



Mr. Nalaka de Silva

FRACS B Med

Ear Nose and Throat Surgeon

Tympanoplasty: Pre Op Instructions

PENINSULA PRIVATE HOSPITAL
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Education

google: GPENT

Prior to any surgery it is important that necessary precautions are taken to minimise the risk of operative bleeding as well as general anaesthesia. Following are some important pre operative instructions.

- 1) If you or any blood relatives have tendency to bleed or bruise excessively, please notify the surgeon.
- 2) Disclose all medical illness to the surgeon and the anaesthetist. By doing so the doctors are able to determine your anaesthetic risk, and do appropriate pre operative investigations and optimise your medical treatment. If there is a need your surgeon may get other appropriate specialists involved for the pre operative work up.
- 3) If you are a smoker, you must stop smoking for up to two weeks prior to surgery.
- 4) If you take blood-thinning medications such as Warfarin, Aspirin or Newer anti platelet medications, these need to be disclosed to the surgeon. The surgeon will ask you stop these for 10 days if it is safe to do so, after consultation with your physician. He may cancel surgery if the risk of stopping such medications is too high.
- 5) There is potential of certain dietary supplements, including garlic, Ginkgo biloba, ginger, ginseng, glucosamine fish oil, and vitamin E, to interfere with hemostasis. These and any other supplements should also be stopped well in advance.
- 6) Practical matters: Organise sufficient assistance at home. Stay with close proximity to a hospital. Ensure you have some one to drive you to emergency, incase of a bleed. Have access to a phone. Do not plan travel or any strenuous activity for at least four week following surgery.
- 7) You must have a recent hearing test and a dry ear prior to surgery. You must been seen by the surgeon one to two weeks prior to surgery
- 8) If you become unwell, pregnant or develop an ear infection prior to surgery, please inform the surgeon and the hospital.





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KEEPING DRY

Ensure that water does not enter the ears after surgery. You may use a ball of blue tac with a head band on top (do not push blue tac in to the ear canal). Instead you can also use a cotton ball completely covered in Vaseline which will keep cotton dry.

EAR DRESSINGS

Tympanoplasty alone: You will have dissolvable dressings. To keep these moist and clean use ciproxin drops; 4 drops three times per day until clinic. You will also receive antibiotics and pain relief.

Canal Drilling/ Mastoid: You will have an iodine dressing, in which case you DO NOT need drops. This dressing is yellow and will remain for 3 weeks. If you develop pain or a reaction, please notify the surgeon immediately.

DISCHARGE

It is common to have some blood, ooze post operatively. However if it becomes smelly associated with pain or fever, wound issues you must notify the surgeon.

If iodine dressing- yellow discharge mixed with a bit of blood which is normal.

If you have excessive discharge, watery discharge or concerns please contact the surgeon.

FOLLOWUP

Surgeon will see you one or two weeks after surgery for a suction. Some of the dressing material as well as clots will be removed/ cleaned over several weeks. He will see you at intervals and obtain a hearing test at 3 months.

NOT BLOWING THE NOSE

Do not blow the nose. When sneezing do so through the mouth. Pressure in the nose can affect the graft. Also avoid straining in the early post operative weeks.

REST

No lifting weights, strenuous activity for at least four weeks after surgery

ANY CONCERNS: contact the surgeon/ go to emergency

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Tympanoplasty: Consent For Your Surgery

Informed consent is a process of finding out information about the recommended treatment, alternative options and weighing up the benefits and risks involved. However it is not an exhaustive list of every single possible complication.

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Consent Covers

- The diagnosis and likely outcome (prognosis) of your condition
- An explanation of the recommended treatment
- The risks of the procedure and common side effects
- Possible complications
- Specific details of the treatment; for example, where it will be performed and who will perform it
- Any other options for treatment and their probability of success.

You would also be provided with an official handout about surgery, which you will be required to read and understand. If you have any specific matters which you like to further discuss you are requested to contact the surgeon and make another appointment prior to surgery. You have the right to cancel surgery if you wish to do so.

Summary of the risks and complications of Tympanoplasty:

- 1) Pain
- 2) Infection/ rare cosmetic change to the ear
- 3) Scar, numbness
- 4) Bleeding
- 5) Ongoing Perforation or need for further surgery
- 6) Loss of hearing
- 7) Nerve damage: taste nerve, nerve to the face
- 8) Narrowing of the canal

Canal Drilling / Mastoid Surgery : Additional Risks

- 9) Jaw joint pain, damage
- 10) Damage to ear drum,
- 11) Brain fluid leak
- 12) Longer operation (3-4 hours)





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Tympanoplasty: Checklist

YOU HAVE RECEIVED THE FOLLOWING CLINICAL INFORMATION

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- 1) Surgical Information Documents - Pre Op, Post Op and Consent
- 2) Quote for Theatre Procedures
- 3) Printed surgical information sheet with details
- 4) Hospital Admissions Form
Patient to complete and return to the selected hospital
- 5) Anaesthetic Services Fee and Booking Form
Patient to complete and return to Anaesthetic Service
- 6) Confirm Theatre Admission with the selected Hospital
- 7) Information about the process on the day
- 8) Patient to contact the surgeon if you have any further questions,
after reading through all of the information.

Patient's Signature

Signature of the Collector

Date

