

Post-Operative Instructions for

Myringotomy and Ear Tube Placement

Ear Drainage: Your ear may have some drainage in several instances:

1. After surgery for up to a week. Ear drainage without a fever is usually not an emergency.
2. After water has washed ear canal bacteria into the middle ear (ME) or irritated the ME lining. Please avoid any large amounts of dirty or soapy water from entering the ear. A few splashes of clean water rarely cause problems.
3. After a common cold or other nasal infection.
4. After feeding an infant a bottle in a flat or reclined position.

Please call us or your primary care physician for antibiotic ear drops. Oral antibiotics are rarely needed for ear drainage. The ear canal may need to be cleaned before antibiotic eardrops are applied.

Please use the following procedure when giving eardrops:

1. Warm the eardrops up to body temperature by placing the bottle under your arm for a minute.
2. Lay the patient on their back or side with the draining ear up.
3. Clean any obvious pus from the outer ear canal with a tissue but do not place a cotton swab or Q-tip into the ear canal.
4. Drip the recommended number of drops of the medicine slowly into the ear, gently push the small cartilage in front of the canal (tragus) in and out a few times to pump the drops deeper. Pulling the external ear out may help open the canal before placing the drops.
5. Have the child lay with that ear up for the next 5-10 minutes.
6. Sit the patient up to absorb any remaining drainage from the canal, do not place cotton swab or Q-tip in the ear.
7. Repeat for the other ear if needed.

Pain: Ear tubes themselves do not cause any ear pain. Your child will not need any narcotics after this surgery. You may give them acetaminophen or ibuprofen on the day of surgery if they appear uncomfortable.

Water Avoidance: As mentioned before, soapy water may irritate the ME. Therefore, please avoid letting the child lay down in a tub with water deep enough to enter the ear. Also, please keep your child's head out of a hot tub. In general, children with ear tubes may swim on the surface AND UP TO 2 FEET BELOW THE SURFACE of most clean, chlorinated swimming pools. Occasionally, a child may need earplugs to keep even small amounts of water out of the ear. But remember - no earplug is water tight, so the child should avoid diving and jumping into the pool.

Feeding Upright: Please keep your infant's head up at 45 degrees above the horizontal when feeding or nursing. Any liquid can pool in the child's throat and leak up to the Eustachian tube opening in the back of the nose. This fluid may lead to ear drainage. This is especially important in a child with a cleft palate.

Diet: Resume diet as tolerated.

Activity: No physical restrictions. Your child may feel tired or sleepy for a day, but they should be able to go back to school or daycare the day after surgery.

Fever: If your child is running a fever above 101.5⁰ F, call your primary care physician.

Follow-up Visits: Please return to our office to check your child's ears in the first month after surgery and as directed by your ENT doctor. In general, it is best to have your child's ears checked every 6-12 months until the tube falls out of the ear.

Other Questions: For non-emergent questions, please call our office at 503-581-1567 between 9:00 am and 3:00 pm. Monday through Friday.