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## **ADULT COCHLEAR IMPLANT PATIENTS: POSTOPERATIVE INSTRUCTIONS**

1. No heavy lifting or strenuous activity for 1 week. No contact sports for 4 weeks.
2. Keep your head elevated on 1-2 pillows when lying down for 1 week following surgery.
3. Remove the **entire ear bandage** 48 hours after surgery. You should see the incision and the sutures. Oozing is normal.
4. Showering and bathing is allowed **AFTER** the ear bandage is removed (48 hours after the operation).
5. **AFTER** the bandages are removed, clean the incision with half-strength hydrogen peroxide (1/2 water, 1/2 hydrogen peroxide) to remove any old blood clots or crusting on the wound with Q-tips. **DO NOT** replace the bandage, leave the incision open to air. If there is any oozing, you may use a small sterile adhesive bandage temporarily.
6. Apply Vaseline to your incision after cleansing with hydrogen peroxide. Do not use Neosporin or Bacitracin as a growing number of patients are developing allergies to these ointments. The sutures are dissolvable and will fall out on their own. There may be oozing and drainage from the incision – this is normal after surgery.
7. You will be given an antibiotic to take for one week following surgery. Please finish the medication as prescribed; do not stop early even if you feel well. If you think that you may be developing an allergic reaction to the antibiotic, a yeast infection, excessive diarrhea or loose stools, or have severe abdominal cramping, please call your doctor's office. Contact us as soon as possible for any high fevers, severe headaches, or unusual neck stiffness.
9. The first clinic visit for adults is **4-6 weeks after cochlear implant surgery**. Call **617-573-3130** to confirm this appointment with Dr. Lee's office.
10. The cochlear implant will be turned on 2-3 weeks after surgery – confirm your appointment with **Audiology** at **617-573-3266**.

## **What might you expect following your cochlear implant surgery?**

### **Pain**

You will be given a pain medication to be taken for the first several days after surgery. Mild, intermittent ear pain is not unusual during the first two to four weeks after surgery and will improve.

Pain above or in front of the ear is common when chewing and is temporary.

### **Swelling**

Swelling is expected following surgery. The swelling can occur behind the ear, in front of the ear, around the eye, or around the mouth. Some bruising may also occur.

The ear may appear to stick out or appear to be higher or lower than the other ear. **This is normal** and will gradually improve over the weeks following surgery.

However, if a golf ball sized swelling develops over the implant, please contact us as soon as possible.

### **Ear numbness**

Your ear may feel numb - this is temporary and will improve over several weeks or months. If the ear is numb exercise caution when using a hair dryer on a hot setting to avoid injury to the skin until sensation returns.

### **Ear popping or fullness**

You may experience popping, crackling, or other sounds in the ear. This is caused by nerve stimulation or fluid in the ear from surgery and is usually temporary. You may feel as if the ear feels clogged or filled with fluid. **This is entirely expected after surgery.**

### **Dizziness**

Dizziness may occur following surgery. Avoid sudden movements; stand up slowly. Dizziness is usually temporary and will improve with time. Gradually increase your child's activity levels.

### **Drainage or discharge**

A bloody or watery discharge is expected during the healing process. Call your doctor's office for a yellow or green discharge. Discharge with foul odor should also be reported.

Some patients notice a nosebleed or spit up blood - this is common and results from the blood that accumulates in the middle ear during surgery, and drains into the back of the nose. **This is not cause for concern.**

## **What might you expect following your cochlear implant surgery?**

### **Taste disturbance and dry mouth**

This is common after cochlear implant surgery and results from irritation of the taste nerve (chorda tympani nerve) during the surgical approach to safely protect the facial nerve and expose the cochlea. This is a temporary sensation for the majority of patients. In some patients, this can last a few months or more

### **Meningitis following surgery**

This is a rare condition that can follow cochlear implant surgery. If you are experiencing high fevers, light sensitivity (photophobia), neck stiffness or severe headache go to your nearest emergency room ASAP.

**ALL COCHLEAR IMPLANT PATIENTS** must receive a **pneumococcal** vaccine - please refer to the **Centers for Disease Control** website:

<http://www.cdc.gov/vaccines/vpd-vac/mening/cochlear/dis-cochlear-gen.htm>

If you have not yet done so, fax a copy of your primary care physician's medical record to our office verifying that you received a **pneumococcal vaccine (FAX: 617-573-3914)**.

### **Tinnitus**

You may experience "ringing" or "buzzing" in the ear following surgery. This is common and will usually improve after activation. If tinnitus was present before surgery, it may become louder until activation.

## **OTHER FINDINGS**

You may have some discomfort with chewing - this is common and is temporary.

You may have some slight bruising around the eye or corner of the mouth - this occasionally occurs because of the facial nerve monitor electrodes and is temporary.

You may have a sore throat or hoarse voice and this occasionally occurs because of the breathing tube (endotracheal tube) that is used if you received general anesthesia. This will usually improve over time.

Call Dr. Lee's office for any unusually high fevers, neck stiffness, shortness of breath, leg pain, unusual swelling at the surgical site, or increasing pain.

**In case of emergency, call the Massachusetts Eye and Ear Infirmary at 617-523-7900 and ask for the Otolaryngologist on call.**

