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INFORMATION FOR PATIENTS ON HOSPITAL DISCHARGE
Following Ear Surgery – Cochlear Implant Operation

- 1 EAR DRESSING.** The head bandage will be taken off before discharge. There will probably be 'Steristrips' (paper dressings) stuck over the incision site behind the ear. Please leave these alone for 1 week. Usually no other ear dressings are needed.
- 2 KEEP EAR DRY.** Please keep the ear dry. Do not let water get to the wound behind or in front of the ear for two weeks. You can wash your hair, ideally with someone to help, after a week. When doing this hold a towel over the ear or hold a glass or cup over the ear to protect it from water. This way you can use a hand-held shower. Do not put your whole head under water in the shower or bath. Dry your hair with a hair dryer and avoid rubbing behind the ear or anywhere on the side of the head.

You will need to keep water out of the ear canal for longer, until it has all healed fully, which often takes about a month.

- 3 NOSE BLOWING.** You should not put any pressure on the eustachian tube or ear. This means you should not blow your nose very vigorously. A very gentle blow only is advised for the first 3 weeks. Also do not strain hard on the toilet.
- 4 SLEEPING POSITION.** Try to sleep sitting propped up a bit on 4 or more pillows for the first few days and avoid lying on your side with the operated ear downwards.
- 5 DIZZINESS/ IMBALANCE.** You might feel your balance is a little worse for a few days after the operation. Move carefully at first. Everything should settle.
- 6 MEDICATIONS**

Antibiotics

If a course of antibiotics has been prescribed, take these as indicated on the bottle.

Pain Killers

Simple analgesics such as Paracetamol, or Nurofen (Ibuprofen) may be sufficient. Unless you are allergic (or have asthma with Aspirin/Nurofen sensitivity), you can take both these pain killers at the same time to increase their effect. Take them as directed on the packet 3–4 times per day if necessary. You can use your own supply of these, bought from the chemist.

You may have been given more powerful pain killers such Codeine Phosphate or Tramadol. Voltarol (Diclofenac) may have been prescribed on discharge. This is like Ibuprofen (Nurofen), and so should not be taken at the same time as Voltarol.

Medicating for Children: Please note that for children under the age of 12 years, Codeine Phosphate pain killers are no longer advised or prescribed. However if more powerful analgesia is needed beyond Paracetamol and Ibuprofen, then a small amount of Dihydrocodeine might be prescribed to take home.

7 SORE THROAT. It is normal to have a sore throat for 3-4 days after a general anaesthetic. This or a little blood in the saliva or from the nose is not a cause of any concern and will settle.

8 FOLLOW UPS: Your first out-patient clinic visit should usually be arranged at about 7- 14 days from the operation. Please telephone to book it at your convenience. Mr Morrison will examine the ear.

The Cochlear Implant Team will separately book their follow-up appointment to arrange the Cochlear Implant Switch, usually 2-4 weeks after surgery.

9 BLEEDING: Bleeding with bulging behind the ear might indicate a haematoma. You should phone Mr Morrison's secretary.

10 SICK LEAVE: You must take 3 weeks sick leave/off school following your operation.

11 EXERCISE: Please avoid any strenuous exercise in the first 2-3 weeks after the operation. Brisk walking & everyday activities are fine but swimming, gym-work or sports must all avoided.

12 DRIVING: You can drive after a week, so long as you feel well, with no dizziness. If in doubt, wait for a bit longer.

13 EAR POSITION: At first the ear will stick out more than before the surgery. This is normal, and is expected to settle over a few months.

14 OTHER SYMPTOMS: The outer ear may feel numb for a month or so, until the skin nerves which had to be cut, grow back. There may be an altered, metallic or tingling taste in the tongue after the surgery. This usually settles, but can take a few weeks.

15 EMERGENCIES: If you need to contact Mr Morrison for general advice or in an emergency firstly please try the office telephone number 0207 487 4446. If there is no response on the above number and you need to contact Mr Morrison out of hours please telephone the Hospital and Ward where you were staying. If the ward is not open, ask the Hospital Switchboard to 'bleep' the duty nursing sister who will be able to call Mr Morrison for you. The Nurses will be able to get a message to Mr Morrison at home or on his mobile phone so that he can advise. If Mr Morrison is going to be away, he will usually have suggested an ENT Consultant Colleague who might cover.

Finally, NHS emergency care is available from the ENT Specialist Registrar on call at Guy's & St Thomas' Hospitals, or from your nearest NHS Hospital with an ENT Department.