

# Ear Tubes: Instructions After Surgery

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## **What should I expect right after surgery?**

Most children recover from the effects of tube surgery and the anesthesia quickly, since the procedure is so short. Some children are cranky for several hours or even days, from a combination of the stress of the experience, the lingering effects of the anesthetic, and mild pain in the ears from the operation. A slight fever is commonly seen, but this is also expected and generally does not require treatment. If your child is significantly upset, sick or has a fever over 101 by the second day after surgery, contact me or your pediatrician.

## **What medication is necessary after the surgery?**

Children getting ear tubes are usually given Tylenol as a suppository while under anesthesia, so they will have some pain medication in their systems by the time that they wake up. They are given a fairly large dose, so **do not give them more Tylenol until at least 6 hours** after the surgery if this has been done (ask the anesthesiologist to confirm). Ibuprofen (Advil or Motrin) may be given during this time if necessary. Generally, no antibiotics or ear drops are used after surgery.

## **What can I expect while the tubes are in place?**

During the life of the tube (4-12 months for the typical "short acting" type), any time an infection reaches the ears, you may see drainage. **This is normal**, and is one of the reasons for placing tubes in the first place. The drainage looks like what comes out of a runny nose, and **may smell bad or have blood** in it. Do nothing for the first 3-4 days except for wiping the outside of the ear with a soft cloth. If the drainage persists, please call my office.

I generally use ear drops for this type of drainage, and oral antibiotics are rarely necessary. However, usually the drainage is so thick that the drops will not get into the ears unless I clean them out first. Therefore, you may need to come to the office so that I can clean out your child's ears with a microscope and suction before starting the drops.

## **Can my child swim, shower or bathe with the tubes? Are earplugs necessary?**

In the past, plugs were considered very important but most of the recent research suggests that there is no benefit to avoiding water exposure. Apart for a few exceptions, **I do not require water precautions**. However, a shower spray should not be directed straight into the ear canal. Furthermore, older children who dive more than a foot or two under water should wear earplugs, as should those who soak in a tub with their ears under soapy bathwater. Do not use cotton for this, I have special plugs available if they are necessary.

## **Can my child travel by air with the tubes? How soon?**

One of the benefits of ear tubes is that the pain with flying is completely eliminated (as long as the tubes are open and working). There are no restrictions on flying with tubes, and children can travel as soon as they leave the hospital- the tubes do not require any time to heal into position.

## **What about follow up?**

Patients should be seen around three weeks after surgery, and then every 3 months until both tubes have come out and the ears are healed. **Please call to schedule this visit**. The follow up is needed to confirm that the tubes are in place and open, to monitor them to make sure that they come out as anticipated, and to repeat the audiogram test to monitor hearing. While the holes almost always close after the tubes come out, **follow up is important**. If the tubes are forgotten and left in place for more than two years, there is an increased chance of a persistent hole in the eardrum. It is also important to determine if the fluid or infections return after the tubes come out. About 10% of children overall will require a second set of tubes. This is because the tubes do not actually improve the body's natural ear drainage, but rather act as a "crutch" to help out while awaiting the natural improvement that comes with growth.

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