Patient Education Literature

We recommend that you read this handout carefully in order to prepare yourself or family members for the proposed procedure. In doing so, you will benefit both the outcome and safety of the procedure. *If you still have any questions or concerns, we strongly encourage you to contact our office prior to your procedure so that we may clarify any pertinent issues. An educated patient is the best patient.*

Caldwell-Luc Procedure

**Definition**
This procedure involves making a temporary opening into the maxillary sinus and re-establishing an opening into the sinus from the nose if necessary. The maxillary sinus is located behind the cheek.

**Purpose of Procedure**
This procedure is done for several reasons: to remove abnormal tissue growths, to treat infection, or to assist in repair of an injury to the eye socket.

**Preparation**
As with any procedure in which anesthesia is administered, you will be asked not to eat or drink anything after midnight on the evening prior to your surgery. If you are on medications that must be taken, you will have discussed this with us and/or the anesthesiologist and instructions will have been given to you. The procedure will not be performed if you are currently taking, or have recently taken any medication that may interfere with your ability to clot your blood (blood thinners, aspirin, anti-inflammatory medicines, etc...). *Please refer to the attached list and tell us if you took any of these within the past 10 days.* If your new medication is not on the list, alert us immediately so that we may ensure optimal procedure safety. We will have reviewed all of your current medications with you during the pre-operative consultation. You are obligated to inform us if anything has changed (medication or otherwise) since your previous visit.

**Procedure**
This operation begins with the use of packing material moistened with an anesthetic solution. Local anesthetic is also injected in several places inside the nose and through the roof of the mouth to help control bleeding and immediate post-operative discomfort. The packing is then removed. An incision is then made between the upper lip and gum tissue to expose the bony wall of the front of the maxillary sinus. Instruments are used to make an opening through the thin bony wall. This opening is then enlarged being careful to avoid injury to the tooth roots or the nerve that provides sensation to the cheek. The disease in the sinus is removed. In the case of facial fractures, repair is done. An endoscope is used to enlarge the natural opening into the sinus by working both through the nose and the sinus. Temporary packing will be used if necessary. The incision in the gums is then closed using suture material.

**Post Procedure**
Following the operation, ice packs may be used to reduce the swelling and the chance of bleeding. Discomfort will be managed with pain medication. If packing is used, it is usually removed within 2 to 3 days after the operation. Strenuous activity, lifting, and blowing your nose are not allowed for 2 weeks. Temporary use of over-the-counter nose sprays may be recommended. An antibiotic may be prescribed. Follow-up visits will be scheduled until healing is complete which may take 3 to 4 weeks. Post-operative pain medications may include a codeine type medication that may cause drowsiness. Operation of motor vehicles or machinery is not allowed while using this medication. Returning to work or school can occur as soon as pain medication is no longer needed during the day.
**Expectations of Outcome**
This operation should reduce the number of infections or make them easier to treat. Ideally, the lining of the sinus will return to a more normal thickness. If the operation is done to repair a fracture, the bones should heal in a more normal position.

**Possible Complications of the Procedure**
The Caldwell-Luc procedure is a safe one, however, there are uncommon risks to the procedure. While we have discussed these and possibly others in your consultation, we would like you to have a list so that you may ask questions if you are still concerned. It is important that every patient be made aware of possible outcomes that may include, but are not limited to:

- **Anesthesia complications**: There is always a small risk with general anesthesia. This risk is increased if there is any family history of trouble with anesthesia. The risks can range from nausea and vomiting to very rare life threatening problems. You can discuss any questions with your anesthesiologist.
- **Bleeding**, infection or scarring of the inside of the nose
- **Rare** complications include injury to the nerve that provides sensation to the cheek, upper lip and teeth, and an opening between the mouth and the sinus that does not close.

We provide this literature for patients and family members. It is intended to be an educational supplement that highlights some of the important points of what we have previously discussed in the office. Alternative treatments, the purpose of the procedure/surgery, and the points in this handout have been covered in our face-to-face consultation(s).