

Middle Ear Surgery Perioperative Instructions

We would like to make sure all your questions are answered before your procedure. We previously discussed the risks, benefits and alternatives to having the procedure at your pre-operative appointment, but please contact us if you have further questions.



In this informative video, Dr. Manning discusses the basics of middle ear surgery. <https://www.youtube.com/watch?v=4zSTCyc-qlw>. If you would like to learn more, we would like to direct you to the trusted information at this website <http://www.entnet.org/content/patient-health>

- It is important for your care team to know about your medications. If you take any medications regularly, please write each one down. Include dose amount and how often medications are taken. Remember to bring this list with you to your procedure. Be sure to leave your medications at home.



If your health history requires it, do not forget to obtain written clearance for anesthesia from your PCP or appropriate physician. This would have been discussed at your pre-operative appointment.



If your health history requires it, do not forget your pre-surgical testing at the surgery center. This would have been arranged at the time you scheduled surgery. You **DO NOT** have to fast for this work up.

Appointment date/time: _____

- Illness can interfere with your procedure, so please let us know if you are experiencing any flu-like symptoms such as fever over 100F, chest congestion, wheezing, vomiting, diarrhea or ongoing cough with mucous (phlegm).

One Week Before Surgery

- **For one week prior to procedure, DO NOT** take any medications that contain aspirin, ibuprofen or naproxen. Also, discontinue use of herbal medications and supplements. These medications interfere with blood clotting and may increase the risk of bleeding during and after surgery. Aspirin is found in several over-the-counter medications, for example, Anacin, Pepto-Bismol and Alka-Seltzer Cold. Ibuprofen is an ingredient in medications such as Advil, Motrin and Pediaprofen. Naproxen sodium is found in Aleve. Some supplements and herbal medications such as omega 3, flaxseed oil, fish oil and ginkgo biloba may also increase the risk of bleeding. Check with your pharmacist or refer to information provided about the content of medications.



For pain or fever, you can take acetaminophen (Tylenol) or the pain medication prescribed by your doctor, **but not both**. Acetaminophen does not increase the risk of bleeding but too much can be

harmful to your body. Many prescription pain medicines including Norco, Vicodin, Percocet and Tylenol with codeine contain this ingredient. Be sure to check the contents of your prescription pain medications.

- If you have been prescribed a blood thinner by another physician for a health condition, be sure to speak to them about when to stop/restart these or an alternate plan.
- Make arrangements for your post-operative care. As you prepare for your procedure, we encourage you to identify a care plan partner to support you during your recovery. It is important to have someone help you for at least the first 24 hours after your procedure.



You'll appreciate having a family member or friend help you at home after surgery to assist with routine activities like cooking, bathing and getting around. If you are unable to get assistance, please let us know.

- Smoking anything or using tobacco products can cause problems during and after your procedure. We want your recovery to be as smooth as possible, so please stop using any of these now. If you need help quitting, please speak with your primary care doctor.

Before Your Procedure

- **Driving after your procedure**

We don't want you to drive following your procedure, so please make arrangements for someone to drive you home after you have been discharged. You must also wait at least 24 hours after you have had anesthesia to resume driving.



Driving may resume as soon as you are no longer taking prescription (narcotic) pain medication, you are comfortable, have the ability to turn your head from side to side and are able to control your vehicle in the event of an emergency.

- **It's important to stay well hydrated after your procedure** so go ahead and stock up on items you will need. We recommend you eat or drink whatever feels most comfortable after your procedure. In our experience, most find that clear fluids and soft foods are the most easily tolerated during the first 24 hours. Liquids such as water, apple juice and ginger ale are fine. Acidic liquids (orange juice, lemonade) can upset your stomach, especially if you are not eating a regular diet.



Did you know that drinking lots of fluids will help speed up your recovery and reduce your discomfort? It may feel difficult to swallow at first, but the more you drink and swallow, the less pain you will have.

The Night Before Your Surgery

- **Don't Eat or Drink Anything After Midnight**

- It's important to not eat or drink ANYTHING after midnight unless we have advised you otherwise. This is to prevent you from vomiting when you are put to sleep which could cause a problem in your lungs

and elsewhere. You can take your usual medications with a sip of water unless your prescribing doctor(s) has told you otherwise. Nothing to eat includes mints, candy, cough drops and gum. Even a nibble may be grounds for cancelling your surgery.

If your procedure is after noon, you may have CLEAR liquids **up to two hours prior to arriving** for your procedure. This includes black coffee, chicken broth, Gatorade, apple juice and plain Jell-O (no fruit, etc. added in)

Day of Surgery

- Someone from our office will call you a day in advance to advise you on when to arrive for your surgery. Bring reading material if you would like as your arrival time will be a couple of hours before your surgery.

Surgery date/time: _____

Things to Bring with You to Your Procedure

- In addition to your medication list, bring any inhalers that you use, a case for eyeglasses or contacts, your insurance card and enough money for any co-payments and/or prescriptions. If you have a Social Security card or number, bring either with you as well. **DO NOT BRING** your medicines (except inhalers), jewelry (a wedding ring is OK), credit cards or large amounts of money.
- It's common to have a low-grade fever during the first week of recovery. However, if you feel feverish and your temperature is 102F or greater (oral thermometers are the most accurate), let us know as soon as possible.



