

Ear canal & middle ear deep cleaning/rinsing



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 been placed under general anesthesia to allow for deep cleaning and rinsing of the ear canal and middle ear. Diseased tissues (commonly, ear polyp) have been removed as thoroughly as possible through this limited approach. A culture of the infection may have been collected, and diseased tissues saved for biopsy analysis.

Because drainage of this area is limited, it is often recommended to have this deep cleaning/rinsing performed 2-4 times over the next few weeks. More cleaning improves the chance for beating the infection and allowing the ear drum to re-form.

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. ****Use your checklist at the end of these notes to make these check-ins complete.****

First few days postop

MONITORING

Please keep your pet in a comfortable, safe, indoor location without free access to stairs 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. Do not allow access to dangerous situations/locations (i.e. stairs, furniture, small children, other pets). Limit activities to necessary events only (on leash/out to go to the bathroom; access to food/water.)

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.

Week 1-2 postop

TEST PENDING

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

PROGRESS EXAMS

Please return to your primary care clinic as directed for the next anesthesia and cleaning procedure. This will typically be weekly for 2-4 weeks.

RESTRICTIONS

Restrict your pet from any rigorous activity for 4 weeks because they may be dizzy and unsteady on their feet from middle ear disruption. No running, jumping, playing. For dogs, short, leashed walks around the yard to urinate/defecate are fine. Walking around one level of the house is fine. Prevent all pets from jumping up and down from furniture, etc. A bad landing or an awkward take-off can result in serious repercussions.

Limited, supervised access to stairs is recommended for 4 weeks. Restrict access to stairs when your pet is unattended (baby gates, etc.) Use caution and direct supervision on stairs (up and down) with a hand on the collar and a safety strap/leash under the belly to prevent falls.

Please **always** use a short (6 ft) leash when taking your pet outside to urinate/defecate during this restriction period. Use a belly band/sling/strap for safety when walking across slippery floors & icy sidewalks to prevent falling

Long-term lifestyle

Patients who have had the ear canal and middle ear cleaned/rinsed under anesthesia may not hear well with that ear for several months or permanently. The ear drum was ruptured by the infection and abnormal tissue (“polyp”) and may or may not re-form. Even with both ears treated this way and/or experiencing a ruptured eardrum, animals can pick up vibrations and sharp noises (through “bone conduction” hearing) 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 (called nystagmus), and unsteadiness (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 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 to recur. If medical treatment does not permanently resolve this problem, in rare cases, a surgical procedure is needed to remove remaining diseased tissues.

Checklist:

HOME MONITORING AND PROGRESS CHECK-IN WITH VETERINARY TEAM

- Pet attitude and appetite—Are these improving daily? What are your observations? What are your specific concerns?
- Pet mobility—Is this improving daily? What are your observations? What are your specific concerns?
- Incision health—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?
- Other

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