## **Total Ear Canal Ablation**



One of the most useful and efficient ways to convey information to you about your pet is via the written word. We carefully craft these notes to give you helpful information and accurate expectations around your pet's surgical experience.

**Please read this**. Please save it and read it during each stage of the recovery process. Surprises make for a stressful time for everyone.

Photo and video examples may be found on our website: www.directvetsurg.com in the **Pet Owner Portal** under "DVS Resources".

Your pet has had a Total Ear Canal Ablation with Bulla Osteotomy performed to treat severe ear canal disease. This involved removal of the entire ear canal and ear drum, and a thorough cleaning and drainage of the middle ear (the "bulla"). The purpose of this surgery is to make your pet more comfortable by removing the source of chronic infection and pain or canal tumor. The elimination of further ear cleaning duties and the foul-smelling discharge are added benefits. The skin has been closed over the middle ear, so there is no longer any communication between the inside and the outside.

#### General Information

Please keep a note of your questions as you and your pet progress thru recovery and address them to your primary care veterinary team. Our surgery group will contact your primary care team on **Day 2** (after their phone follow-up with you) and **Day 14** (after your recheck visit with them) to check in on your pet's progress and see if you have had any concerns or questions. This method will maintain continuity in care and an accurate patient medical record.

## First few days postop

## Monitoring

Please keep your pet in a <u>comfortable</u>, <u>safe</u>, <u>indoor location without free access to stairs</u> for the next 24 hours as he/she recovers from anesthesia and surgery.

Your pet may be groggy for the next few days. He or she may whine or appear more anxious than usual; this may indicate pain/discomfort or side-effects of the medications. Please call your primary care veterinary team for assistance with medication adjustments or return for exam and additional pain medications as needed.

Monitor appetite and attitude. *If both do not steadily improve over the next 2-3 days,* please call your primary care veterinary team or return for progress evaluation and problem-solving.

You can expect your pet to have a bowel movement within 5 days. Some animals take longer than others depending on when they last ate prior to surgery and when they started eating after surgery. It may be abnormal in color and consistency for 2-3 days. If you have any concerns, please speak with your primary care veterinary team.

Please confirm that your pet has urinated within 24 hours of returning home. If he/she does not, or you notice any problems related to urination, please speak with your primary care veterinary team.

Closely supervise your pet's movements over the first 3-4 days when s/he will be groggy from anesthetics and pain medications. Limit activities to necessary events only (on leash/out to go to the bathroom; access to food/water.) Do not allow free access to stairs or places from which they can fall.

### **MEDICATIONS**

It is likely that you have been prescribed one or more medications (given by mouth) for your pet over the first 2-3wks of recovery. During the discharge appointment or shortly thereafter, please make sure you understand:

- what each medication is being used to treat,
- what side-effects may develop, and
- whether or not the medication should be refilled and continued.

Monitor eyelids for good "blink" function; the nerve that allows normal blinking was in the operative field and may have reduced function after surgery (short or long-term). If there was not good blink function at the time of hospital discharge, you will receive eye lubricating ointment. Use this 3-4x daily until blink function returns. Please call your primary care veterinary team if you notice reduced or absent blinking on the operated side beyond 3wks; they will prescribe lubricating ointments and recommend a monitoring schedule.

## BANDAGE CARE (IF PRESENT)

If a bandage has been applied to the head, please monitor for signs of slippage. If the bandage slips dramatically, please return to your veterinarian for adjustment or removal.

Alternatively, there may be a tube-like "hood" on your pet's head. Your pet will be more comfortable if the ear flap does not move around freely. An uncomfortable hear flap usually causes pets to shake their head, which hurts and causes further head shaking, etc. Keeping the "hood" on may prevent this discomfort until the skin sutures have been removed in 10-14 days. Continue to check the incision site under the ear flap twice daily. (Head "hood": cloth tube over head, ears and neck; depending on the size of your pet, a tube sock with toe cut off or a long-sleeve T-shirt sleeve may work well too.)

If a drain tube collection system has been installed, the collection tube will need to be changed 2-3 times daily as directed.

- --Remove the glass tube from the end of the needle; discard.
- --Attach new/empty tube by sliding the needle into the red rubber stopper.
- --Secure the tube to the bandage on side of the head.

