A Tympanomastoidectomy is a procedure which is performed for two main indications. The first indication is if you have a benign skin growth (cholesteatoma) in your middle ear. This procedure removes the cholesteatoma to prevent future complications such as hearing loss, deafness, vertigo, meningitis and chronic ear infections. If left uncontrolled, a cholesteatoma may even invade the skull, increasing the risk of infection in this area, leading to meningitis and brain abscess. The other indication is if you have a chronic tympanic membrane perforation with either failed previous repair or chronic drainage with changes to the bone. In these cases a simple ear drum repair has a higher chance of failure. By opening the mastoid bone behind the ear drum the chances for a successful outcome are improved. Either indication may require a second surgery depending on the condition of your hearing bones.

This procedure involves making an incision behind the ear and removing the infected area or bone. The procedure may be a part of a 2 stage procedure and if so, the 1st stage may leave you with worse hearing than before the surgery. The 2nd stage surgery, usually scheduled in 6-12 months, will aim at reconstruction the hearing bones.

This is about a 45 minutes to 1 hour outpatient procedure; you will be released to go home later that day. Recovery from surgery generally takes 5-7 days. You will need to call the office to schedule an appointment with Dr. Herzog 4 weeks after surgery, unless otherwise specified.

**Medication**

**Pain medication:** Take this as prescribed only on an as needed basis. Do not drive or operate machinery while using narcotics. Avoid taking medication on an empty stomach. You may have better pain relief by alternating the narcotic pain medicine with up to 800MG of Ibuprofen every 4 hours as needed, or Tylenol 500-1000MG every 6 hours as needed.

**Antibiotic:** Start the antibiotic the evening you go home from surgery and take until the prescription is finished. Avoid taking on an empty stomach.

**Ear drops:** You will need to start using the ear drops exactly 1 week after surgery and continue until you return to see Dr. Herzog. It is important you use the drops until you return to see him as they will begin to dissolve the packing in the ear and keep it moist.

**After-Care**

**Incisional Care:** You will have an ear shield dressing on your ear after surgery; you will remove this the following day. Wash your hands before and after caring for the incision. You can use a cotton ball or Q-tip to gently clean the incision with hydrogen peroxide. Dab the incision, do not rub, pick, pull or scratch it! Apply any over the counter antibiotic ointment such as Neosporin to the incision. Keep the ear and incision dry when showering or bathing for the first week after surgery. Starting 1 week after surgery you can get the incision wet. Your stitches are dissolvable and will begin to fall out 1-2 weeks after surgery.
Care of Ear Canal: You will have packing in your ear after surgery which will make your hearing sound muffled, along with a feeling of fullness or pressure, which is normal. Do not stick a q-tip or anything in your ear canal under any circumstances!!! It is crucial to keep the ear canal dry by putting a cotton ball smeared with Vaseline into the ear canal whenever showering or bathing. Change the cotton ball 2-3 times a day as needed; you will need to keep a cotton ball in your ear at all times until you return for your 1st post op visit. It is normal to have some bloody ooze and pain during the week after the procedure. It is not unusual to experience dizziness for a couple days following surgery. Call the office if this fails to improve 3-4 days following surgery.

Avoid lying on the operative ear for 1 week after surgery. No strenuous activity for 4 weeks, including no heavy lifting over 10lbs. Do not travel on an airplane for 4 weeks, unless otherwise approved. Avoid situations where you might have to make sudden head movements. Do not blow your nose or sneeze with your mouth closed. Try not to blow your nose for at least 3-4 weeks after surgery.

Call the office if you have a temperature over 100.3, your incision is red, swollen or coming apart, you have excessive drainage from your ear or incision, clear fluid draining from you rear, incision or nose. Do not wait until your next office appointment to report any problems or questions. The office number is 314-453-0001 and the after-hours exchange is 314-364-5323.