



POSTOPERATIVE CARE FOR PEDIATRIC PATIENT FOLLOWING EAR SURGERY

Activity

The patient should avoid exercise, bending, stooping, or lifting anything heavier than 5 pounds until the physician releases them to do so.

It is not unusual to experience some unsteadiness following ear surgery, so the patient should refrain from driving or operating machinery until given permission by the physician.

Care

Keep the operative ear dry (earplug, cotton ball coated with Vaseline, etc.).

Sutures may be present over the ear, behind the ear, or in the earlobe. Pat these dry after shampooing or bathing.

Packing that is in the ear canal should be left alone. If it does begin to come out, cut off the excess, but DO NOT attempt to replace the packing.

Do not blow the nose. Sniffing gently is permissible.

Sneeze with the mouth open to avoid excess pressure on the ears.

Pain

Children's Tylenol 10-15mg/kg/dose every 6 hours and alternate with Children's Ibuprofen 10mg/kg/dose every 6 hours.

For example: Tylenol at 9a.m., Motrin at 12p.m., Tylenol at 3p.m., Motrin at 6p.m., etc. Use the attached medicine log to help keep track.

Problems

Violent dizziness, extreme nausea and vomiting, sudden decreased hearing, severe head pain, temperature 101 or greater, paralysis of the face, or ear drainage should be reported immediately.

Please contact our office at 478-743-8953 if you have any questions or concerns.



<u>Medication</u>	<u>Date</u>	<u>Time</u>