



- Otolaryngology
- Head & Neck Surgery
- Ear, Nose & Throat
- In-Office Balloon Sinuplasty
- Hearing Aids
- Sinus Specialist
- Pediatrics & Adults
- Sleep Apnea Surgery

INSTRUCTIONS AFTER BILATERAL MYRINGOTOMY AND TUBES

- The physician placed tubes into the eardrum to help minimize repeat infections or fluid in the ear.
- Expect drainage after the procedure. It may be bloody or yellow or not occur at all.
- The patient cannot feel the tubes, and they do not cause pain.
- Tubes may stay in the eardrum for an average of six to 24 months. If a tube comes out early, it may need to be replaced. If a tube stays in longer than four years, we recommend removing it to reduce the risk of a perforated eardrum.
- With tubes in place and open, the fluid cannot recur, and the number of infections is normally reduced. It is not uncommon for the patient to still get one to two infections while the tube is in place.
- If the patient develops a fever while the tubes are in place, they should be examined by a physician. If the tubes are in place and open and there is no drainage from the ear, the infection is likely not from the ear. If the physician prescribes antibiotics, follow the treatment as planned.
- For the first three weeks following the procedure, the patient should not fully submerge their head under water; however, washing their hair during this time is okay.
- A post-op exam is needed at three weeks to ensure the tubes are healed and in place. The physician will clear the patient for full water exposure at this time.

If you have any questions or concerns following the procedure, please call our office at, (248) 844-2936.

