

Patient Name: _____ Date: _____

Surgery Date: _____

Once your surgery is completed, you must follow all the instructions given to you in order to heal properly and have a good outcome.

The following instructions are your obligation. Use this as a checklist of progress as you heal. Included are normal post-surgical experiences and key health considerations that may be a cause of concern.

NORMAL POST-OPERATIVE SYMPTOMS

Typical symptoms and signs to watch for following otoplasty include:

- **Swollen, red ears. A firm feeling or tingling of the outer ear.** These are normal experiences as the skin, tissues and sensory nerves heal. Pain medication will help you cope with any discomfort.
- **Consistent sharp pain should be reported to our office immediately.**

CALL THE OFFICE IMMEDIATELY IF YOU EXPERIENCE ANY OF THE FOLLOWING:

- **A high fever, (over 101°) severe nausea and vomiting, continued dizziness or incoherent behavior, such as hallucinations.**
- **Any pain that cannot be controlled by your pain medication.**
- **Bright red skin that is hot to the touch.**
- **Excessive bleeding or fluid seeping through the incisions.**
- **A severely misshapen ears or bruising that is localized to one ear.**

To alleviate any discomfort, and to reduce swelling, you may apply cool (not cold) compresses to your ears. Do not apply ice or anything frozen directly on the skin. Soak soft plain white washcloths or gauze squares in ice water and wring out well. Apply any compress gently; do not apply any pressure, this could injure ears. Apply cool compresses for no longer than 20-minute intervals. **Do not apply any heat.**

DRESSING

You may be wearing a dressing, ace wrap or similar compression around your head to support your ears as they begin to heal in their new position and/or shape. Follow the directions you are given explicitly for wearing this dressing. **It is important that dressing not be removed or dislodged for any reason, except with explicit instructions from doing so may significantly impair the outcome of your procedure.**

DAY OF SURGERY INSTRUCTIONS

Whether you are released after surgery or after an overnight stay in a recovery center or hospital, you will only be released to the care of a responsible adult. All of these instructions must be clear to the adult who will monitor your health and support you, around the clock in the first 24 hours following surgery.

_____ **Rest, but not bed rest.** While rest is important in the early stages of healing, equally important is that you are ambulatory, meaning that you are walking under your own strength. Spend 10 minutes every 2 hours engaged in light walking indoors as you recover.

_____ **Recline, do not lie down.** This will be more comfortable for you, and can reduce swelling. Always keep your head elevated. Do not bend forward or over.

_____ **Good nutrition.** Fluids are critical following surgery. Stick to non-carbonated, non-alcoholic, caffeine-free and green tea-free beverages including fruit juices and water, milk and yogurt drinks. You must consume at least 8 ounces of fluid every 2 hours. Stick with soft, bland, nutritious food for the first 24 hours.

_____ **Take all medication, exactly as prescribed:** If you have a pain pump, follow the instructions specifically for your pain pump. Oral pain medication, antibiotics and other medications you must take include:

Antibiotic	mg	x per day
Pain Medication	mg	x per day
Other / Supplements		

_____ **Wound care may be required.** You may be instructed to remove any dressing or compression to care for wounds. Do not remove any steri-strips or crusting near your stitches. Apply ointment as directed. Immediately replace any dressing or compression as directed.

_____ **Do not smoke.** Smoking can greatly impair your safety prior to surgery and your ability to heal following surgery. You must not smoke.

_____ **Relax.** Do not engage in any stressful activities. Do not lift, push, or pull anything. Take care of no one, and let others tend to you.

TWO (2) TO SEVEN (7) DAYS FOLLOWING SURGERY

During this time you will progress with each day that passes. Ease into your daily activities. You will receive clearance to begin driving or return to work at your post-operative visit, or within _____ **days.**

Your post-operative visit is scheduled for: _____.

- **Practice daily sun protection.** An SPF 30 is essential regardless of the weather or your activities.
- **You may shower as needed. You must follow all the instructions you are given for compression, dressings and wound care.**
- **Apply skincare cautiously.** Do not use glycolics, retinoids or other potentially irritating skincare or haircare products until you receive clearance to do so.
- **Take antibiotic medications and supplements as directed.** Take pain medication only as needed. You may wish to switch from prescriptive pain medication to acetaminophen or ibuprofen.
- **Continue to keep your head elevated, including when sleeping.**
- **Do not resume any exercise other than regular walking.** Walking is essential every day to prevent the formation of blood clots.
- **Maintain a healthy diet. Do not smoke. Do not consume alcohol.**

ONE (1) TO FOUR (4) WEEKS FOLLOWING SURGERY

As you resume your normal daily activities, you must continue proper care and healing.

- **Refrain from direct sun exposure.** If you are outdoors, apply at least an SPF 30 at least 30 minutes prior to sun exposure and wear a hat with a brim that shades your ears. Your skin is highly susceptible to sunburn or the formation of irregular, darkened pigmentation.
- **Do not smoke.** Smoking deprives your body of necessary oxygen that can result in poorly healed, wide, raised scars.
- **You may begin to sleep in a modified reclining position.** However do not sleep on your side, or with your head resting on your ear.
- **Do not engage in any contact sports or swimming until you are given clearance to do so.**

Follow-up as directed. Your second post-operative visit is scheduled for: _____.

SIX (6) WEEKS FOLLOWING SURGERY

Healing will progress; swelling continues to diminish.

- **Discomfort or tightness and tingling of the ears will resolve.**
- **You may ease into your regular fitness routine.** However, if you are going to engage in any contact sports you must wear proper protection.
- **No need to resume smoking.** You have now gone 10 weeks (4 weeks prior to surgery and 6 weeks following) without a cigarette. For your long-term health, there is no need to resume smoking.

YOUR FIRST YEAR

Your appearance will change with age. If your condition changes in any way, contact our office. Call us at any time with any of your questions or concerns.

I have read and understand all of the above instructions. I understand that following these instructions is solely my responsibility. I understand that it is also my responsibility to ask my doctor and his or her staff any questions I have related to these instructions or about my procedure, health and healing.

Patient Signature: _____ **Date:** _____

Printed Name of Patient: _____

Signature of Practice Representative and Witness: _____