

ADULT AND PAEDIATRIC ENT HEARING AND BALANCE SPECIALIST

A. Prof Payal Mukherjee

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POST OPERATIVE PROTOCOL OPERATION: COCHLEAR IMPLANTATION WITH OR WITHOUT LABYRINTHECTOMY

HOSPITAL STAY: Generally an overnight stay is required for Cochlear Implant surgery. If you have had any additional procedures such as a labyrinthectomy (ablation of your balance organ), you may need to stay in the hospital for a bit longer.

LEVEL OF ACTIVITY: You may experience a period of low energy for the first day or two. There after you should be able to resume normal activity.

PAIN:

- You may expect a dull ache or some tightness in the wound.
- This can be relieved with Panadol or Panadiene Forte. Panadiene forte may cause drowsiness and constipation.
- Do not take any Aspirin or Ibuprofen products for 2 weeks before or 2 weeks after the operation. In addition some herbal products such as Fish oil need to be avoided as they may precipitate a postoperative bleed.
- You will be given prescription for pain relief.

WOUND CARE:

- There will not be any pack in your ear.
- Immediately after the operation you will have some steri-strips applied to your wound. Please keep these intact for the first week. Following that you may take the steri-strips off and you may get the wound wet.
- You will have self-dissolvable stitches.
- You will be reviewed one week after the surgery and maybe given some ointment to rub into the wound.
- In addition you will also be given 5 days or oral antibiotics to prevent an infection in your wound.
- If there is any unusual redness or pain or pus in the wound, please call the rooms.

REHABILITATION:

- Very soon after the operation (perhaps even the next day prior to you going home) you will need to be reviewed by the audiologist to “SWITCH ON” the cochlear implant.
- You may need also to have an X-ray of your head to assess the position of the electrode if necessary.
- We will endeavour to co-ordinate your reviews so any surgical follow up is co-ordinate on the same say as the audiological follow up.
- In addition if there has been any additional procedures conducted such as a labyrinthectomy, you will be reviewed by a vestibular physiotherapist who will assist you in getting out of bed and mobilising. This maybe on the ward initially while you are in hospital. You may also need to be reviewed by them as an outpatient for ongoing rehabilitation.



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MEDICATIONS: You will be given a prescription for oral antibiotics, antibiotic ointment and pain relief on discharge. Additional medications may be necessary if additional procedures have been conducted.

WATER PRECAUTIONS: The wound needs to be kept dry for one week. This period may be extended if there are any problems with wound healing such as an infection.

IMBALANCE: With any ear operation there is a risk of imbalance or vertigo post-operatively. This may also cause nausea and vomiting. This is uncommon and will usually occur immediately after the operation. If you are experiencing this, please call the rooms immediately. Please note that some pain relief tablets including panadiene forte and endone may also cause nausea and vomiting but will not cause vertigo.

DIET: A normal diet is recommended.

POST OP REVIEW: You will need to see your surgeon 1 week after surgery.

Please call the rooms if you have any questions after surgery