

Middle Ear Surgery

What to expect and how to prepare

Middle ear surgery is done to repair the eardrum (tympanic membrane) or small hearing bones (ossicles) in the middle ear. These may be repaired using either man-made material or natural tissues. The purpose of this surgery is to restore your hearing. This handout explains how to prepare for your surgery and how to plan for your recovery.

2 Weeks Before Your Surgery

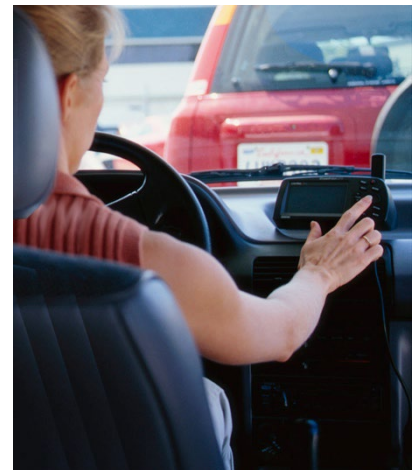
- Do not take any aspirin or other products that affect blood clotting for 2 weeks before your surgery.
- This is a day (outpatient) surgery. You will not stay overnight in the hospital. You must arrange for a ride home after your surgery. You cannot drive yourself or take a taxi or bus home alone.

Arrival Time

The pre-surgery nurse will call you by 5 p.m. the night before your surgery. If you are having surgery on a Monday, the nurse will call you the Friday before. If you do not hear from the pre-surgery nurse by 5 p.m., please call **206.598.6334**.

The pre-surgery nurse will tell you when to come to the hospital and will remind you:

- Not to eat or drink after a certain time
- Which of your regular medicines to take or not take
- To sip only enough water to swallow your pills
- To arrange for someone to drive you home after surgery



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What to Expect After Your Surgery

Ear Dressing

- You will have packing in your ear after surgery.
- Keep your ear dry until your doctor tells you it is OK to get it wet.
- **Do NOT take out any of the packing from your ear.** Your doctor will take it out at your follow-up visit.

Medicines

- You will be given medicine to take by mouth for pain. Most patients have very little discomfort after this procedure.
- You will receive ear drops to put in your ear. These will help the packing dissolve. Do not put anything into your ear except these ear drops.



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of this handout.*

Eating

- You can begin to eat and drink in the evening after your procedure. But, you may be a little nauseous from the anesthesia you received.

Precautions and Self-Care

Because you may have received general anesthesia, do **not** do these things for 24 hours after your surgery:

- Drive
- Drink alcohol
- Travel alone
- Sign any legal papers
- Be responsible for the care of another person

Activity

- If you sneeze, be sure to do so with your mouth open to reduce pressure in your ears. Also, do not hold your nose when you sneeze.

For 1 month after your procedure:

- Do **not** blow your nose. If you need to get mucus out of your nose, sniff it back and then spit it out.
- Do **not** go swimming or dive into water.
- Do **not** fly. The altitude changes can harm your ears. It is OK to use elevators.



*Do **NOT** blow your nose for 1 month after your surgery.*

Return to Work

Most people take 1 week off work to recover from this surgery. Your doctor will tell you if you need to take more time off.

Follow-up Visits

You will have a follow-up visit 1 month after surgery to check your wound. This visit is on:

DAY

DATE _____

TIME

Your 2nd follow-up visit will be 6 to 8 weeks after surgery to test your hearing. This visit is on:

DAY

DATE _____

TIME

When to Call the Clinic Nurse or Doctor on Call

Call the clinic nurse or doctor on call if you have:

- Fever higher than 101.5°F (38.6°C)
- Signs of ear infection:
 - Increased redness
 - Swelling
 - Pain
 - Drainage
- Nausea or vomiting that will not stop
- Concerns that cannot wait until your follow-up visit

Notes and Questions

Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns. UWMC clinic staff are also available to help.

- **UWMC Otolaryngology** – Otology and Audiology: 206.598.7519
- **After hours and on weekends and holidays**, call 206.598.6190 and ask for the Otolaryngology Resident on call to be paged.