Discharge Information: post insertion of Grommets / Ventilation Tubes
Information for patients, families and carers

Dear Patient/Carer:

Please read this document carefully as it contains important information that complements the instructions given by your MEG ENT Specialist during your recent surgical admission.

Medications:

- **Pain Management:**
  - Most patients do not experience pain.
  - Mild discomfort can be controlled with simple pain medication, such as common over-the-counter analgesics (*e.g.* Paracetamol or Ibuprofen).

- **Antibiotics:**
  - We don’t routinely prescribe antibiotics after this type of ear surgery.
  - Your *MEG ENT specialist* will instruct you on the use of Antibiotic eardrops if required.

Ear Care:

- **Water Precautions:**
  - You must keep your ear(s) dry until the grommet(s) extrude.
  - If you do get water in the ear canal, it may enter the middle ear through the Grommet(s), and may result in an infected/discharging ear.
  - You must start the use of water-proof ear plugs (silicon plugs, blu-tac®) at the time of your routine shower or bath.
    - Ensure the Ear-plugs are for water exclusion (not the noise protection variety).
    - After each use, please clean the plugs with water and soap and allow them to dry for the next use.
    - Blu-tac® should be discarded after single use.
  - In the case of small children:
    - It is useful to start the use of the plugs as a game, a few days before the surgery takes place, so they become used to the sensation of having the ear plugs during the bath/shower time.
    - It is often helpful to reinforce ear plugs for swimming with a cap or head-band.

Return to normal activity

- You/or your child will require 1 – 2 days/weeks off work/school to allow a full recovery.
- You/or your child should avoid swimming pool activities/lessons until the postoperative appointment with your MEG ENT Specialist.
  - You may restart these activities using adequate swimming ear plugs and a head band or cap afterwards.
- Please do not dive under water even with plugged ear canals.
Attend your nearest Emergency Department or Local GP Clinic if:
- You or your child experience ear infection (discharge), fever, or severe pain that doesn’t respond to the prescribed analgesics.
- Your MEG ENT specialist would be keen to provide advice to your doctor if required.

On your Post-operative Appointment
- Your MEG Specialist will perform an otoscopy to inspect the grommet(s).
- You will need to arrange a hearing test prior to this review and ensure you bring a copy of the results on the day of your appointment.
- You may be discharged for ongoing GP follow-up after this.

Grommets After care

Bleeding:
- Bleeding occurs occasionally, especially when the grommets have been in position for some time. It is alarming but almost never serious.
- It is usually associated with infection and the formation of a small polyp of reactive granulation tissue at the site of the grommet.
- It needs treatment with Antibiotic ear drops (SEE BELOW) and often removal of the grommet.

Discharge/Infection:
- Discharge from the ears occurs in probably 15-20% of patients with grommets, due to getting water in the ears or from an upper respiratory infection.
- It is not disastrous but should be treated.
- Often patients are treated for some time with oral antibiotics, unsuccessfully because the main organism is resistant to these.
- Most ear discharges respond to antibiotic ear drops of which Ciloxan® or Ciproxin HC® are the safest and most effective (needs doctor’s prescription).

Extrusion:
- Your grommet(s) should extrude in 6-9 months after insertion.
- Please follow the water precautions advised by your MEG Specialist until then.
- Visit your local GP for ear examination & review every 4 months or earlier if you experience an ear infection or hearing loss.

We will confirm the date and time of your post-operative appointment soon.
Do not hesitate to contact us if you require further information regarding these instructions.
Information for patients, families and carers

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