



## CARE AFTER

### MASTOIDECTOMY

**Please read these instructions completely. They are important!!**

The mastoid bone is located behind the ear and feels like a hard bump. Inside, it looks like a honeycomb, with the spaces filled with air. These spaces or “air cells” are connected to the middle ear through an air filled cavity called the mastoid antrum. The mastoid bone serves as a reserve air supply to allow normal movement of the eardrum. However, its connection to the middle ear creates a pathway through which infections can spread to the mastoid bone, known as mastoiditis.

A mastoidectomy is a surgical procedure designed to remove infections and growths in the mastoid bone. Its purpose is to create a “safe ear” and prevent further damage to the hearing.

## INSTRUCTIONS FOR HOME:

### Expectations:

- If additional bleeding is noted on the dressing after you leave the hospital, please call us at the number listed below.
- Dizziness and/or vomiting are NOT normal, please call.
- Drainage from the ear or passing of small bits of packing MAY persist for up to 6 weeks after surgery. Sometimes, the drainage will appear blood tinged.
- If child has fever greater than 101° or increasing pain, please call us.
- Drainage from the wound behind the ear is abnormal- call immediately.
- Hearing will be decreased due to packing in the ear.

### Diet:

On the night of surgery limit the patient to a light diet to help prevent vomiting after the surgery. The patient does not need to eat or drink until the next day. If desired, soups, Jell-O, juices, and popsicles are allowed. No heavy foods, including milk, should be eaten on the evening of surgery. On the day after surgery, the patient may eat anything he or she wants, as long as the stomach has settled.

Some children after mastoidectomy will refuse to eat or drink. If this is severe enough, the child could become dehydrated. Signs of dehydration are: a low grade temperature, dark “straw” colored urine, little or no urine output, dry cracked lips, sunken eyes, and absence of tears when crying. Call our office if your child experiences these symptoms and you are concerned.

**Activity:**

- Return to most activities of daily living and school as tolerated.
- NO physical education classes, competitive sports, or swimming until cleared by your doctor.
- No heavy lifting or straining
- Limit nose blowing

**Ear Care:**

- Leave the bandage on as directed by the doctor
- If the dressing comes off, please call. It may need to be replaced.
- No hair washing until your first visit after surgery (about 1 week).

**Medications:**

Take antibiotics as prescribed

Tylenol is almost always adequate for pain relief.

**DO NOT USE ASPIRIN OR IBUPROFEN PRODUCTS SUCH AS ASPERGUM, ALEVE, MOTRIN, OR ADVIL AS THEY CAN CONTRIBUTE TO BLEEDING. AVOID SUCH HERBALS AS GINSENG, GINGKO, OR GARLIC SUPPLEMENTS.**

**Follow-up:**

The patient has been scheduled for follow-up in our office in about 1 week after the surgery. The post-operative appointment is written on your pre-operative scheduling sheet.

If you have any questions, problems, or need to schedule (or reschedule) an appointment, please contact our office at **(716) 362-9730**.