

Ear Tube Placement and Removal of Adenoids Information

Your child is soon to undergo a routine pediatric surgical procedures, ear tube placement and removal of the adenoids. Your doctor has performed many of these procedures with consistently good outcome and with significant benefit to the patient. It is our hope that this information will assist you in planning your child's surgery and will answer the most commonly asked questions. Please read this information carefully and feel free to contact our office with any questions or concerns: **713/796-2001**.

- ❖ **Your child's surgery will take place at:** _____ **on:** _____.
 - You will be asked to arrive at the hospital 1 $\frac{1}{2}$ to 2 hours before your scheduled surgery time.
 - Please call _____ on _____ to obtain surgery time and additional instructions.

- ❖ **During the two-week period preceding and for two weeks following your child's surgery: *DO NOT ADMINISTER ANY ASPIRIN OR PRODUCTS CONTAINING NON-STEROIDAL ANTI-INFLAMMATORY INGREDIENTS*, e.g., Advil™, Motrin™, etc. Please notify our office if your child becomes ill prior to surgery. Conditions such as a fever of 101.5° or above that persists for several days, the onset of chicken pox*, or a severe respiratory problem may be reasons to postpone or reschedule your child's surgery. * (When a child's surgery is cancelled due to chicken pox, the general rule is that he/she may not have surgery for 2-3 weeks following the initial outbreak).**

- ❖ If it would help you or your child, you can schedule a tour of Texas Children's Hospital by calling 832/826-1650.

- ❖ **The morning of surgery:**
 - **Your child may have clear liquids until FOUR hours before surgery. Infants may be given breast milk until FOUR hours before surgery - NO formula, milk or solids should be given after midnight.** Children scheduled for elective surgery in the midday or early afternoon SHOULD NOT have breakfast on the morning of surgery.
 - When you arrive, there will be some paperwork to complete, a physical assessment of your child will be done, and you will speak with your doctor and the anesthesiologist.
 - At the time of surgery, general (inhaled) anesthesia is administered and, once the child is asleep, an intravenous line may be placed and a breathing tube will be placed.
 - Surgery lasts from 45 minutes to an hour.

- ❖ **Immediately following surgery:**
 - After surgery, your child will go to a recovery unit for approximately 1 $\frac{1}{2}$ - 2 hours. You will be allowed to join your child and remain at the bedside until he/she is discharged from the hospital. Once it is determined that your child can safely go home, you will be discharged.

While some children appear to be unaffected following administration of general anesthesia, it is not uncommon for patients to be sleepy, irritable, and nauseated or for the child's face to appear flushed. These side effects are temporary and your child should be feeling normal within a few hours.

 - Most children will take small sips of liquids until fully awake and any nausea has passed - at this point they can resume a normal diet.

Children's ENT of Houston

Newton O. Duncan, M.D. - John K. Jones, M.D. - Joseph L. Edmonds, M.D. - James T. Albright, M.D.

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❖ **Home Care:**

- You may allow your child to return to normal activity two to three days after surgery, depending upon how he/she feels. Swimming should be avoided for two full weeks.
- At the hospital, you will be given a bottle of antibiotic eardrops to instill in your child's ear. You will use these for approximately three-five days or as directed by your doctor.
- Do not try to clean the inside of the ears - a damp cloth may be used to clean the outside of the ear.
- You may see discharge from the ears for 2-4 days. This discharge may be bloody or discolored. If it persists for more than 5 days, please notify our office.
- Children customarily feel little discomfort following ear tube placement. However, some children experience a sore throat, bad breath, and a congested nose following removal of the adenoids. If your child is uncomfortable, you may administer Tylenol™.
- Use only Tylenol for discomfort and fever. Do not use medications containing aspirin or aspirin-like ingredients such as Motrin® or Advil®.
- Children may experience a fever of up to 100 degrees. A slight fever is a normal response and you may give your child Tylenol™. A persistent fever of 101.5° or higher, which does not respond to Tylenol™ should be reported to our office.
- Depending upon the doctor's observations at the time of surgery, your child may also be placed on an oral antibiotic. It is important to follow the label instructions and to complete the entire course of the antibiotic.

❖ **Postoperative Information:**

- Ear tubes typically remain in the eardrum for 6-9 months until they are pushed out as the eardrum grows back together. While the ear tube is in place it facilitates proper ventilation of the ear which should restore balance to the ear lining thus decreasing collection of fluid in the ear and reducing the opportunity for infection.
- While your child has ear tubes, you may see drainage of clear, white, yellow, brown, green, and sometimes bloody fluid from the ear. This drainage may indicate an ear infection. Use the antibiotic eardrops provided at the time of surgery. Often, the drainage will quickly subside. If drainage does not decrease in 3-4 days, we recommend that you call our office or your pediatrician and speak to the nurse about treatment.
- Ear infections are usually treated with oral antibiotics and topical antibiotic eardrops. Our office or your pediatrician can order these prescriptions for your child.
- As long as the tubes are patent and in place in the eardrum, avoid using drops prescribed for ear pain or swimmer's ear. These drops can pass through the tubes and cause discomfort and irritation.
- While the ear tubes are patent and in place in the eardrum, going under water should be avoided. Bathing or showering in the tub or splashing in the pool is fine. If your child is a swimmer or will be taking lessons, talk with the audiologists in our office to decide whether plugs or custom swim molds would be best for your child.
- Flying or traveling is not a problem for children with ear tubes. The ear tube provides appropriate ventilation for the ear, thus eliminating any pressure build-up in the ear. Children can safely travel by air within one day following ear tube placement.
- Most children can return to school/daycare 2 days following surgery.
- **Your child will need to return to the doctor for a follow-up visit 3-4 weeks after surgery. If you have not scheduled this visit prior to surgery, please be sure to call the office for an appointment immediately after surgery.**

Please do not hesitate to call our office with any questions or concerns: 713/796-2001

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