Reminder: It's common to feel "down" a few days after a procedure. This may last for a few hours or a few days, and you may feel emotionally exhausted. Don't worry, this is a normal response and it will go away as you recover.

- You may shower after your procedure. However, **DO NOT allow any water to enter your ear** for four weeks following surgery. When showering or bathing, place a cotton ball coated with Vaseline or antibiotic ointment or an earplug in the ear where the procedure was performed. **DO NOT** swim, use a hot tub or get your ear under water until we have advised you to do so.
- You will need to place a cotton ball coated with Vaseline or antibiotic ointment in ear for a week following surgery. This is in addition to your water precautions. Change cotton ball out for a new one twice a day.



You can expect to have some mild, thick, dark or bloody drainage from your ear the first 12-24 hours. If you need to change more than 12 cotton balls in 24 hours because they are bloody, let us know as soon as possible.

- If an incision was made behind the ear, you will have sutures behind the ear that will dissolve on their own. You may also have some outward protrusion of the ear due to swelling. There may be some

redness around the incision site and numbness over and behind your ear. These are normal and will improve over time. If the redness spreads or swelling worsens, let us know.



You may gently clean the incision site using hydrogen peroxide. Dip a cotton-tipped applicator into peroxide and gently roll the applicator over the incision. Place a small amount of antibiotic ointment directly onto the incision. This will help remove old dried blood and scabs and will promote better healing.

24-72 Hours After Your Surgery

- Now that the procedure is behind you, let's focus on keeping you comfortable and work toward a strong recovery. You're probably feeling uncomfortable today, but it is important to get up and move around a bit (following our instructions) at least three times each day. Movement helps to prevent blood clots and preserve your muscle strength.

Pain management

- Many patients experience some discomfort after surgery which may affect how they eat, drink or sleep. There may also be some throat discomfort from the breathing tube used during anesthesia. The degree of pain will vary during recovery and can last up to 14 days following surgery. You will be prescribed pain medication that can be administered every 4-6 hours for the first few days after surgery. We recommend you transition to over-the-counter Tylenol after a few days, using prescribed pain medication for breakthrough pain only.



Constipation and nausea are common side effects of narcotic pain medicine. Stool softeners, a high fiber diet, apple juice or prune juice and drinking plenty of water help prevent constipation. Taking your narcotic with food helps decrease nausea.

- Some dizziness and nausea, as well as dampness, fullness, popping, crackling, ringing and/or clicking sounds in the ear is normal after surgery. You may also notice your hearing is muffled (due to the packing in your ear). These symptoms will improve over time.



If the dizziness is severe or if you develop vomiting, please let us know. If there is any bleeding from your mouth or nose, go to the nearest emergency facility for immediate attention.

- It is normal to experience some voice changes and have a sore throat from the breathing tube after anesthesia. If your voice change/hoarseness and sore throat persist more than a week, let us know.

For two weeks after surgery

- Generally, it takes 3-7 days to recover from ear surgery. However, some patients may take up to two weeks to recover. You should take it easy for the first week after your procedure, gradually resuming normal activities. Do not engage in strenuous activities such as sports and exercise for at least two weeks. Avoid activities that risk injury to the ear for six weeks following procedure.



We do NOT recommend that you travel long distances the first two weeks, as this is when issues are most likely to arise. It makes sense for you to be able to get back to us quickly in case you have any problems following your procedure.

- **DO NOT blow your nose** or do anything to pop your ear for at least four weeks following your procedure to prevent bleeding and inadvertently shifting the graft that is in place. If you must cough or sneeze, do so through an open mouth.



You can use saline nasal spray for nasal crusting and congestion. Also, control any allergic/nasal symptoms with appropriate medication to help reduce sneezing, coughing and nasal drainage.

- **Do not lift anything over 20 pounds**, including a child, for the first two weeks following your procedure. The strain of lifting puts pressure on blood vessels in the process of healing, causing them to re-open and bleed.
- Mild facial weakness may be noted around your eye, lower lip and cheek on the side of your procedure. Your smile may be a bit crooked and you may be unable to pucker your lips or close your eyelid completely. This should improve over time.
- Rare but important symptoms: Although rare, it's important to be aware of symptoms that require urgent care. If you suddenly have trouble breathing, have pain while breathing deeply or start coughing blood, call 911 or go to the nearest Emergency Room.

Postoperative appointment (generally four weeks after procedure)

- We look forward to seeing how well your recovery is going since your procedure. Please don't forget your already scheduled follow-up appointment in our office. If you don't remember the date, please let us know at 479-750-2080.

Appointment date/time: _____

- There will likely still be packing in your ear canal that we may clean out at your post-op appointment. If you were given a prescription for ear drops after surgery, wait to use them 3-5 days before this follow-up appointment. There will still be packing in the middle ear that is continuing to dissolve so your hearing may still be somewhat muffled.
- Remember to continue following water precautions and do not blow your nose or pop your ear until you have been advised otherwise.



If you need to communicate with your Care Team directly during business hours, please call our main phone number at 479-750-2080. If at any point you need urgent medical attention, please call 911 or go to the nearest emergency room.