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**POST OPERATIVE INSTRUCTONS FOR
TYMPANOPLASTY/TYMPMASTOIDECTOMY**

A low-grade fever is very common in the first few days after surgery. Acetaminophen (Tylenol) may be used for reducing the fever. In addition, coughing and deep breathing ten times per hour may be necessary to improve under inflation of the lungs, another common cause of fever after surgery. Please notify the doctor if oral temperature is elevated above 101.5 degrees in spite of these measures.

It is very important to keep water out of the ear until the doctor indicates otherwise (usually a minimum of 2-3 weeks after surgery). To keep water out of the ear during bathing or showering, place a small piece of cotton covered in Vaseline or an ear plug. If there is a visible incision, please cover with a waterproof Bandaid while bathing or showering for one week. **May wash hair after 3 days (keeping water out of the ear canal and keeping incision covered)**

If the ear is packed with gauze and the gauze begins to come out, gently replace using antibiotic ointment to hold it back in place. If the ear is filled with antibiotic ointment, as the ointment warms up to body temperature, it may begin to drain from the ear canal. Call the doctor if the drainage becomes discolored or foul-smelling.

If there is a visible incision (usually behind the ear), keep antibiotic ointment on the incision for the first three days after surgery. Check the incision at least once a day for signs of infection (increased redness, swelling, pain or warmth). Also check the incision for increasing swelling. This may indicate the accumulation of blood or fluid and should be reported to the doctor.

To help prevent dislodgment of the eardrum graft, it is important to avoid nose blowing or vigorous activity for three weeks after surgery. Heavy lifting (greater than 10 lbs.) or any form of straining should also be avoided during this time. The mouth must be kept open during sneezing to prevent increased pressure in the ear.

Some bleeding from the ear canal is normal. If bleeding occurs, keep the patient calm and at rest and keep his/her head elevated on two to three pillows. Replace the cotton ball in the ear as needed. Use only the prescribed pain medication, Ibuprofen, or acetaminophen (Tylenol) for pain.

5 days before post-op office visit, begin using the ear drops (Ciprodex or Floxin) twice daily as prescribed. Follow up in office as directed by your provider. Please call our office at 317-338-6815 should you have additional questions or concerns.

PAIN MEDICATION CHART

Take ibuprofen every 6 hours as directed in the chart below. We recommend regular scheduled dosing for the first few days. For severe pain, use plain Tylenol or Tylenol with Codeine (but NOT both together) 3 hours after the ibuprofen dose as directed on the chart. Example: Ibuprofen at 9am, Tylenol or Tylenol with Codeine or Lortab at 12 noon, ibuprofen at 3pm

Option A

Pediaprofen Ibuprofen Suspension 100mg/5ml

Age	6-11 mos	12-23 mos	2-3 yrs	4-5 yrs	6-8 yrs	9-10 yrs	11-12 yrs	Adult
Weight	13-17 lbs	18-23 lbs	24-35 lbs	36-47 lbs	48-59 lbs	60-71 lbs	72-95 lbs	96-154 lbs
Dosage	½ tsp	1 tsp	1-1 ½ tsp	2 tsp	2 ½ tsp	3 tsp	4 tsp	4 tsp

Option B

Acetaminophen: 160 mg/tsp (Tylenol ONLY)

Weight (lbs)	1-17 lbs	18-23 lbs	24-35 lbs	36-47 lbs	48-59 lbs	60-71 lbs	72-95 lbs	>96 lbs
Tylenol ONLY	½ tsp	¾ tsp	1 tsp	1 ½ tsp	2 tsp	2 ½ tsp	3 tsp	3 ½ tsp

Option C- Tylenol with Codeine suspension

PRESCRIPTION GIVEN BY YOUR PROVIDER

Dosage directed by prescription, may be given every 4-6 hours as needed for severe pain

Option D- Lortab Elixir

PRESCRIPTION GIVEN BY YOUR PROVIDER

Dosage directed by prescription, may be given every 4-6 hours as needed for severe pain

PLEASE NOTE: Do not take Codeine or Lortab on an empty stomach. Codeine and Lortab may cause constipation, white grape juice or prune juice 1-2 cups daily may help. If constipation becomes a concern, your child may benefit from the use of Miralax/Glycolax stool softener (½ capful in 4 ounces of juice or 1 capful in 8 ounces of juice daily as needed to soften stool effectively).