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INSTRUCTIONS FOR ADULT COCHLEAR IMPLANT PATIENTS

1. **ACTIVITY:** No nose blowing, strenuous activity, contact sports, or gym for 3-4 weeks after surgery.
2. **POSITION WHILE SLEEPING:** Keep your head elevated on at least one pillow (if possible) when lying down for 1 week after surgery.
3. **WOUND CARE:** Remove the entire ear bandage 2 days after surgery until you see the entire outer ear and the skin incision behind the ear. The sutures will dissolve on their own. Drainage from the ear canal and ear incision is normal and will decrease with time.
 - a. Use 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 use a bandage; leave the incision open to air. If there is any oozing, you may use a small sterile adhesive bandage temporarily.
 - b. Apply Vaseline to the incision after cleansing with hydrogen peroxide. **Do not use** Neosporin or Bacitracin as a growing number of patients are developing allergies to these ointments.
4. **BATHING / HAIRWASHING:** You may bathe or shower and wash your hair **AFTER** the ear bandage is removed (two days after surgery).
5. **MEDICATIONS:**
 - a. **Pain medications:** Take your pain medication regularly for the first several days after surgery and as needed.
 - b. **Antibiotics:** Please finish your antibiotics as prescribed. If you are developing an allergic reaction to the antibiotic, a yeast infection, excessive diarrhea or loose stools, or severe abdominal cramping, please stop the antibiotic and call your doctor's office.
6. **FLYING:** You may fly two weeks after surgery unless he or she has a cold or severe nasal congestion.
7. **RETURN TO WORK:** You may return to school or work in one week after surgery, or within 3-4 days if feeling well, with no pain or dizziness.

8. FOLLOWUP VISITS

- a. **With Dr. Lee: about 4 weeks** following surgery – call **617-573-3130** to confirm this appointment.
- b. **With Audiology to turn on the cochlear implant:** 3-4 weeks after surgery – call **617-573-3266** to confirm this appointment.

What might you expect following 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 slowly improve in most cases. Pain above or in front of the ear is common when chewing and is temporary. If you are experiencing this, avoid chewy or hard foods for about 4 weeks after surgery until the discomfort begins to improve.

Swelling: Swelling is expected following surgery. Generalized 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, please contact us as soon as possible.

Ear numbness: You may have ear numbness - this is common and 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.

Popping of the ear: You may experience popping, crackling, or other sounds in the ear. This is caused by fluid and blood in the ear from surgery and usually improves with time. **This is entirely expected after surgery.**

Ear blockage / ear fullness: You may feel as if the ear feels clogged or filled with fluid. The ear is filled with fluid and blood from surgery so **this is entirely expected after surgery.**

Ringling (tinnitus), hearing loss, or increased hearing sensitivity: Patients may notice ringing of the ear after surgery – this can be high-pitched, low-pitched, constant or intermittent – and is often temporary or decreases with time.

Dizziness: Dizziness may occur following surgery. You should stand up slowly and avoid sudden movements and excessive physical activity. Dizziness is usually temporary and will improve with time. Gradually increase your activity levels as your dizziness improves.

Drainage or discharge: A modest amount of bloody or watery discharge **is expected** during the healing process. Call your doctor's office for a yellow or green discharge with a foul odor.

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.**

Taste disturbance and dry mouth: This is common after ear surgery and results from irritation of the taste nerve (chorda tympani nerve) during the surgical approach to safely protect the facial nerve, expose the middle ear (facial recess approach) and place the electrode into 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 very rare condition that can follow cochlear implant surgery. If you are experiencing high fevers, light sensitivity (photophobia), neck stiffness, a severe headache, or confusion 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 PCP's medical record to our office verifying that you are up to date with your **Pneumovax (FAX: 617-573-3914)**.

OTHER FINDINGS

You may have some slight bruising around the eye or corner of the mouth – this occasionally occurs because of the facial nerve monitor electrodes that are sometimes used during ear surgery 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 during 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 (Ear, Nose and Throat surgeon) on call.

All the best for a speedy recovery! We look forward to seeing you for the first visit after surgery.

Regards,



Daniel J Lee MD FACS