

POST-OP INSTRUCTIONS FOR GENERAL SURGERY

These are general instructions apply to all excision operations. You and your family should read these instructions several times to familiarize yourselves thoroughly with them. Attempt to follow them faithfully because those who do generally have the smoothest post-operative course and the greatest chance for a successful hearing result.

SWELLING - Every operation, no matter how minor, is accompanied by swelling of the surrounding tissues. The site of the excision may appear larger or more swollen than the opposite side of the head/neck/jaw. This is the result of post-operative swelling and it should subside over a period of several days to weeks. It may also be noticed that there is some numbness over the top of the site after the bandages have been removed. This is the result of bruising of the sensory nerves to the site area as a result of the incision. This numbness will gradually subside over a period of several months.

HEMORRHAGE - There may be occasional mild bleeding from the incision of the site. This is usually of no concern unless there is a constant flow of blood as when one would cut a finger. If there is some drainage from the incision site, a small piece of gauze can be taped over the site in order to collect the drainage. If the bleeding becomes troublesome and is of concern, you should call the office.

PAIN - There is usually only mild pain following surgery. Some discomfort may be felt for the first 24 hours if a pressure dressing is applied to the site. Once this is removed, however, most discomfort subsides. There may be occasional fleeting, stabbing pain at the site up to one week after surgery. Analgesics will be prescribed if they are necessary. These should be taken only when needed. Tylenol is fine if the pain is not severe.

CLEANING THE SITE - Any dried blood on the border of the excision may be gently cleaned with a Q-tip and hydrogen peroxide. The excision should be cleaned twice a day with a Q-tip and hydrogen peroxide in order to remove all dried blood.

TEMPERATURE - Generally the body temperature does not rise much above 100° following excision procedures, but low grade temperature spikes/fevers are not uncommon. There are many factors for this including normal reactions to anesthesia, low grade dehydration after surgery and often there is feeling of temperature elevation after surgery that does not actually reflext a true temperature rise. Be sure to actually measure your temperature with a thermometer if you do feel warm. Report any persistent temperature above 101.5°.

WEAKNESS - It is not unusual after a person has had an anesthetic, or any type of operation, for them to feel weak or become lightheaded. This gradually subsides in several days.

DIZZINESS – Any procedure pertaining to the head/neck/ear may cause lightheadedness or dizziness. This usually subsides within several days and is of no serious concern. If the dizziness recurs and becomes increasingly severe, the office should be notified.

RESUMING ACTIVITIES - It is advisable to sleep with the head of the bed elevated for the first week after surgery. This helps to minimize swelling around the surgical site. The head of the



bed may be elevated by sleeping on two or three pillows or by placing several pillows under the mattress. After the first week, you may sleep without the head of the bed elevated.

You should avoid all activities that may increase the blood pressure as this will increase pain and the chance for bleeding after surgery. Avoid all bending over and lifting heavy objects for at least two weeks after surgery. Try to avoid sneezing and blowing your nose for the first several weeks after surgery.

You should avoid gym classes or strenuous athletic activity for 2-4 weeks after surgery. Contact or high speed sports should be avoided for 1-2 months after surgery.

Bathing may be resumed as soon as the patient feels strong enough to do so, but the actual wound itself should not get wet for 48 hours after surgery. Sometimes this makes bathing awkward or inconvenient. You may need to bath with wash clothes or with someone's help durimng the first 48 hours. After 48 hours the wound may get wet with clean/soapy water and gently pat dry, but do not submerge the wound (bath tube or pool/jacuzzi for 2 weeks).

RETURNING TO WORK OR SCHOOL - The average patient is usually able to return to school or work one to two weeks following surgery. Return to work or school is dependent upon the amount of physical activity involved. Following simple excisions, most patients may return to their school or work activities in one week. However, individuals undergoing more serious excisions may have to wait two to three weeks before normal work activity may be resumed. This should be discussed with your surgeon at the time of your first office visit.

MEDICATIONS - When discharged from the hospital/clinic, you may be given prescriptions. There will be specific instructions regarding this medications on a case by case basis.

Further Instructions:		
Instructions received with understanding: _	(Signature of responsible adult)	
Signature RN	Date/ Time	