

G. Paul Doxey, MD

Trusted, experienced personal ENT care

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G. PAUL DOXEY, MD

Board-Certified: American Board of Otolaryngology

Residency: Otolaryngology–Head & Neck Surgery, University of Utah Medical Center, Salt Lake City

MD: University of Utah College of Medicine, Salt Lake City

TRUSTED CARE FOR:

- Sinus/nasal problems
- Snoring & sleep apnea
- CT-guided sinus surgery
- Balloonplasty
- Deviated septum
- Nasal blockage/polyps
- Nasal fractures
- Nosebleeds
- Ear pain & infections
- Voice & swallowing disorders
- Care of the professional voice
- Perforated eardrum
- Head & neck surgery/cancer
- Thyroid & parathyroid surgery
- Allergies & testing
- Salivary gland infections & surgery
- Nose reshaping (rhinoplasty)
- Facial or nasal fracture repair
- Otoplasty (correction of overly prominent or poorly positioned ears)
- Neck masses
- Facial wound repair & reconstruction
- Surgical removal of facial moles & tumors

TRUSTED CONVENIENCE:

- Convenient location
- Friendly, courteous staff
- Most insurance accepted & filed
- Major credit cards welcome
- Convenient office hours
- Ample free parking

Nosebleed instructions

The most common cause of nosebleeds is dryness. Southern Utah and Nevada have the ideal climate for this condition. Nasal bleeding can also be related to: sinus infections, excessive use of over-the-counter nasal decongestant sprays, nose picking, high blood pressure, nasal trauma, certain medications, or nasal tumors. The following suggestions may help you recover from nosebleeds and prevent their recurrence.

A. For Routine Nosebleeds:

1. It is important to lean forward and let the blood drip forward out of your nose. (Do not lie down flat on your back or tilt your head backwards while bleeding). If you allow blood to drain down the back of your throat, you will become nauseated and will likely vomit as blood is quite irritating to the stomach.
2. Forcefully blow any clot out of your nose so that you can breathe better. Paradoxically, this helps slow the flow of active bleeding.
3. Press the fleshy base of your nose together at the nostrils and maintain pressure for least five minutes.
4. Ice applied sometimes helpful (to the bridge of the nose) in slowing the blood flow to the nose.
5. See instructions in next section about moisturizing the nose and your body, sleeping while elevated, and keeping pressure away from your nose.

B. After Silver Nitrate Cauterization or Electrocautery

1. Anything that you can do to moisturize your body and, specifically, your nose is desirable.
2. Drink eight to ten or more glasses of water or other liquid per day, assuming that you are not on a fluid restrictive diet.
3. Use a cool mist humidifier by your bedside.
4. Squirt an over-the-counter saline nasal mist or spray (such as Ocean Nasal Spray) in each nostril every hour, while awake.
5. Various prescription ointments for the nose can be applied three to four times per day with a Q-tip. These may be prescribed by Dr. Doxey. Sleep with your head elevated on three or four pillows or rest in a recliner as this reduces the venous blood pressure in your nose.
6. Do not increase the pressure in your nose.
 - > Do not blow your nose until given permission by Dr. Doxey. If you can't get rid of nasal secretions, sniff back gently and spit them out.
 - > Do not lift anything heavier than 20 pounds.
7. Understand that Silver nitrate cauterization works about 80% of the time. You may have a few more nosebleeds, which should taper off completely over the next several days. Electrocautery is more effective than silver nitrate.

C. After Nasal Packing:

1. All of the above instructions apply except that one or both nostrils will be packed. Please use the same humidification procedures and place ointment and saline nasal sprays in the unpacked side of the nose, so it won't dry out.
2. Dr. Doxey will prescribe an antibiotic and pain medication when appropriate. Take them as prescribed.
3. The packing will be removed in the office or Dr. Doxey may instruct you to do it yourself at home.

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D. A Word About Clotting:

We assume that you have a normal clotting ability. Let us know if you have a family history of abnormal clotting or if you are taking Coumadin, Advil, or aspirin products that prolong clotting, or some other blood thinning medication. You may need to talk to your primary care doctor about discontinuing such medication temporarily. Tests may be ordered to determine if your blood clots normally.

If you have questions about these instructions, please feel free to contact Dr. Doxey's office.

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