

GROMMET & T-TUBE INSERTION

A Patients Guide



What is a Grommet for?

David will make a small incision or hole in your eardrum, the clinical term for this procedure is a *Myringotomy*. The small opening in the eardrum helps fluid drain out of your middle ear.

Sometimes a small tube or grommet is placed in the opening of the eardrum, it sits in the ear drum allowing air to enter the middle ear.

A grommet will be pushed out of the ear drum by the body's normal healing process within several months to two or more years after insertion.

Usually when the grommet is pushed out of the ear the problem will have resolved. Occasionally it is necessary to insert the grommet again.

What is a T-Tube for?

A T-Tube implant remains in the ear long-term. David may recommend a T-Tube insertion if you have chronic Eustachian tube dysfunction causing re-occurring glue ear or if you have required multiple grommets in the past. The T-Tube is inserted into the ear drum just like a grommet. Both implants keep the middle ear aerated for a prolonged period.

What to expect

If the grommet is being inserted under Local Anaesthetic, you may feel dizzy after your procedure. We recommend bringing a driver to assist you returning home safely.

Leaving the Hospital

All children and adults who have this operation under General Anaesthesia should be fine to return home on the same day.

After Surgery

In the first few days after surgery, it is common to have some blood stained discharge from the ear.

While it is not uncommon to get some nausea and / or vomiting it is not usually severe or long lasting. If you find you have persistent nausea and vomiting, please contact our team. It is not unusual to experience a pulsation, popping, clicking and other sounds in the ear. These sensations and the feeling of fullness or occasional sharp shooting pains may occur.

First 2 – 6 weeks

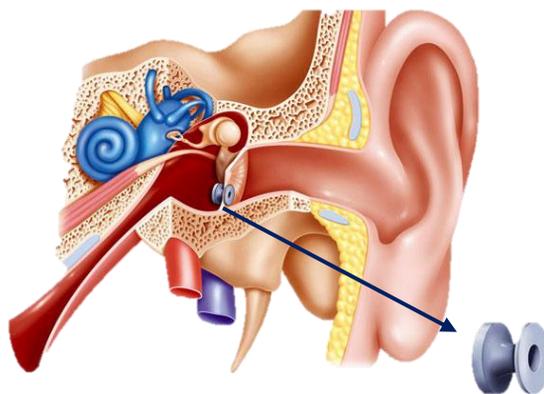
- Do not dive or swim at deep levels underwater.
- Avoid spa's, hot pools and baths.
- Do not put anything inside your, or your child's ears, this includes cotton buds, fingers or headphones.
- Keep the ears dry until your first follow up appointment.
- After your follow up review, you should be able to swim in clean sea water or very clean swimming pools.

Risks associated with Grommet surgery

- Ear infections
- Early extrusion
- Perforated Ear drum
- Trauma to Ear canal
- Recurrence of Problem

Uncommon and Rare:

- Loss or reduction of hearing
- Altered or lost taste
- Vertigo / poor balance
- Facial nerve injury



Swimming & Water

- You may require waterproof ear plugs or should wear a swimming cap / headband if you find you have ear discomfort or get an ear infection after swimming.
- We recommend the ear jobs website: www.earjobs.co.nz.
- It is important to be careful about what type of water you swim in. (to avoid infection e.g.; lakes, rivers, creeks)
- Avoid soapy bath water, shampoo water and contaminated spa, bath or pool water.

Adult Care (Local Anaesthetic Procedure)

Adult Care:

David may be able to perform a Myringotomy using Local Anaesthesia during your consultation. This procedure usually takes 30 – 60 minutes.

- You will be awake during the procedure.
- Local anaesthetic spray and numbing cream is applied precisely on the surface of the ear drum.
- This procedure is generally quick and should not be painful.

Cleaning:

- Keep your ears dry, particularly during the first 2 weeks after insertion to avoid infection.
- Ensure that your ears are kept as dry as possible when in water (shower, bathing, swimming)
- When washing your hair / head, place a cotton ball with some Vaseline in the ear as a disposable ear plug. Remove after your shower. (The clinic will provide you with ear caps for the shower)

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Post-Operative Assessment

An appointment will be arranged 6-8 weeks after your operation. The Tūhauora Clinic will arrange this appointment in advance.

Post Operative Audiology Test

A Comprehensive Hearing Test is recommended and required to assess your hearing improvement and ear function after surgery.

We can refer young children to Dilworth Paediatric Audiology in Auckland. Unfortunately, Northland does not have private audiology services available for under 10 years of age.

Please let us know if you would prefer a referral to the Public Audiology department at Whangārei Hospital. The waiting times can vary.

Seek Emergency Care

If you notice a large amount of fresh blood (more than 1 to 2 teaspoons), or if bleeding continues for more than 10 minutes present to your nearest emergency facility or dial 111.

You will need to be assessed as soon as possible at your local Emergency Department.

David and his consultant colleagues share 24 hour on-call duties at Whangārei Hospital. A specialist doctor is always available for emergencies.

If you live in the mid/far north present to Kawakawa or Kaitaia hospital for review.

CONTACT:

Tūhauora Clinic	Ph: 09 55 33 781
Whangārei Hospital	Ph: 09 430 4100
Kaitaia Emergency	Ph 408 9180
NZ Ambulance	Ph: 111

Children's Care

Post Operative Side Effects

After a general anaesthetic, your child might have a sore or dry throat. They may also have a mild cough, feel dizzy, get a headache, shiver, or feel achy and weak. These symptoms are normal and should improve within 24 hours. Some children may be unsteady on their feet, so please make sure a responsible adult supervises them during activities.

Bleeding, Discharge and Infection

In the first 24 hours after surgery, it's normal to see some discharge or a little bleeding from the ear. This should improve after the first week. If the ear continues to have smelly discharge, it could be a sign of infection. Infections usually happen if water gets into the ear canal, or if your child catches a cold or chest infection. If this happens, please see your GP, as your child may need antibiotics.

Cleaning the ears and head

Wipe only the outer ear with a soft damp cloth, don't put anything inside the ear canal. If your child feels discomfort after showering or washing their hair, try protecting their ears from soapy water. Soap can get through the tiny opening in the grommet more easily than normal water.

What to do if Water Gets In?

Try and gently shake your head to allow the fluid to come out. If the ear starts to produce discharge, contact our team or your GP to assess for infection.

Return to school & work

Children should be fine to return to normal activities and school within 2 – 5 days.

Adults should be fine to return to work and normal activities within 48 hours.

Submerging Head > 2 Weeks

Initially (First 1-2 Weeks): Avoid swimming and keep ears dry while bathing or showering.

After 2 Weeks you should be okay to submerge your head in clean water or begin swimming. It's best to avoid deep diving. If you wish to dive, contact David for clearance.