

Postoperative Instructions

Middle Fossa Surgery

Abraham Jacob, MD Ear & Hearing @ Center for Neurosciences

This instruction sheet is designed to help you care for your ear(s) following surgery, and to answer many of the commonly asked questions. *Please read the entire sheet carefully.*

Leaving the Hospital

Typically, this is an outpatient procedure. Most people leave the hospital with a prescription for antibiotics, pain medication, and anti-nausea medication. The pain medication and anti-nausea medication are "as needed" medications and do NOT have to be taken if there isn't much pain or nausea.

Home Care-The First Few Days

- Do not place Q-tips into the ear.
- The auricle (outer part of the ear) can be wiped gently with a soft cloth or cotton swabs to remove dried blood/crusting, but if the ear is tender this is not necessary.
- You may wash your hair and clean both the auricle as well as the incision line 72 hours after surgery. Keep all water out of the ear canal by using a cotton ball that is soaked with either antibiotic ointment or Vaseline.
- The incision can be cleaned with soap/shampoo and water 72 hours after surgery. A thin layer of antibiotic ointment (Neosporin, Polysporin, Bacitracin, etc.) is helpful for the first few days following surgery. Do not use antibiotic ointment for more than 5-7 days.
- Do not bend over for 4 weeks 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. If excess pressure builds in your head, this increases your risk of spinal fluid leakage (from incision, ear canal, or nose).
- Do not blow your nose for 2-3 weeks after surgery. Sniffing is okay but should be done gently. After 3-weeks you may blow your nose gently, one side at a time. Sneeze or cough with your mouth open during the first week following surgery. Using an open-mouth will prevent stifling the sneeze and causing pressure buildup in the ears.
- No strenuous physical activity, including sports, for 4 weeks after surgery. With the exception of these restrictions, you may return to work or school as overall condition permits.
- You may fly after surgery. Whenever you fly, take an over-the-counter decongestant 30-60 minutes before take-off. Then, before the airplane begins to descend, spray your nose with Afrin decongestant nasal spray. Use this procedure whenever you fly in the 3-months following surgery. You may use the same treatment when traveling by car in a mountainous region. Please note that many patients have varying degrees of Eustachian tube dysfunction; therefore, some pressure or pain may occur despite these precautions.
- 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 1-2 weeks after surgery. You should notice that this is improving with time.
- Tinnitus (ringing in the ear) is also noted by some patients. Many hearing loss patients have tinnitus preoperatively. Since this phantom sound is centrally generated by the brain rather than the ear, it is difficult to predict its natural history. For most patients, tinnitus improves with time.



Home Care-After the First Few Days:

- Drainage and/or pain should subside.
- You may continue taking Tylenol or Ibuprofen as needed after your prescribed pain medication runs out. Rarely, if pain remains severe, we may prescribe additional narcotic pain medication; however, we will only do this after the site has been examined in the office to make sure there is no infection or other complication.
- Continue to keep water out of your ear canal indefinitely using a cotton ball with Vaseline during showers.
- Please make sure you are doing "jaw exercises" as Dr. Jacob discussed with you so as to prevent developing trismus (i.e. trouble opening your jaw fully).

Your First Follow-up Appointment:

- You will need to make arrangements with one of Dr. Jacob's assistants at Center for Neurosciences to have your stitches removed about 10-14 days postoperatively.
- Dr. Jacob's assistant will then set another appointment about 4-6 weeks from surgery with Dr. Jacob. He will examine/clean the ear canal at that visit.
- Lastly, please make sure that a new visit with new audiogram and Temporal Bone CT Scan is set up about 4 months from the surgery date.

Call Ear & Hearing @ Center for Neurosciences (520-795-7750) if you observe:

- Increased pain not relieved by Tylenol or Ibuprofen.
- Large amounts of bleeding from the ear.
- Pus/Foul smelling drainage from the ear.
- Redness in the ear area.
- Temperature over 101.5° on 2 consecutive readings.

Patient or Caregiver Signature:	
Date:	