office

Activity:

Please rest and limit physical activity until the first post-operative visit. No bending, lifting greater than 5 pounds or twisting until the first postoperative visit. Limit the amount of stair climbing to twice per day. If you need to take a nap in the middle of the day, you may do so. You may resume your normal diet. When you sneeze keep your mouth open. You may place saline in you nose as directed, but no other objects should be introduced into the nose. Try to avoid blowing the nose. If this is necessary, please keep your mouth open. Wiping the nose should be sufficient.

Postoperative Discomfort:

It is common to have pain after any surgery. Often the headache from cranial surgery dissipates quickly and some patients do not use any pain medication after surgery. You may have some facial pain or pain If you experience severe pain, nausea, vomiting and neck stiffness call the office. This could be a serious problem.

Medication for pain is provided on discharge from the surgery center or hospital. The medication will vary depending on the procedure performed. Make sure that we are aware of any allergies or reactions to pain medications.

If you have any excessive swelling, nasal drainage, pain or other symptoms you are concerned about, please call us.

Postoperative Appointments and Medications:

Your first appointment will be 10 days to 20 days after the initial surgery. **Please call the office to make this appointment when you get home from the hospital.** This will be a routine visit and any further postop questions can be answered. We often discharge you on medications to treat brain swelling and hormonal imbalance as well as pain medication. Medications may in-

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clude oral medication and in some circumstance nasal medication for hydration and water balance issues. Please stay on these medications as instructed and bring the bottle with you to the first post-operative appointment.

Additional Therapy:

Depending on your diagnosis, pre-operative symptoms and post-operative symptoms we may need to send you for additional treatments such as radiation, stereotactic radiosurgery, chemotherapy, physical therapy and possible speech therapy. Much of this is arranged in the hospital before your discharge. If there are questions please feel free to call the office or ask about it at the first post-operative appointment

We often ask you to get follow up imaging of the surgical site (MRI or CT scans) in the future. This will be discussed at the first post-operative appointment as well.

Questions:

Asking questions is the best way to get information. Please feel free to ask questions about the surgery and what was done. We will try to explain in the best way we can to help you understand what your problem was, how it was treated and what you should expect.

Thank you,

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