

## Your Care at Home After Stapedectomy

### About Your Surgery

You are scheduled for a surgery that may improve your hearing. One of the middle ear hearing bones called your *stapes* may have spongy bone formed around it. This is called otosclerosis. This can cause decreased movement of the bone and worsening hearing loss. A stapedectomy is surgery to remove all or part of the stapes. A type of prosthesis will replace it.

### What to Expect After Surgery

You may have some pain. Use your pain medicine as directed for relief. Because your jaw is close to your ear, you may have soreness or stiffness when moving your jaw. This will get better over time. If you have soreness in your jaw, you may find it easier to eat soft foods.

You may be dizzy right after surgery. This is normal and will decrease over a few days. Severe dizziness beyond 48 hours is uncommon. Contact the clinic.

You will have a cotton ball in the bowl of your ear. This may be held in place by a Band-Aid®. You will have packing inside your ear canal. The packing may dissolve, or it will be removed at your first follow up visit. **Do not try to remove the packing.** Dissolvable packing may look dark red or black on your cotton ball. This is normal. There may also be some blood-stained drainage from your ear. The drainage may last for a week or more.

Your hearing may be improved right away after surgery. You may then have trouble hearing because of dressings, packing, or swelling. You may not hear well for several weeks. Your surgeon will let you know when to have your hearing rechecked.

As your hearing returns, sounds may seem loud for a few weeks. You may also hear some popping or crackling noises. This is normal. You may notice some changes in taste when eating. This may last up to 3 months or longer.

### Care After Surgery

You will be given a prescription for opioid pain medicine to use after surgery. Use this if needed. You can also use Tylenol® (acetaminophen) or a NSAID such as ibuprofen, Advil®, Motrin®, Aleve® or naproxen. Use a stool softener if you are taking an opioid pain medicine. Do not drive or drink alcohol while taking opioids.

For 2 days after surgery, keep your head raised at least 30 degrees when laying down. The best way to do this is by using at least 2 pillows to raise your head. Avoid quick head movements.

The cotton ball in your ear should be changed the day after surgery. It should then be changed daily or as often as needed until the drainage has stopped. **You do not need to keep using the cotton ball if you do not have drainage from your ear.**

Keep water out of your ear until advised by your doctor. No swimming. When you shower, use a petroleum jelly (Vaseline®) covered cotton ball in the bowl of your ear to seal the canal and keep it dry.

### **Limits**

- Avoid strenuous activity for 3 weeks or as long as your doctor advises.
- No exercise or sports.
- No lifting more than 25 pounds.
- Do not blow your nose for 1 week after surgery. After, you may blow your nose gently to avoid pressure on your ears.
- You must sneeze or cough with your mouth open for 1 week.
- Avoid air travel for 4-6 weeks to avoid pressure changes in your ear. Check with your doctor.

### **When to Call**

- Excessive bleeding (bleeding that soaks the cotton ball in 10 minutes or less and lasts for one hour).
- Fever greater than 100.5° F.
- Dizziness lasting more than 48 hours, sudden dizziness, or feeling that the room is spinning.
- Major hearing loss.
- Any increased swelling, redness, pain or warmth around the ear.

### **Who to Call**

If you have questions or concerns, please call the ENT Clinic, Monday through Friday at: **(608) 263-6190**.

After hours the clinic number will be answered by the paging operator. Ask for the ENT doctor on-call. Leave your name and phone number with the area code. The doctor will call you back. The toll-free number is: **1-800-323-8942**.

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 9/2019. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#5318.