This instruction sheet is designed to help you care for your ear following surgery, and to answer many of the commonly asked questions. Please read the entire sheet carefully. Don’t hesitate to call our office 613-544-3400 x3620 if you have a question or concern. If Mary cannot answer your questions, the doctor will return your call or you will be asked to come to the office.

Leaving the Hospital

- You will typically receive a prescription for pain medicine. You will not routinely receive an antibiotic because there are antibiotics in the ear canal.
- If there is a dressing, this should be removed and discarded the day following surgery. If a stay over night is needed, this may be done before you leave the hospital, but it is preferable to leave the bandage in place for the ride home.

Home Care-The First Few Days

- First 24 hours after surgery:
  - Remove all gauze from around the ear, including the telfa (shiny thin gauze) covering the incision
  - Remove the cotton ball from the outermost part of the ear canal.
  - Replace cotton ball several times daily as needed to absorb the drainage.
- It is normal to see blood-tinged or brown drainage from the ear for several days.
- If the drainage becomes yellow, green, or has a foul smelling odor, please call the office.
- The ear canal will be filled with dissolvable packing, which should be left in place.

  **Do not clean ear canal with cotton swabs.** Clean the outer ear with a soft cloth or cotton swabs to remove dried blood, but if the ear is tender this is not necessary.

- You may wash your hair 2 days after surgery but **keep all water out of the ear canal.** Use a cotton ball coated heavily with antibiotic ointment and place it in the outermost part of the ear canal.
- If there is an incision behind the ear, the sutures are absorbable. Apply antibiotic ointment to this incision twice a day.
- Do not bend over for 1 week after surgery. If you must bend, bend from the knees, not head-first from the hips. This will prevent pressure build-up in the head.
- Do not blow your nose for 3 weeks after surgery. Sniffing is okay. After 3 weeks you may blow your nose gently, one side at a time. Sneeze or cough with your mouth open for 3 weeks after surgery.
- You may fly 3 days following surgery. Whenever you fly, take an over the counter decongestant 30 minutes before take-off. Before the plane begins to descend, spray your nose with the decongestant nasal spray. Use this procedure whenever you fly in the future. You may use the same treatment when traveling by car in mountainous regions.
- No vigorous physical activity, including sports, until seen for your post-operative visit. With exception of these restrictions, you may return to work or school as overall condition permits. After 3 weeks you may resume all activities, including sports and physical exercise.
- You may hear a variety of noises in your ear such as cracking or popping. This is part of the normal healing process.
- Dizziness or lightheadedness is normal for up to 1 week after surgery.

**Home Care - After the First Few Days**
- Drainage should begin to decrease and pain should also subside. Please continue taking Ibuprofen or Tylenol for relief of mild pain. It is normal for the top ½ of the ear to feel numb and this will take several months to return to normal.
- There may be change in taste (usually described as metallic) on one side of the tongue and this usually improves within several months.
- All stitches are under the skin and will not need to be removed.
- **Continue to keep all water out of the ear canal.**

**First Follow-up Appointment**
- You will be given a follow-up appointment with Dr. Beyea prior to leaving the hospital.

**Call office if:**
- Increased pain not relieved by prescription medications.
- Large amounts of bleeding from the ear area.
- Pus/Foul smelling drainage from the ear.
- Redness in the ear area.
- Temperature over 38°C on 2 consecutive readings.
- Severe dizziness.