What is ear tube surgery?

Ear tube surgery is usually done under general anesthesia. A small hole is made in the eardrum and a tiny, 2-mm tube is then inserted into the hole. This allows unwanted fluid to drain from the space behind the eardrum (this space is the “middle ear”), and lets air in. Ear tube surgery is also called “myringotomy with tube insertion.”

Should my child have a fever afterwards?

After surgery, a slightly high temperature of 99°F to 100°F is normal. If the fever is 101.5°F or higher, give Tylenol or generic (store-brand) acetaminophen according to the package instructions. Use this medicine only if recommend by your health care provider. Check with your doctor first before giving any type of medicine to your child. If the fever stays over 101.5°F for 24 hours, call your doctor or nurse.

Will my child be in pain?

Usually there is little or no pain afterwards. If there is, you can treat it with Tylenol or generic acetaminophen if your child’s doctor says it is ok. Follow the package instructions. Do not use aspirin. One “side effect” is your child may hear better and complain that things are too loud!
How much drainage should there be after surgery?

Ear drainage is normal for a few days after surgery and may be bloody or foul-smelling. Continue to use the ear drops until the drainage stops. Call the Otolaryngology Clinic nurse line at 206-987-2105 if drainage persists beyond 10 days.

When can my child eat after the surgery?

Help your child to drink lots of liquids and progress to their regular diet after surgery once their stomach is settled. If you bottle-feed your child, do so in an upright position.

What about eardrops?

Your surgeon will probably want you to use eardrops for a few days after surgery. Use them as directed. If you were prescribed eye (“ophthalmic”) drops, don’t worry; eye drops can also be used safely in the ear. Sometimes children have pain or discomfort when the drops are applied. This is often because the drops feel cold. You can decrease this problem by warming the bottle of ear drops in your palm or pocket for a few minutes before using them. To get the drops into the ear canal, pull the ear gently back and slightly up. This will open the ear canal. Once the drops are in, you should pump the drops through the ear tube by pressing on the little skin flap in front of the ear canal (the “tragus”) a few times. It should make a squishing sound.

What about regular activity?

We encourage regular activity the day after the procedure. Airplane travel is all right too, because the ear tube instantly equalizes the air pressure when the plane descends. Your child will have the best ears on the plane!

Can my child get ear infections after ear tubes?

Ear tubes can not prevent all ear infections. If your child has ear tubes and gets an infection, you will see drainage from the ear. The drainage may look yellow, milky, or even bloody. Your child may not have pain and fever like they did before having ear tubes.

If the ear tubes are blocked, or come out, your child may have symptoms similar to those they had before the ear tubes were in, such as pain or fever.

What should I do if I see ear drainage in the future?

Since ear drainage is a sign of ear infection, you should start antibiotic ear drops right away. You do not need to take your child to the doctor if they are otherwise well. Ear drops are more effective than antibiotics taken by the mouth when the ear is draining, and have fewer side effects. If you were prescribed ear drops after surgery, you can use those. If you are out of ear drops, call your primary care doctor or the Otolaryngology Clinic and we can prescribe more. Remember, sometimes we will prescribe an eye (ophthalmic) drop for use in the ear.
Continue the drops until the drainage stops. If the drainage stops in less than 10 days, a doctor visit will probably not be needed. If drainage persists beyond 10 days, you should call your child’s primary care provider or the Otolaryngology Clinic for an appointment with our Otolaryngology nurse practitioner. They may need to change or provide additional antibiotic treatment.

If your child has severe pain or a persistent high fever (over 101.5°F for 24 hours) that isn’t helped by acetaminophen (Tylenol), contact your child’s primary care doctor. Your child may need oral antibiotics. If the ear tubes appear clogged, using ear drops may help unclog them.

Is it dangerous to get water in my child’s ears after ear tubes?

Clean bathwater in the ear is safe. Swimming in a chlorinated pool is also OK, but some children feel more comfortable wearing earplugs, especially if they dive more than a couple feet below the surface of the water. Earplugs should be used when swimming in oceans, ponds, lakes or rivers because there are more bacteria in the water. If this water does get in the ear, don’t worry; dirty water in the ear may cause an ear infection and drainage, but will not cause permanent damage to your child’s ears.

Do ear tubes need to be removed?

Not usually. Ear tubes usually stay in the ear drum for 6 to 18 months, and then fall out on their own. Certain types of ear tubes stay in the ear longer. If ear tubes are still in the ear 2 years after being placed, you should return to see your Otolaryngology provider. The tubes may come out of the ear drum and stay in the ear canal. When the tubes are coming out, there can be some itching and a small amount of bloody drainage. This is normal and can be treated with ear drops.

After the tubes come out, your child may need another set of tubes. We usually recommend waiting to see if your child develops ear fluid or infections again because many older children no longer need ear tubes.

What about follow-up care?

After your post-operative visit with us, your child can see their primary care provider for their regular care. If your child’s doctor feels there is a problem needing our attention, please call our clinic for an appointment. We usually recommend that you are seen in the Otolaryngology clinic once a year until the tubes are out, the eardrums are healed, and your child is no longer having ear problems.