



PEDIATRIC COCHLEAR IMPLANT

Instructions Following Cochlear Implant Surgery

1. Dressing Care: The head will be wrapped with a gauze dressing centered over the operated ear. If both ears are implanted the same day, there will be a pressure wrap that includes both ears. Watch the child closely to avoid them pulling off the dressing. **Leave it on for 2 days** unless your surgeon instructs otherwise. It may then be removed by cutting the gauze in the center of the forehead, or you may return to our office for removal. A cotton ball will be in the ear canal, which may also be removed and dispensed.

2. Pain severity after ear surgery varies greatly from patient to patient but is usually at its worst the first few hours after. While still at the hospital, it is common for patients to need IV pain medicines. Over-the-counter oral pain medications (Tylenol or Ibuprofen) are usually all that is needed thereafter. These are usually needed for only a few days.

3. Diet is "as tolerated" after surgery. Clear liquids will be given first, and if tolerated, a light food diet can be started that same day. The day after surgery the child's usual diet can be resumed. Nausea and even vomiting can occur the day of surgery and will be treated with medication as needed. Rarely does a patient need to be prescribed nausea medicine for home use and in such cases, only clear liquids should be given until all nausea has resolved. If the child is unable to take liquids or keep fluids down the day after surgery, report this to your surgeon.

4. The hair may be washed 3 days after surgery. The incision may get wet at this point. Water can go down the ear canal, unless the child has tubes in their ears or your surgeon instructs otherwise.

5. It is very common for you to see blood come out of the nose or to be in the child's snot. This blood is coming down from the ear as a natural clearing process and is of no concern. It may be noticeable for up to 2 weeks after surgery. If your child develops nasal congestion or a cold, it is acceptable to use saline nose spray, a nose suction bulb, and any age-appropriate over-the-counter cold medications.

6. It is normal for the ear to stand out from the head due to swelling. It will return to its normal position within a few weeks after surgery. It is common for the swelling to spread into the temple or around the eye on that side. In small children this swelling is sometimes enough to cause the eye to be swollen shut for 2 or 3 days after surgery. This will resolve on its own.

7. If you were told your child has a spinal fluid connection in their inner ear, this will have required special techniques to seal around the implant electrode. If at any time there is clear, watery fluid visibly dripping out of the nose, incision, or ear canal, report this to your surgeon.

8. Do not allow the child to do aggressive activities, such as playful wrestling, riding a bicycle, sports, etc. for 3 weeks after surgery. It is never good for the child to roll the back of their head around on a hard floor. This can cause friction trauma to the implants.