



THE UNIVERSITY OF ARIZONA  
MEDICAL CENTER

University Campus

1501 N. Campbell Ave., 50PC

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Office: (520) 694-1000

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Home Care Instructions

**Abraham Jacob, M.D.**

**Department of Surgery/Division of Otolaryngology  
Otology, Neurotology, and Cranial Base Surgery**

MEDICAL RECORD#

DOB

NAME

VISIT#

## HOME CARE HANDOUT STAPEDECTOMY/OSSICULAR RECONSTRUCTION/ MIDDLE EAR EXPLORATION

**This instruction sheet is designed to help you care for your ear(s) following surgery, and to answer many of the commonly asked questions. Please read the entire sheet carefully. Feel free to call us with questions or concerns you may have. If the nurse cannot address your concerns, a doctor will return your call or you may be asked to come to the office.**

### Leaving The Hospital

- Have family/friends drive home slowly to minimize dizziness.
- You will receive a prescription for pain medicine and sometimes an anti-nausea/dizziness medicine. You will not routinely receive a prescription for antibiotics.
- The cotton ball should be left in place for 8-12 hours unless saturated with blood. Thereafter, it can be changed as often as needed.

### Home Care-The First Few Days

- For the First 24 hours:
    - Lie quietly with the head elevated.
    - Do not bend over for 1 week after surgery. If you must bend, bend from the knees, not head-first from the hips. This will prevent pressure build-up in the head.
  - Until seen for your post-operative visit, do not participate in vigorous physical activity, including sports, even though you feel well.
  - Do not lift over 10 pounds until your first post-operative visit.
  - With the exception of these restrictions, you may return to work or school as overall condition permits.
  - After 3 weeks most patients are able to resume all normal activities, including sports and physical exercise.
  - It is normal for the ear to drain for a few days. The drainage can be blood-tinged or brown. The cotton ball can be changed several times daily as needed to absorb drainage. If the drainage becomes thick yellow, green, or has a foul smelling odor, call Dr. Jacob's office.
  - The ear canal will be filled with ointment or dissolvable packing, which should be left in place. **Do not clean the ear canal with cotton swabs.**
  - The auricle (outer ear) can be wiped gently with a soft cloth or cotton swabs to remove dried blood, but if the ear is tender this is not necessary.
  - You may wash your hair 2 days after surgery. **Keep all water out of the ear canal** by using a cotton ball heavily coated with antibiotic ointment or Vaseline placed in the outermost part of the ear canal.
  - If there is an incision behind the ear it may be covered with Steri-strips, and these should be left in place. These will remain adherent for about 10 days. Please remove any remaining Steri-strips after 10 days. No care is necessary. Keep the incision dry for 72 hours.
  - Do not blow your nose for 2 weeks after surgery. Sniffing is okay. This is important should you develop a cold. After 2 weeks, you may blow your nose gently, one side at a time.
  - Sneeze or cough with your mouth open for 1 week after surgery.
- You may fly 3 days following surgery. Whenever you fly, take an over-the-counter decongestant 30-60 minutes before take-off. Before the airplane begins to descend, spray your nose with Neosynephrine or Afrin nasal spray. Use this procedure whenever you fly in the future. You may use the same treatment when traveling by car in a mountainous region.



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- You may hear a variety of noises in your ear such as cracking or popping. This is part of the normal healing process.
- You may not be able to hear well from the operated ear. There is packing under the ear drum that dissolves slowly over time.
- It is not uncommon to feel slightly dizzy or lightheaded for a week after surgery.

### Home Care-After the First Few Days

- Any drainage from the ear should begin to decrease and pain should also subside. You may need to continue taking Ibuprofen or Tylenol for mild pain relief.
- There may be a change in taste (usually described as metallic) on one side of the tongue, which usually improves with time.
- All stitches are under the skin and will not need to be removed. The incision should be cleaned gently with peroxide once or twice daily until no crusting is noted. A thin layer of antibiotic ointment (Neosporin, Polysporin, Bacitracin, etc.) is helpful for 7 days after surgery.
- **Continue to keep all water out of the ear.**

### First Follow-up Appointment

- **Call the office 520-694-1000 for a follow up appointment 3 weeks after surgery.** At this visit, we simply check the ear for infection.
- **A 3-4 month post-operative visit is also necessary, at which time an audiogram (hearing test) will be obtained. Please let our schedulers know that a hearing test is required immediately prior to seeing Dr. Jacob that day.**

### Call the office if:

- Increased pain not relieved by prescription medications.
- Large amounts of bleeding from the ear area.
- Pus/Foul smelling drainage from the ear.
- Redness in the ear area.
- Temperature over 100° on 2 consecutive readings.
- Severe dizziness.

### Important Phone Numbers

#### **University of Arizona Medical Center**

- (520) 694-1000 Dr. Jacob's office - (follow-up appointments)
- (520) 694-1000 Dept. of Surgery Specialty Otolaryngology leave message for nursing station (post-op questions)
- (520) 694-6000 Hospital Operator (after hours questions) Ask for ENT physician on call.