

Returning to School

Your child will be able to go back to school after they have been seen by the consultant in the Outpatient Department, but they should avoid swimming and sport for a further month.

Shipwreck Ward - Tel: 023 9228 6391

Further Information

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

NHS Choices at

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

Pinnaplasy

Advice for parents



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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 about your child's Pinnaplasty operation.

Aim of the operation

A pinnaplasty is generally performed on children with prominent ears to make the ears less prominent. As with 'normal' ears there may be a small degree of asymmetry (unevenness) between the ears afterwards. The operation helps to prevent children being teased about their ears and can boost their self confidence.

What does the operation consist of?

Your child will have a general anaesthetic and will be completely asleep. A cut is made into the skin behind the ear, in the groove between the ear and the side of the head. The surgeon then reshapes the cartilage (gristly tissue) in the ears and uses stitches to pin the ears back. The cut in the skin is then closed up with stitches and a cotton wool dressing is placed behind and on top of the ears. A firm bandage is then used to secure the dressing. The dressings and bandage in most cases stays on for 14 days. This is to protect the ears and keep them help in the new position while they heal. It also helps to prevent a blood clot under the skin.

After the operation

For a short while after surgery, the ears will feel bruised and swollen. Your child may also be irritated by the tightness of the bandage around their head. They will get used to the bandaging and the nursing staff will be able to keep pain under control with regular painkillers.

Provided your child is not feeling sick, they should be able to eat and drink within an hour to two of the operation.

All children recover from surgery differently. This operation is usually a day case. Your child should be able to go home 2/3 hours following surgery

Going home

The bandages usually stay on for 10-14 days. However, different consultants do things their own way and some may not put bandages on at all, or they might take them off much sooner than 10-14 days. Ear bandages commonly fall off. There is no need to worry but if your consultant has given instructions for them to stay on for up to 10 days they must be replaced. The nursing staff on the Children's Unit are always happy to put them back on, but please give us a quick ring to let us know that you are coming. If it is easier, the Practice Nurse at your GP may also be able to put the bandage back on, but you will probably need to make an appointment.

It is to be expected that your child may continue to experience a little pain when they get home. You should be able to keep them comfortable with regular paracetamol (calpol) and ibuprofen, as directed.

If your child's pain is not improving and you are worried about them, you should telephone the nursing staff on the Children's Unit for advice. An increase in pain may be because your child has some infection. Infection after surgery is not common, but if it does happen it can usually be settled very quickly with a course of antibiotics.

Follow Up Appointments

You will be sent an appointment in the post or given one before your leave hospital, to see the consultant in the clinic again. This is usually about 10-14 days after the surgery. Again, the time you come back to clinic may vary from one consultant to another.

At this appointment, the consultant will remove ear bandages, if they are still on and the dressing from inside the ear. Most stitches that are used are the dissolvable kind so it is unlikely that there will be any to remove. The consultant may ask you to keep putting on ear bandages for a further week/month? at night times to stop any folding of the ears when your child turns over in his or her sleep.