# Week 1-2 postop

#### MONITORING

Please look at the incision twice daily. It should be dry, slightly red along the margins, slightly swollen/thick on the edges with a light crust down the center. Over several days, it should lose redness and swelling.

Problems to call your veterinarian about:

- --gapping (the edges should be exactly touching)
- --ongoing or new discharge (other than small amount of crusting up to day 2)
- --swelling (other than slightly raised skin near edges).

Some bruising is normal and will resolve in 5-7 days.

## Test Pending

With some patients, we submit a culture sample from the middle ear to determine what antibiotic is most appropriate for the infection. The antibiotic that your pet comes home

with may need to be changed once culture results are returned (3-5 days). Antibiotic therapy is usually continued for several weeks following surgery; longer therapy may be necessary in particularly severe cases.

If there were any other samples removed for testing, they will be submitted and results usually will be available in 5-7 days. Your primary care veterinary team will contact you with test results and make any treatment changes as needed.

## Progress exams

If a drain or bandage are present, please return for removal with your primary care veterinarian in 4-5 days.

Please return to your primary care clinic in 10-14 days for a progress exam. Skin healing will be evaluated, sutures will be removed, and any questions you have will be addressed.

### RESTRICTIONS

Avoid any <u>rigorous activity</u> for 2 weeks. For dogs, short, leashed walks to urinate/defecate are fine.

Minimal, supervised/assisted access to stairs is advised during restricted period. Use baby gates, etc. to prevent free access to stairs during this restricted period. When navigating stairs (up and down), have a hand/leash on collar/harness and a leash/safety-strap under the belly to prevent slips, stumbles, falls.

Please use a short (~6ft), hand-held leash when outside to urinate/defecate. Confine your pet to a small area/room/crate when unattended.

If your pet's personality-type challenges these restrictions, discuss options for medicinal-assistance for your pet to make restrictions easier to manage (i.e. Trazadone, Gabapentin, Tramadol, other).

# Longterm Lifestyle

If this procedure was performed to treat chronic ear infection, continued treatment of any underlying skin disorders is important to maintain your pet's longterm health and wellbeing. <u>High-dose (medicinal dose) fish oil</u> may improve skin inflammation and thus ear

inflammation in allergic animals. You and your veterinarian should discuss whether or not this supplement would be helpful for your pet.

Dogs with total ear canal ablations will not hear well from that ear. Even with both ears treated with this surgery though, dogs can pick up vibrations and sharp noises (through bone conduction) to assist them with navigating their environment.

The diseased tissues lining the middle ear have been removed to the extent that was thought safe during this procedure. The middle ear has openings into the inner ear that can be damaged (short or long term) during this process. Signs of inner ear disturbance include a head tilt, eyeball twitching (i.e. nystagmus), and unsteadiness (i.e. vertigo). Typically, patients will adjust over the first 1-2 weeks such that the nystagmus and vertigo go away; it is possible for some degree of head tilt to remain long term.

The ear canal and majority of middle ear tissues mentioned above were removed because they were diseased and no longer performing their appropriate function. It is possible that remnants of this diseased tissue still remain following this procedure and can cause problems under the surgical site (swelling, jaw pain, draining tract). If medical treatment does not permanently resolve these recurrent problems, in rare cases, a second surgical procedure is needed to remove additional diseased tissues.

Total ear canal ablation with bulla osteotomy is an effective method for treating end-stage ear disease. Significant post-operative complications can occur, with the frequency and severity of these complications directly related to the severity of disease at the time of surgery. Fortunately, most complications are transient and not life-threatening. Long term results are generally excellent, with owners satisfied with the significant improvement in their dog's comfort, demeanor and quality of life.

## **Checklist:**

Home monitoring and progress check-in with veterinary team.

■ <u>Pet attitude and appetite</u>—Are these improving daily? What are your observations? What are your specific concerns?

	<u>Pet mobility</u> —Is this improving daily? What are your observations? What are your specific
	concerns?
	Incidian health is reduced and swelling gaing away? Is there discharge or registure?
ш	<u>Incision health</u> —Is redness and swelling going away? Is there discharge or moisture? (Photos taken close-up and at different angles are helpful for your primary care veterinary
	team,)
	Pet pain level—What are your observations? What are your specific concerns?
	<u>Other</u>

Based on your own experience through this, we welcome and encourage suggestions to this information that may help future patients and their people. Pay it forward! (directvetsurg@gmail.com)

--The DVS Crew