

POST-OP INSTRUCTIONS

Ear Surgery

What to Expect After Surgery

- **Medications:** If antibiotics are prescribed, please take them as directed until they are all gone. You may take pain medication as needed, including over-the-counter medications such as Tylenol, Motrin, Advil, or Aleve. Prescription pain medications cause drowsiness, somnolence, nausea and constipation. Please refrain from driving, operating machinery or making important decisions when taking painkillers.
- **Diet:** In the immediate post-operative period, you may experience dizziness, nausea or vomiting. Start with a bland light meal or liquid diet, and resume a regular diet as tolerated. You may experience some earache with chewing and possibly some difficulty in fully opening the mouth.
- **Symptoms After Surgery:** The operated ear is usually packed and full of blood. It will feel clogged and you may hear crackling sounds; this is normal. On the side of the operated ear, the temple and the region around the eye may become a little swollen. You may experience numbness and tingling around your ear for up to several months after surgery. Sometimes there is a slight taste disturbance or metallic taste; this usually resolves after several weeks. Dizziness, nausea, and vomiting may occur for several days after surgery.
- **Post-operative Visits:** You should see your surgeon 1 week after surgery for a wound check and packing removal. You may have staples or sutures that will be removed; removal is simple and does not require anesthesia but there may be brief slight discomfort. You will have a follow up hearing test - The timing of your post-operative hearing test will be determined by your surgeon. After your ear has completely healed, yearly check-ups and hearing tests are recommended.

Post-operative Care Instructions

- If you have gauze wrapped around your head and ear, remove the gauze the day after your surgery. This is most easily done by using a pair of scissors to cut through the gauze. If you have a plastic ear cup, you may remove it on the day after your surgery and wear it as needed to protect your ear when you sleep or during other activities.
- Change the cotton ball in your ear when it gets soaked and replace it with a clean cotton ball. Occasionally, a part of the packing will come out of your ear when you remove the cotton ball; this is normal and not a cause for concern. It is not necessary to use a band aid or adhesive tape to hold the cotton ball; Use a little antibiotic ointment to make the cotton ball stick.
- You may have a small incision and staples behind your ear. Keep it dry for 48 hours after surgery. Afterwards, you may allow the incision to get wet, but do not scrub at the incision or allow it to soak underwater. Often there are absorbable sutures under the skin that will come out on their own. After 48 hours, you may clean the incision with soap and water, then apply some antibiotic ointment (such as bacitracin) twice daily.
- Do not allow any water to enter the ear canal on the operated side. Protect the ear when showering or washing the hair with a cotton ball coated with Vaseline. It is a good idea to have someone help you with washing your hair. When finished washing, remove the coated cotton, wipe the ear with a soft paper tissue and place a clean, dry cotton ball. A little antibiotic ointment may help the cotton ball stick and stay in place. A shower cap provides extra protection.

CONTINUED ON BACK.

EAR SURGERY POST-OP INSTRUCTIONS (continued)

- Thick, dark or bloody ear drainage is expected during the first week after surgery. You may gently clean the crusting from the outer part of the ear with peroxide and Q-tips®. Replace the cotton ball in the ear with a clean, dry piece as needed. Occasionally, you may see brown or dark red pieces of packing coming out of the ear canal. Do not attempt to replace them or to remove the remaining pieces that are still in the ear canal.
- Do not blow your nose for at least two weeks from the day of surgery. Blowing can build excessive pressure in the operated ear and displace the reconstructed or grafted eardrum. If you have to sneeze, please do it with your mouth wide open to avoid pressure build up in your ear. Avoid air travel until cleared by your surgeon to do so.
- Try to sleep on the unoperated ear.

When to Call After Surgery

- Excessive headache, severe attacks of dizziness or vertigo or intractable vomiting
- Pus-like or foul-smelling discharge from the ear
- Temperature above 102°F
- Facial paralysis on the operated side (inability to close the eye and crooked smile).

Please note: We do not refill prescription pain medications over the phone and we are unable to refill your medications on weekends or after hours. For prescription refills, please call during office hours.