



C O N N E C T I C U T

E A R • N O S E • T H R O A T

MEDICAL AND SURGICAL SPECIALISTS

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POST-OPERATIVE INSTRUCTIONS TYMPANOPLASTY AND MASTOIDECTOMY

PRECAUTIONS

1. DO NOT blow your nose. Any accumulated secretions in the nose may be drawn back into the throat and expectorated if desired. This is particularly important if you develop a cold in the time following surgery.
2. DO NOT “pop” your ears by holding your nose and blowing air through the Eustachian tube into the ear. If it is necessary to sneeze, do so with your mouth OPEN.
3. DO NOT allow water to enter the ear until advised by Dr. Coffey or Dr. Pearl that your ear has healed. To prevent water from entering the ear during a shower or bath, place a large piece of cotton into the outer ear opening and cover it with Vaseline. Keep the incision area behind the ear dry until after your first postoperative visit to the office.
4. DO NOT do any heavy lifting or aggressive aerobic exercise until advised that it is permissible to do so by Dr. Coffey or Dr. Pearl.

SENSATIONS THAT YOU MAY EXPERIENCE

1. You should anticipate a certain amount of pulsation, popping, clicking and other unusual sounds in the ear, and also a feeling of fullness in the ear. Occasional sharp shooting pains are not unusual. At times it may feel as if there is liquid in the ear. These are all normal sensations.
2. Minor degrees of dizziness may be present on head motion and need not concern you unless this should increase. You should take the medication for dizziness as needed. No usually needed after tympanoplasty only.
3. Rarely is hearing improvement noted immediately following surgery. It may even be worse temporarily due to swelling of the ear tissues and packing in the ear canal. Six to eight weeks after surgery an improvement may be noted. Maximum improvement may take four to six months. If you have been advised that you require a “2-stage” operation, hearing improvement will not occur until after the second surgery.
4. A bloody or watery discharge from the ear may occur during the healing period. The cotton on the outside of the ear should be changed daily. If the discharge is yellow or foul-smelling, please call the office and schedule an urgent appointment to see the doctor at her next office session.
5. Mild, intermittent ear pain is not unusual during the first two weeks. Pain above or in front of the ear is common when chewing. You should take the medication for pain as needed.

Should you have any questions pertaining to your ear please call the office at 203-452-7081