



## POSTOPERATIVE CARE AFTER MYRINGOTOMY WITH TUBES

### GENERAL INSTRUCTIONS:

Your child may experience lightheadedness, dizziness, and sleepiness due to anesthesia. For the next 24 hours, a responsible person should be with your child.

**DIET:** Start with clear liquids (juice, jello, popsicles). Advance to a regular diet as tolerated.

### MEDICATIONS:

1. Use the prescribed ear drops, four drops in each ear twice a day for five days, then as needed for ear drainage. If your child has bloody drainage from the ear(s) after surgery, use four drops in that ear three times a day until drainage stops.
2. For discomfort or irritability, you may give your child a non-aspirin pain medication, such as children's ibuprofen or Tylenol, in the recommended dosage, as needed.

### ACTIVITY:

1. Resume normal activity and play as tolerated.
2. Avoid contact with people that have colds or upper respiratory infections if possible.
3. While the tubes are in place, your child is advised to wear earplugs while swimming, diving, or dunking their head underwater in the bathtub. No precautions are necessary for normal bathing and hair washing. If your child develops ear drainage after water activities, begin a 5-day course of eardrops and use earplugs regularly with water exposure.

### WOUND CARE:

1. It is not uncommon to have a small amount of blood-tinged drainage from the ears after surgery.
2. Ear infections in the presence of tubes occur in 20-30% of children. If your child develops an ear infection while the tubes are in place (i.e. ear drainage), use eardrops for 5 days. If there is no improvement, contact the office or your pediatrician.

### FOLLOW-UP APPOINTMENTS: (Call the office at 334-3370 to schedule both appointments.)

1. Hearing Test: 3-4 weeks after surgery, before your doctor's appointment.
2. Physician: 3-4 weeks after surgery.

### CALL 334-3370 if any of the following occur:

1. Ear drainage is thick, yellow, or foul smelling despite use of eardrops.
2. Dehydration (not drinking fluids, dark urine, infrequent urination).
3. Persistent nausea or vomiting.
4. Temperature of 102°F or higher.

Susan L. Urben, M.D. • W. David Tom, M.D.  
Prashant Vivek, M.D.