Operation Information

**Septoplasty / Submucosal Resection of Septum (SMR)**

### Introduction
Septoplasty / Submucosal Resection of Septum is an operation performed to straighten the deviated nasal septum.

### Indications
1. Nasal obstruction attributed by a deviated nasal septum
2. Obstruction of sinus opening leading to sinusitis
3. Epistaxis
4. Septal spur headache
5. Deviated nose attributed by deviated nasal septum

### Outcomes
The operation can reduce nasal obstruction, obstruction of sinus opening leading to sinusitis, epistaxis and septal spur headache. It can also improve nasal deformity attributed by deviated nasal septum.

### Procedures
1. The operation can be performed under local or general anaesthesia.
2. Through an incision inside the nose, the deviated nasal septum is corrected by mobilization, repositioning and resection.

### Possible Risks and Complications
1. Common risks and complications (>1%)
   i) Bleeding
   ii) Persistent nasal obstruction
   iii) Infection
   iv) Nasal adhesion
   v) Septal haematoma
   vi) Septal perforation, which may require another operation to repair
   vii) A chance of incomplete relief of deviation and recurrence
2. Uncommon risks with serious consequences (<1%)
   i) Temporary numbness may occur in the upper teeth
   ii) Saddle nose deformity / columella retraction
   iii) Loss of smell sensation
   iv) Cerebrospinal fluid rhinorrhoea
   v) Toxic shock syndrome
   vi) Death due to serious surgical complications

**The risks listed above are in general terms and the possibility of complications is not exhaustive. The patient should understand that even though all operations are carried out with utmost professionalism and care this does not rule out the possibility of complications arising. Further operation may be required to deal with the complications.**
Pre-operative Preparations
1. The procedure and possible complications will be explained by the doctor and a consent form must be signed prior to the operation.
2. Eating and drinking should be avoided for **at least six hours before** the procedure. (For general anaesthesia only)
3. The patient should change into a surgical gown after removing all belongings including undergarments, dentures, jewellery and contact lenses.
4. The patient should ensure his / her bladder is empty before the procedure.

Post-operation Instruction
1. Nasal packs will be inserted into the operated side or both sides. The patient may have to breathe through the mouth. The nasal packs will be removed after 1 – 2 days.
2. There may be mild bleeding after the packs are taken out, which usually stops naturally.
3. Small amount of blood stained nasal discharge is normal. The patient may also experience nasal stuffiness.

Advices on Discharge
1. Prescribed pain medication may be taken as needed.
2. The patient should immediately return to the doctor or hospital for professional attention in the event of persistent bleeding, increasingly blocked nose or sore etc.
3. Any follow-up consultations should be attended as scheduled.

Alternative Treatment
Medical treatment

Consequences of No Treatment
1. Persistent nasal obstruction
2. Sinusitis and its complications
3. Recurrent epistaxis
4. Persistent headache
5. Persistent nasal deformity

Should there be any enquiries or concerns, please consult the attending doctor. The attending doctor will be pleased to answer such enquiries and explain to you.

Under the professional care of the doctor, you will gradually recover. We wish you all the best during your treatment and recovery.

If you have any questions after reading the entire leaflet, please write them down in the spaces provided in order for the doctor to further follow-up.

Compiled by Union Hospital Consent Form Committee

The above information is for reference only, please enquire your physician for details
Our Hospital reserves the RIGHT to amend any information in this leaflet without prior notification