



Ear, Nose & Throat Consultants of North Mississippi

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Postoperative Instructions for Eardrum Repair (Myringoplasty, Tympanoplasty, Cartilage Tympanoplasty, Ossiculoplasty)

Avoid undue fatigue or exposure to colds or upper respiratory tract infections if possible.

Do not blow your nose for approximately one week following surgery. Any accumulated secretions in the nose should be drawn back and expectorated through the mouth to avoid infecting the ear. If you sneeze, do so with your mouth open. Do not hold your nose to avoid sneezing. Do not play musical wind instruments for 3 weeks.

Wash your hands with soap and water before treating the ear.

A clean cloth moistened with warm water may be used to clean the outer ear as often as necessary for cleanliness and comfort. Do not allow water to enter the ear canal for at least three weeks. You may shampoo your hair 48 hours following surgery, provided the water is not allowed to enter your ear canal by placing a cotton ball in the ear opening applying Vaseline over the cotton to form a water tight seal.

If eardrops are to be instilled, position the head with the affected ear up during the installation and remain in this position for 5 to 10 minutes to facilitate the absorption of the drops. Then place a clean cotton ball in the ear for about one hour.

The ear should be exposed to the air as much as possible. A cotton ball should be placed in the ear canal during the day while combing hair, during exposure to a dusty environment, and at night to prevent drainage onto your pillow. At first, the drainage may be re-brown to brown in color, but the brown drainage usually becomes clear and disappears within a week or two. If drainage increases call, your physician.

If your physician prescribes an antibiotic, fill the prescription promptly and take all of the medication as directed until the entire supply is gone.

If any of the following should occur, contact your physician:

1. Persistent bleeding
2. Persistent fever
3. Purulent drainage (pus) from the ear or incision
4. Increasing redness around the suture line
5. Persistent pain or dizziness
6. Facial weakness and/or inability to close your eyelids
7. Rash around the ear or incision

Do not be overly concerned about your hearing until at least one month postoperatively. Your hearing may fluctuate as the ear heals. You may also experience some popping and cracking sounds in the ear for up to several weeks. It may sound like you are “talking in a barrel” or a tunnel. This is normal and should not cause concern.

You may notice a “tinny” or “metallic” taste in your mouth for several weeks after ear surgery. The altered taste will usually go away spontaneously.

Please ask your surgeon if any of the middle ear ossicles were replaced with a metal part (prosthesis). This may be important to know if you ever need to have a magnetic resonance imaging scan (MRI) in the future. If a titanium prosthesis was implanted. It is safe to have MRI and CT scans.

It is important for you to return for your scheduled appointment(s).