

GENERAL INSTRUCTIONS FOR EAR SURGERY
(TYMPANOPLASTY, OSSICULOPLASTY, MASTOIDECTOMY)

INTRODUCTION:

The purpose of this sheet is to acquaint you with what you should and should not do following ear surgery. These instructions are based on experience and must be followed faithfully to assure a smooth recovery. Be sure that you and those who will be caring for you are familiar with these postoperative procedures. If you have any questions, please call Dr. Benke's office at (817) 641-3750.

ADVANCE PREPARATION:

Arrange for someone to care for you immediately following your surgery. You may still be groggy when you are released, so you will need a ride home and someone to remain with you for at least the first 24 hours. Since you cannot drive for one week, you will need transportation to and from your first office visit. You will have a follow-up visit at 6-7 days after surgery and then at 4 weeks. A post operative hearing test will be performed at 8 weeks. Obtain the items that you will need for your postoperative home care: Q-tips, Hydrogen Peroxide, Bacitracin ointment. Be sure that comfortable clothing is available for your recovery period—nothing that must go over your head. Make every effort to be well rested prior to surgery.

DAY OF SURGERY:

Wash your hair and face; wear comfortable clothing to the hospital (something that buttons up the front). Do not wear makeup or fingernail polish. When you are discharged from the hospital you will be given prescriptions for pain medicine, antibiotics, anti-nausea medication, and ear drops. Take these as directed. Start "at home" care on the first night.

AT HOME:

- 1) If you had a small incision made behind the ear that is covered with Steri-strips, keep the strips clean and dry. DO NOT wash your hair until day 6 or 7.
- 2) If you had a large incision made behind the ear, you will have a Glasscock dressing in place. Dr. Benke will remove and replace this on the next day after surgery. Remove it on post-op day 2 and begin wound care. DO NOT wash your hair until Dr. Benke sees you at day 6 or 7.
- 3) DO NOT blow your nose until such time as your doctor as indicated that your ear as healed.
- 4) DO NOT pop your ears by pinching your nose and blowing air. Remember to sneeze with your mouth open.
- 5) DO NOT allow water to enter the ear until advised by Dr. Benke that your ear is healed. When you shower or wash your hair, put a cotton ball covered in Vaseline in the outer ear opening.
- 6) It is normal to experience some pulsation, popping, clicking and other sounds in the ear, and also a feeling of fullness in the ear. You may also feel like there is liquid in your ear at times.
- 7) Minor degrees of dizziness are normal. Please call the office if the dizziness increases.
- 8) Rarely is a hearing improvement noted immediately following surgery. It may even be worse temporarily due to swelling and packing in the ear canal. It may take 6-8 weeks for an improvement to be noted. Maximum improvement may take 4- 6 months.
- 9) A bloody or watery discharge may occur during the healing period. The cotton ball in the outer ear may be changed if necessary, but, in general the less done to the ear the better. Call the office if you notice any yellow drainage from the ear.
- 10) Mild, intermittent pain is not unusual during the first 2 weeks. Pain above or in front of the ear is common when chewing. If you have persistent ear pain that is not relieved by pain medication, call the office.
- 11) Begin using your ear drops the day after surgery, unless instructed otherwise. Place 4 drops in the ear three times a day. If a wick sponge is present in the ear canal make sure it is saturated with the drops. The sponge will be removed at day 6-7. If no wick sponge is present, then place a cotton ball to prevent the drops from running out. Continue using the drops until advised by Dr. Benke.
- 12) Notify the office or answering service immediately if you have:
 - *bleeding from the ear that soaks more than one bandage
 - *fever of 101F or higher
 - *pain that doesn't respond to medication
 - *ongoing dizziness
 - *nausea or vomiting not responsive to Phenergan
- 13) Call Dr. Benke's office if you have questions or concerns at (817) 641-3750.