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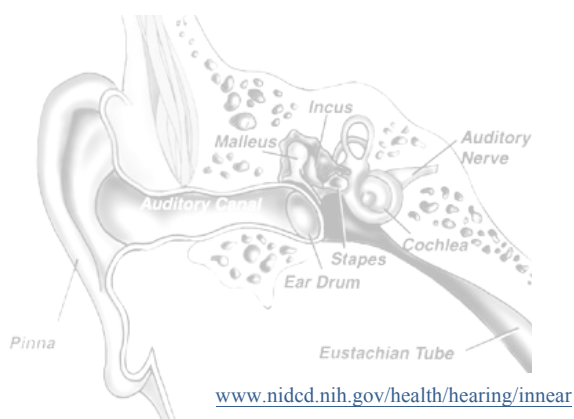
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Ventilating Ear Tubes

Tympanostomy tubes are tiny tubes that are placed in the eardrum. Also called “ear tubes”, they are usually placed for these reasons:

- If your child has repeated ear infections that do not get better with antibiotics.
- If your child has fluid in his or her middle ear space for 3 months or more.

The middle ear space is normally filled with air. If the middle ear is filled with fluid instead of air, hearing is muffled or garbled. This is what happens with ear infections. By draining fluid, tympanostomy tubes allow the middle ear to fill with air again and ventilate properly.



The main concern about fluid in the ear is that it makes sound garbled. This can interfere with your child’s speech development because children imitate the sounds they hear. Hearing usually improves soon after the tubes are placed. Your doctor or an audiologist should check to make sure that your child’s hearing is normal.

How are tubes placed in your child’s ears ?

Tubes are placed during surgery. Most children will go home the same day of the surgery. Your child is briefly put to sleep during the procedure. When you schedule the surgery, we will tell you that your child cannot eat or drink (including water) for a certain number of hours before the surgery. It is very important to have an empty stomach so that he or she doesn’t vomit and inhale it in while asleep.

After your child is asleep, your doctor makes a tiny surgical opening in your child’s eardrum under a microscope. Any fluid present in the middle ear is then suctioned out. Next, the tube is put in the small opening in the eardrum. Most tubes look like a small spool, generally the size of the tip of a pen. It is normal for your child to be tired or irritable for a few hours after surgery. There may be persistent watery ear drainage, sometimes blood-tinged, for the next 48 hours. This is normal.

When your child is ready to eat, offer clear liquids such as juice, broth, or popsicles, and if tolerated offer a light diet such as toast, crackers, or applesauce. When your child eats these foods without problems, he or she can resume a normal diet.

Activity Restrictions

Most children resume their normal routine shortly after surgery. Watch for unsteadiness during the first 24 hours after surgery. If your child does seem unsteady or dizzy, encourage quiet activities such as reading, watching TV or coloring. Traveling by airplane or to the mountains (elevation changes) will not hurt your child’s ears.

Old Farm Professional Plaza
4000 South 700 East #10
Salt Lake City, UT 84107

TOSH Medical Towers
5770 South 250 East #285
Salt Lake City, UT 84107

Lone Peak Medical Campus
74 East 11800 South #360
Draper, UT 84020

Tooele Clinic
1929 North Aaron Drive #1
Tooele, UT 84074

More Ear Infections?

Although the risk is lowered, ear infections can still happen, usually occurring with a cold. Infections may start with drainage, but generally have little (or no) pain or fever. The drainage is usually thick and sticky with noticeable odor. Call your doctor if this happens. Most infections can be successfully treated with ear drops alone.

Water Precautions After Surgery

After tubes are placed, some children may get ear infections from water entering the ear canal and getting through the tube. This seems to happen more often with older children. To protect the ears from water take a piece of cotton, place it snugly in the outer ear, then cover it with Vaseline to make it waterproof. Some studies have shown that water precautions are not needed for babies. Your doctor may suggest:

- **Sometimes** protect the ears from water. Use the cotton plugs if your child tends to submerge his or her head and ears while bathing or swimming.
- **Always** protect ears from water while bathing or hair washing. Follow the instructions above for using cotton plugs. Custom ear plugs are also available.

Some children are more susceptible to ear infections with even little water exposure and should always

use water precautions. If incidental water enters your child's ear, use drops given to you after surgery and place 5 drops in that ear daily.

Follow Up

Please schedule a follow up visit for 2-3 weeks after surgery. Further follow up visits are needed for every four to six months thereafter. Your child's ears need to be examined regularly to check the status of the tube and health of the middle ear.

The tube will work its way out of the eardrum and into the ear canal on its own. This usually happens 6-12 months after surgery. In most children the remaining hole in the ear drum will slowly close. Less than 20% of all children with tympanostomy tubes need a second set of tubes.

Call Your Doctor If ...

- An ear infection develops after surgery and can not be successfully treated by your family doctor or pediatrician.
- If you have any other questions.

For more information visit:
www.entnet.org/kidsENT