



SOUTHERN UTAH
Ear, Nose and Throat

POST-OP EAR INSTRUCTIONS

(Tympanoplasty and/or Mastoid Surgery)

Ear surgery is normally uneventful, with few, if any, complications. This instruction sheet is designed to answer common questions concerning your surgery.

Dressing:

Your doctor will see you in the office within the first week after surgery. It is not unusual to have bloody drainage on the gauze. After this, you should remove and change the cotton ball in the ear canal daily. However, the tapes behind the ear (steri-strips) protect the incision and should not be disturbed. You will be seen again in six weeks for a follow-up visit that will include a hearing test after you have been seen.

Diet:

There are no restrictions, but after a general anesthetic, it is best to start with clear liquids on the first day and advance to a regular diet over the next 24 hours.

Medications:

Pain medications and antibiotics should be taken as prescribed in the post-operative period.

Precautions:

1. Do not blow your nose until you are given permission. Secretions in the nose should be sniffed back into the throat and expectorated. This is especially important if you develop an upper respiratory infection or common cold.
2. Do not "pop" your ears by holding your nose and blowing air through the Eustachian tube. If you must sneeze, do it with your mouth open.
3. Do not allow water to enter the ear until advised by your doctor. Until that time, insert a cotton ball covered with Vaseline into the cup of the ear, covering the ear canal, when showering or washing the ear.
4. Do not take unnecessary chances of catching a cold or upper respiratory infection. Avoid exposure and fatigue. If you develop an upper respiratory infection, call your doctor.
5. You may anticipate some pulsation, popping, clicking and other sounds in your ear as well as a feeling of fullness. Occasional sharp shooting pains are not unusual. At times, it may feel as if there is liquid in the ear.
6. Do not plan to drive yourself home from the surgery. Air travel is discouraged for three weeks after the operation. When changing altitude, you should remain awake and chew gum to stimulate swallowing.
7. Do not perform any heavy lifting (over 20 pounds) or vigorous physical activity for three weeks after surgery.

Dizziness:

Mild dizziness may occur when you move or turn your head and need not concern you, unless this becomes progressively worse.

Hearing:

Rarely is hearing improvement noted immediately after surgery. It may even worsen temporarily due to swelling of your tissues and packing in the ear canal. You should expect improvement in six to eight weeks with maximal hearing improvement in three to four months.

Discharge:

A bloody or watery discharge may occur during the healing period. The outer ear cotton ball may be changed daily if necessary, or even more frequently. A honey-colored or foul-smelling drainage usually indicates an infection and your doctor should be notified.

Pain:

Mild intermittent ear pain is not unusual postoperatively. However, this should decrease after the first few weeks. Pain above or in front of the ear is common when chewing. If you have persistent ear pain that is not relieved by Tylenol or the prescribed narcotic pain medicine, call your doctor at Southern Utah Ear Nose and Throat.