

Postoperative Middle Ear Surgery (Pediatric)

Instructions

Dr. Healy - Dr. Keele - Dr. Tubbs - Dr. Ramsey

Contact Information:

- **Glacier Ear Nose and Throat - (406) 752-8330**
 - 9am to 5pm, Monday-Friday
 - After 5 pm and weekends, an "on call" provider is available.
- **The HealthCenter - (406) 751-7550**

When should I call my child's doctor?

- If you are worried, your child's doctor is worried! You should call the doctor's office.
- If your child has signs of an infection, like a fever above 101.5 degrees, drainage that turns to puss, redness or swelling around incisions or increasing pain in the ear, you should call the doctor.
- If your child has a severe headache or stiff neck, you should call the doctor.
- If drainage from the ear soaks more than 12 cotton balls per day or if there is clear drainage from the nose, you should call the doctor.

What should I expect after surgery?

- It is normal to have some blood or clear fluid draining from the ear.
- The ear may drain for 2 weeks, sometimes longer.
- Your child may have a dry mouth or not taste things normally for a few weeks.
- Your child may have popping sounds in the ear and other noises for several weeks.
- Your child's ear and around the ear may be numb.
- Your child may have a stiff or sore jaw for 1 to 2 months.
- Your child may be dizzy for about a week.
- Your child will have decreased hearing out of their ear after surgery and it may get worse for a few weeks.

When will my child see the doctor?

- Your child needs to have a follow-up appointment with the doctor in 3 to 4 weeks after surgery.

What about my child's pain?

- Your child will have some discomfort.
- Give your child scheduled doses of **Children's Ibuprofen or Motrin** for 5 days after surgery.

Ibuprofen (100 mg/5 mL): give _____ mL by mouth every 8 hours for 5 days
(10 mg/kg/dose).

If your child is not taking Norco, Lortab or Percocet you may give Children's Tylenol with the

- **Children's Ibuprofen or Motrin.**

Children's Tylenol (Acetaminophen) (160 mg/5 mL): give _____ mL by mouth every 8 hours
(15 mg/kg/dose).

- The following schedule is an example of how to alternate doses of Ibuprofen and Tylenol (Acetaminophen). The times can be adjusted based on your child's sleep and meal routine.

Scheduled doses of Ibuprofen at:	6 AM	2 PM	10 PM
	X	X	X

Tylenol if needed at:	10 AM	6 PM	12 PM	Overnight if needed
	X	X	X	X

- If that schedule does not relieve your child's pain, your child may be given a prescription for narcotic pain medication.
 - Your child should still take the scheduled Children's Ibuprofen or Motrin.
 - Your child should not take extra Tylenol if taking Norco, Lortab or Percocet because they have Tylenol in it.
 - Narcotic pain medication may cause constipation. Provide extra fluids and possibly a stool softener.
- Follow pain medication instructions given by the nurse or pharmacist.

How do I care for my child's surgical site?

- Use the prescribed ear drops as instructed until the doctor says to stop.
 - Call the doctor's office to refill the ear drops 1-2 days before running out.
- You may remove the dressing after 1 or 2 days and may then use a cotton ball in the outer ear for drainage.
- Do not remove the packing inside of the ear, but some packing may come out when you change the cotton ball.
- Do not put Q-tips or anything deep in the ear.
- Your child may have incisions around the ear canal or behind the ear.
 - The incisions may develop crusted blood or the cotton balls may stick.
 - You may clean the incisions with diluted hydrogen peroxide and put a thin coat of Vaseline or antibiotic ointment (like Bacitracin) on 2 times a day.
- Do not wash your child's hair for 2 days. He/she may take a tub bath during this time.
- Protect the ear from the chance of water getting in it by placing a cotton ball in the outer ear and covering it with Vaseline to seal it until the doctor says you no longer need to protect it.

What about activity?

- Your child should sleep with his/her head elevated on pillows for 2 - 3 days after surgery.
- Your child should not blow their nose, sniff forcefully, or pop their ears until the doctor says it is ok.
- Your child should avoid anybody with a cold.
- Your child should avoid straining, bending or quick head movements that may cause dizziness.
- Your child may not fly, swim or dive until the doctor says that he/she can.