

We will send you an outpatient appointment for around two weeks time.

If you have any questions or concerns, please contact the A8 Shipwreck Ward at Queen Alexandra Hospital, Tel: (023) 9228 6391 or your GP.

Further Information

NHS Direct: Tel: 0845 46 47: www.nhsdirect.nhs.uk

NHS Choices info www.nhs.uk

Consent - What does this mean?

Before any doctor, nurse or therapist examines or treats you they must have your **consent** or permission.

Consent ranges from allowing a doctor to take your blood pressure (rolling up your sleeve and presenting your arm is implied consent) to signing a form saying you agree to the treatment or operation.

It is important **before** giving permission that you understand what you are agreeing to. **If you do not understand – ask.**

Information we hold about you and your rights under the Data Protection Act

Please refer to the booklet 'Your Healthcare Information – Your Rights! Our Responsibilities!' for further guidance.

How to comment on your treatment

We aim to provide the best possible service and staff will be happy to answer your questions. However, if you have any concerns you can also contact the Patient Experience Service on 0800 917 6039 or E-mail portsmouthhospitals.patientexperience@porthosp.nhs.uk

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The Paediatric Unit Queen Alexandra Hospital

Portsmouth Hospitals 
NHS Trust

Discharge Advice for parents following your child's Mastoidectomy

Advice for parents



Shipwreck Ward
Queen Alexandra Hospital, Cosham
Tel: (023) 9228 6391

Specialist Support

If you require this leaflet in another language, large print or another format, please contact the Health Information Centre Tel: (023) 9228 6757, who will advise you.



Introduction

This leaflet has been given to you to help you answer some of the questions you may have following your child's mastoidectomy.

What is a mastoidectomy?

A mastoidectomy is an operation to remove an infection or skin growth behind the eardrum together with the surrounding bone.

Why is the operation necessary?

If the infection/growth is left untreated, your child's hearing and balance may be affected. There is also the possibility of brain infections.

Damage can also be done to the delicate structures of the ear and the facial nerve, which can cause paralysis of one side of the face.

Frequent smelly discharge from the ear may also persist.

Following the operation, your child should no longer be at risk of these problems.

What happens during the operation?

Your child will have a general anaesthetic and be completely asleep and so will not feel any pain.

A cut is made behind the ear. After the disease has been removed, a graft is used to seal up any hole in the eardrum. A dressing soaked in antibiotic drips is placed in the ear canal and stays in place for two weeks. Cotton wool padding and a bandage are placed over the ear. An overnight stay will be necessary.

What happens after the operation?

The ear may be a little sore and your child will be given regular painkillers on the ward by the nursing staff.

Your child may experience some dizziness for a few days after the operation. Avoid any sudden movements of the head. Your child may also feel sick when lifting their head and we can give them medicine for this.

Your child may notice a strange squelching, buzzing or popping noise in the ear. This is due to the dressing in the ear, and usually stops when the dressing is removed. Your child may not have much hearing in the ear whilst the dressing is in.

Your child must not blow their nose. If sneezing, try to do so with the mouth open.

Ear dressings and stitches

The head bandage is normally removed the morning after the operation. A piece of cotton wool is placed in the outer part of the ear and this can be changed daily at home. Be careful not to pull out the dressing underneath.

The stitches can be removed at the GP's surgery at around 5-7 days after the operation, or as advised.

The antiseptic gauze dressing in the ear canal is removed in the Outpatient Clinic at around two weeks.

After your child leave hospital

Your child will need around two weeks off school and should avoid crowded places and any family or friends that have colds. There is a risk that a cold could lead to an ear infection and so damage the graft. If your child develops a cold you should contact your GP.

Keep the ear and wound dry. Take care when showering and washing hair. Place a piece of cotton wool covered in Vaseline in the ear to prevent water getting in. Also so not allow swimming until they have been seen in the Outpatient Clinic.

If your child has pain or discomfort, give the usual pain-killers.

A small amount of discharge is normal. If the discharge becomes smelly or very blood stained, your child feels dizzy or has severe pain around the ear, then contact the ward.

Avoid any strenuous or sporting activities until seen in the Outpatient Clinic.

Avoid any changes in atmospheric pressure (eg: aeroplanes, underground tunnels) as this can damage the graft.