**Tympanomastoidectomy: Before Your Surgery**

**What is a tympanomastoidectomy?**

A tympanomastoidectomy (say "tim-PAN-oh-mas-toyd-ECK-tuh-mee") is surgery to treat frequent ear infections that have damaged the eardrum and tissue in the ear. The doctor will remove the abnormal or infected tissue in the bony area behind the ear, called the mastoid. The doctor will repair the eardrum. The doctor also may repair the three tiny bones in the middle ear that help with hearing.

You will get medicine to make you sleep during the surgery. You will not feel pain. The doctor will do the surgery through a cut (incision) behind your ear. When the doctor has removed the tissue and repaired the eardrum, he or she will close the incision behind your ear with stitches.

You will probably go home on the same day as your surgery. Most people can go back to work or their normal routine in about 1 to 2 weeks. But if your job requires strenuous activity or heavy lifting, you may need to take up to 4 weeks off. Your doctor can help you decide when to go back to work.
Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

What happens before surgery?

Having surgery can be stressful. This information will help you understand what you can expect and how to safely prepare for surgery.

Preparing for surgery

• Bring a list of questions to ask your doctors. It is important that you understand exactly what surgery is planned, the risks, benefits, and other options before your surgery.

• Tell your doctors ALL the medicines, vitamins, supplements, or herbal remedies you are taking. Keep a list of these with you, and bring this with you to every appointment. You will be told which medicine to take or to stop before your surgery.

• Some medicines, such as aspirin or ibuprofen (Advil, Motrin), and certain vitamins and herbal remedies can increase the risk of bleeding or interact with anesthesia. You may be asked to stop these a week before surgery.

• Before your surgery, you will speak with an anesthesia provider to discuss your anesthetic options, including the risks, benefits, and alternatives to each. This may be on the phone or in person.

Taking care of yourself before surgery

• Build healthy habits into your life. Changes are best made several weeks before surgery, since your body may react to sudden changes in your habits.
  • Stay as active as you can.
  • Eat a healthy diet.
  • Cut back or quit alcohol and tobacco.

• If you have an advance directive—which may include a living will and a durable power of attorney for health care—let your doctor know. If you do not have one, you may want to prepare one so your doctor and loved ones know your health care wishes. Doctors recommend that everyone prepare these papers before surgery, regardless of the type of surgery or condition.
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What happens on the day of surgery?

• Follow the instructions exactly about when to stop eating and drinking, or your surgery may be canceled. If your doctor has instructed you to take your medicines on the day of surgery, please do so using only a sip of water.

• Take a bath or shower before you come in for your surgery. Do not apply lotions, perfumes, deodorants, or nail polish.

• Do NOT shave the surgical site yourself.

• Remove all jewelry, piercings, and contact lenses.

• Leave your valuables at home.

At the hospital or surgery center

• Bring a picture ID.

• Before surgery you will be asked to repeat your full name, what surgery you are having, and what part of your body is being operated on. The area for surgery may be marked.

• A small tube (IV) will be placed in a vein, to give you fluids and medicine to help you relax. Because of the combination of medicines given to keep you comfortable, you may not remember much about the operating room.

• You will be kept comfortable and safe by your anesthesia provider. You will be asleep during the surgery.

• The surgery will take about 1 to 4 hours.

• As you wake up in the recovery room, the nurse will check to be sure you are stable and comfortable. It is important for you to tell your doctor and nurse how you feel and ask questions about any concerns you may have.

• You will have ointment or gauze in your ear canal. Your doctor will take this out.

• You may have strips of tape or a bandage over the incision behind your ear.

Going home

• Be sure you have someone to drive you home.

• For your safety, you should not drive until you are no longer taking pain medicines and you can move and react easily.
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• Arrange for extra help at home after surgery, especially if you live alone or provide care for another person.

• You will be given more specific instructions about recovering from your surgery, including activity and when you may return to work.

When should you call your doctor?

• You have questions or concerns.

• You don’t understand how to prepare for your surgery.

• You become ill before the surgery (such as fever, flu, or a cold).

• You need to reschedule or have changed your mind about having the surgery.

Where can you learn more?

Go to http://www.kp.org

Enter W923 in the search box to learn more about "Tympanomastoidectomy: Before Your Surgery".

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