Postoperative Instructions for Ear Surgery

BEFORE SURGERY

- No blood thinners including Aspirin, Coumadin, Xarelto, Plavix, and Eliquis. (If this applies to you, please ask the prescribing Doctor when to stop and restart this medication in regards to your surgery. Please bring in a written and signed copy of the instructions from your Doctor regarding your blood thinner.)

- No over the counter pain medication except for Tylenol 1 week before and 1 week after your surgery. This includes brand names Advil, Motrin, Aleve, and generic ibuprofen, naproxen.

- You will be contacted by phone the night before surgery and given your arrival time. Usually you are instructed to arrive 2 hours before your surgery start time.

- Please eat your normal dinner and drink non-alcoholic fluids the night before surgery. Nothing to eat or drink after midnight. No breakfast or beverages (nothing by mouth) the morning of your surgery.

- Please wash your hair the night before or the morning of surgery.

[ ] INCISION BEHIND YOUR EAR

Your surgery MAY require an incision behind the ear. A pressure dressing, made up of a soft plastic cup over the ear and Velcro-fastened strap may be applied to reduce swelling. The gauze under the “cup” can be changed as often as needed, and this entire dressing can be removed 24 hours after surgery.

The incision behind the ear is closed with absorbable sutures under the skin, and “skin glue” on the outer skin edges. There are no sutures or staples that need to be removed.

The incision should be kept dry for 3 days after the surgery. You may shower and wash your hair after 72 hours, but avoid soaking or scrubbing the area behind the ear.

Petroleum-based ointments (like Vaseline) should not be used on the incision during the first week after surgery, since it causes the skin glue to dissolve. After 1 week, the skin glue has done its job in helping the incision to heal and it may be peeled off. You can also allow it to come off on its own, which usually happens in about 3 weeks after surgery. If you like, the application of some Vaseline can make the glue easier to remove after the first week.
INCISION IN THE EAR CANAL

Your surgery required an incision in the ear canal. The ear canal has been packed with antibiotic ointment and absorbable packing sponges to help hold the skin and eardrum in place. Keep a dry, clean cotton ball in the outer part of the ear for the first week. Some of the ointment and packing may come out on its own. It is common to have some red, pink, yellow, orange drainage from the ear canal over the first few weeks, this should decrease in amount as you get further out from surgery. Once the drainage stops, the ear canal can be left open, without using any cotton.

The ear canal must be kept dry until it fully heals. Whenever you wash your hair or shower, you need to use an earplug to keep water out. The best way to do this is to saturate a cotton ball with Vaseline, and place it in the outside bowl of your ear. This can be smoothed against the outer ear to create a watertight seal. Dry cotton will draw water into the war, which is what should be avoided, so please be sure to use the cotton ball with Vaseline to prevent water in the ear. Continue to do this until specifically instructed by your surgeon to stop. It usually takes about 2 months for the ear canal to fully heal before water is allowed back into the ear.

HEARING

Because of swelling, fluid, and packing placed in the ear canal after surgery, hearing will be worse right after surgery. It often takes about 2 months for enough healing to take place for the hearing to begin improving.

Often as healing occurs, there will be occasional sounds like crackling, popping, squeaking, echoing, and/or pulsing. This is pretty common and goes along with the healing process. Hearing may also fluctuate somewhat as air begins to return to the middle ear.

MEDICATIONS AFTER SURGERY

[ ] Pain medicine – You have been given a prescription for pain medicine. Take this as directed for any discomfort. Watch out for constipation, a common side effect of pain medications. Ok to take fiber and a stool softener like Colace after surgery, and drink plenty of fluids.

[ ] Antibiotics – You have been given a course of oral antibiotics. Take this as instructed until they are gone. A common side effect of antibiotics is loose stools, this should resolve after you finish your antibiotics. Please eat yogurt, or take an over the counter probiotic if you get diarrhea.

[ ] Eardrops- You have been given a prescription for eardrops. Use these 2 times a day; let the drops soak into the packing material in the ear canal. Continue the drops until you are instructed to stop.

• A medication can be provided to you if you are dizzy after your surgery.
• Call with any medication issues or questions.
ACTIVITIES AFTER SURGERY

• Avoid blowing your nose or “popping” your ears by holding your nose and blowing. This can force air into the middle ear, and disrupt healing. Wiping the nose or sniffling is fine.
• Try not to sneeze. If you have to sneeze, sneeze with your mouth open to allow the air to escape, and not be forced into the ears.
• Avoid any heavy lifting (over 25 pounds) or strenuous exercise for the first two weeks.
• Avoid bending with the head down for 2 weeks. If you must bend, bend at the knees, and keep your head up as much as possible.
• You may sleep however you are most comfortable. Keeping the head somewhat elevated while sleeping will help reduce swelling over the first week.
• Patients will often have some dizziness or balance problems following surgery. You should avoid driving, climbing, or operating hazardous equipment until your balance has stabilized at a safe level.
• Avoid airplane flights for the first 2 weeks following surgery, ideally no flying 1 month after surgery. If you have specific travel plans that would conflict with this, please discuss this with your doctor.

POST OPERATION SYMPTOMS

It is normal after surgery to have some pain, ear drainage, muffled hearing, dizziness, tiredness/nausea from anesthesia.

Call us if you experience any of the following:
• Increasing redness, swelling or pain around the incision site.
• The presence of thick or foul-smelling drainage.
• Progressive or severe dizziness, with vomiting or balance issues.
• Fevers, chills, flu-like symptoms, severe headache, or stiff neck.
• Any other problems that concern you.

CONTACT INFORMATION

If you have questions or concerns after your surgery, please call the Stanford Ear Institute Post-Op phone line at 650-863-4267 to speak with a Registered Nurse between 8:00am – 4:30 Monday through Friday.

For emergencies after normal business hours or on weekends, please call the Stanford Medical Center page operator at 650-723-6661 and ask to speak with the ENT resident doctor on call.

If you need to speak with us about scheduling follow up appointments, please call: 650-723-5281.

YOUR POST OPERATION APPOINTMENT: