The Patient Following Ear Surgery
(Tympanoplasty, Mastoidectomy, Myringoplasty)

Thank you for allowing MCGHealth Otolaryngology/Head and Neck Surgery to serve you for your health care needs. We know you had a choice in where to have your surgery and we’re glad you chose us.

This information is to help answer some of the questions you may have about your operation and to give you instructions to follow during your recovery period. If you have any other questions, please ask them.

Activity:
- Limit your activity for the next 24 hours. You may then gradually resume your usual activities as you feel wish.
- No heavy lifting or pushing, active sports, strenuous exercise or heavy household work for 2 week. Objects that cannot be lifted with one hand are considered too heavy. You may walk and do light household activities.
- Protect your ear from injury.
- Do not swim until healing has taken place (generally 3 to 4 weeks following surgery). You may travel by airplane 2 to 3 days after the ear surgery unless instructed otherwise.
- For your comfort you may sleep with your affected ear covered.
- You may plan to return to work in one week or as instructed.

Wound Care:
- It is common for you to have some dizziness and nausea. This will gradually go away over the next 2 to 3 weeks.
- The outer ear dressing can be removed on the second day after surgery. Underneath this you may find an incision behind the ear as well as a cotton ball in the opening of the ear canal. The cotton ball can be changed daily after being coated with Vaseline or an antibiotic ointment as needed. If the dressing is a band-aid and a cotton ball, the band-aid and cotton ball can be changed as needed for the first few days then discontinued. Antibiotic ear drops typically start 10 days after the surgery.
- The packing in the ear canal should not be removed.

Diet:
- You may return to your diet once you go home from the hospital.
- Drink plenty of fluids: 6 to 8 glasses of water or juice a day.
Medications:
- You can expect to have some pain for the first several days. Take your prescription pain medicine as often as directed for pain.
- Do not drive or operate heavy machinery while taking your prescription pain medications. It may make you drowsy. Do not take any extra acetaminophen (Tylenol) or over-the-counter medication containing acetaminophen while taking your prescription pain medicine. If in doubt, ask your doctor or pharmacist.
- Take all of your prescribed antibiotic (oral and ear drops if prescribed). Failure to do so may cause a serious infection.
- DO NOT take aspirin, ibuprofen, naproxen or over-the-counter medications containing these medications for 2 days following surgery.
- You should resume taking all other medications except as noted by your doctor.
- If you were on any blood thinners (Plavic, Coumadin, etc.) generally you should resume these the day following surgery. Before you leave the hospital, please ask your nurse to review with you when to resume these medications.

Call your doctor immediately or go to the emergency room if you have:
- a fever over 101.5 F.
- pain not relieved by your pain medication.
- pus or foul smelling drainage from your ear.
- active bleeding.
- any trouble breathing.
- roaring tinnitus in the affected ear.
- severe debilitating vertigo.

Follow Up:
We will give you an appointment to return to the Otolaryngology/Head and Neck Surgery office practice site, typically 2 weeks after surgery. It is important that you keep this appointment so that our doctor can be sure you are healing and to arrange any other care you might need.

If you need to talk to your doctor, call 706-721-4400 and ask to speak to the ENT physician on call.