

WHAT IS VIVAER PROCEDURE?

The Vivaer® Stylus is indicated for use in otorhinolaryngology (ENT) surgery for the coagulation of soft tissue in the nasal airway, to treat nasal airway obstruction by shrinking submucosal tissue, including cartilage in the internal nasal valve area.

Contraindications for VivAer Procedure:

- Patients who have had nasal surgery within the last 3 months.
- Patients with extreme nasal pathology or a history of extreme nasal injuries.
- Patients with medical conditions that may impair normal healing processes or be exacerbated by the stress of surgery.

Before Treatment:

- Discuss the use of any blood thinners with us prior to the date of the procedure.
 - It is likely you will be asked to discuss temporarily stopping this with your primary care physician prior to the procedure.
- Discuss your medical history include clotting/bleeding disorders or allergies to anesthetics
- Plan for a 1 hour appointment

During Treatment:

- Your nasal cavity will be numbed with anesthetic, injection of anesthetic into the nose can be uncomfortable, as this is a very sensitive region.
- The Vivaer device as well as an endoscope will be placed into your nose
- Temperature controlled energy will be applied inside of your nose. You will feel pressure and sometimes a warmth, but should not be painful.

Do not hesitate to research this treatment on your own at <https://vivaer.com/>

RISKS OF VIVAER PROCEDURE

Potential adverse effects related to the use of radiofrequency energy on tissue in the nasal airway include infection, bleeding, mucosal necrosis, scar formation with increased obstruction, external deformity, sensory changes at treatment site, inflammation/generalized redness,

temporary swelling/edema, blanching (generalized whiteness), temporary numbness/tingling, bruising including around the orbital area (black eyes), temporary soreness/pain, and disruption of mucosal flow/crusting.

INSTRUCTIONS FOLLOWING VIVAER PROCEDURE

During the first few weeks following your procedure:

- **You will experience some inflammation and tenderness at treatment site.**
- **Expect to have swelling and nasal congestion for several weeks following the procedure.**
- **You will also have crusting/mucus build-up at treatment site for several weeks.** See instructions below for wound care to manage crusting.
- You may experience some mild bloody discharge, especially after a nasal rinse.
- Call your doctor if you have any bright red bleeding or bleeding is heavy.
- Avoid blowing your nose for the first 1-2 weeks following the procedure
- Do not pick, pinch or manipulate the treatment area.
- You may use Tylenol or Ibuprofen as needed for pain control.

Wound Care following your procedure:

- **Please apply ointment to treatment area**, for the first 2 weeks please use the mupirocin ointment provided by your physician, apply to the nostrils 3 times daily for 2 weeks. Then switch to a generic/non-medicated ointment/gel such as Ayr nasal gel or Aquaphor. Please apply this 3 times daily for 2 weeks. Then you may transition to application at night before bed.
- **Please use nasal saline rinses** including Netti Pot or Neil Med Sinus Irrigation. Please perform this 1-2 daily for 3-4 weeks following your procedure.
- You may perform saline spray with Arm & Hammer Simply Saline Nasal spray starting the evening following your procedure, please perform nasal spray 5-6 times daily for the first few weeks following the procedure to help humidify the nasal cavity and soften crusting

Activities:

Most patients can return to normal activities the same day.

EXPECTATIONS

Most patients will see improvements to their nasal airway obstruction between 2 and 6 weeks following the treatment, while some patients may not experience improvement or the level of improvement they desired. You may require additional treatments.