

Tympanoplasty

POST OP INSTRUCTIONS TYMPANOPLASTY, MASTOIDECTOMY AND/OR STAPEDECTOMY

Do not blow your nose. Cough or sneeze with an open mouth. Blowing your nose, coughing, or sneezing increases pressure inside your ears and may damage the results of the operation. If you must cough or sneeze, do so with your mouth open. Dr. Ward will tell you when you can blow your nose again.

Do not allow water to enter the ear until advised by Dr. Ward that the ear is healed.

You may anticipate a certain amount of **pulsation, popping, clicking**, and other sounds in the ear. You may also have a feeling of fullness in the ear. At times it may feel as if there is liquid in the ear.

Do not remove the packing from your ear canal. You may change the cotton in the opening, but do not take anything out of the ear canal. Keep your ear dry until Dr. Ward tells you to wash it.

Avoid rapid head movements. Restrict your activities so that you do not move your head quickly. Quick head motions may damage your operation. Dr. Ward will tell you when to resume normal activities.

Take antibiotics if prescribed by Dr. Ward. They may be necessary to avoid infection(s). Pain medication may also be prescribed. Use the prescribed ointment on the incision twice daily.

Use ear drops if prescribed by Dr. Ward. Put them right on the packing in your ear. They will soften the packing and make it easier for Dr. Ward to remove. Begin using the drops one week after surgery.

Call Dr. Ward if there is any evidence of fresh bleeding, unusual pain, swelling, fever, dizziness, nausea, vomiting, or disorientation.

Do not wash your hair or get your ear(s) wet until allowed by Dr. Ward.

Make an appointment to see Dr. Ward 12 days following your surgery by calling the office at (509) 334-5876.

Rarely is a **hearing improvement** noted immediately following surgery. It may be worse, temporarily, due to swelling of ear tissues and packing in the ear canal. An improvement may be noted six to eight weeks after surgery. Maximum improvement may require four to six months.

A bloody or watery discharge may occur during the healing process. The outer ear cotton may be changed twice daily, but, in general, the less done to the ear the better. A yellow (infected) discharge at any time is an indication to call our office and arrange to see Dr. Ward immediately.

Mild ear pain is not unusual during the first two weeks. Pain above or in front of the ear is common when chewing. If you have persistent ear pain, not relieved by the pain medication, call our office and arrange to see Dr. Ward.