



Postoperative Instructions for a Tympanoplasty

1. The surgery will require at least 90 minutes of general anesthesia.
2. It is a day surgery. You should be able to go home the same day.
3. After surgery, there will be a dressing wrapped around the head and over the operated ear. The dressing may become stained with blood. This is normal. The dressing may be removed the next day.
4. After the dressing is removed, you will see a cotton ball in the ear bowl and tape behind the ear. Leave the tape in place.
5. Ear drops will be prescribed. Each time you use the ear drops, remove the cotton ball first. A sponge will be in the ear canal. Apply the drops onto the sponge and place a new cotton ball. Do not remove the sponge. I will remove the sponge 7-10 days after surgery.
6. An antibiotic and pain medicine will be prescribed.
7. The ear must be kept dry for 6 weeks. You may shower 2 days after surgery. When showering, put a cotton ball covered with Vaseline in the ear bowl. Do not let the shower water directly hit the ear. Dry the tape behind the ear immediately after showering.
8. Ringing, fullness, dizziness, and hearing loss may be more noticeable after the surgery. Expect this to last at least 6 weeks. It is not likely but possible for one or more of these symptoms to be permanent.
9. The sense of taste may be altered after surgery for several weeks. It is not usually permanent but that is possible. This is due to the chorda tympani nerve that passes behind the eardrum. This nerve involves taste function and may lose function after this surgery.
10. No strenuous physical activity for three weeks.
11. Please do not blow your nose until instructed it is okay to do so. It will likely be at least 3 weeks.
12. Fevers up to 1 week after surgery are not uncommon.
13. Please call if the ear becomes increasing red, swollen, painful, or has yellow drainage.
14. There is a 2-5% chance that the repair will not be successful and a second attempt may be necessary.

I, _____, confirm that I have read and understand the information provided before the date of surgery.

Signature

Date