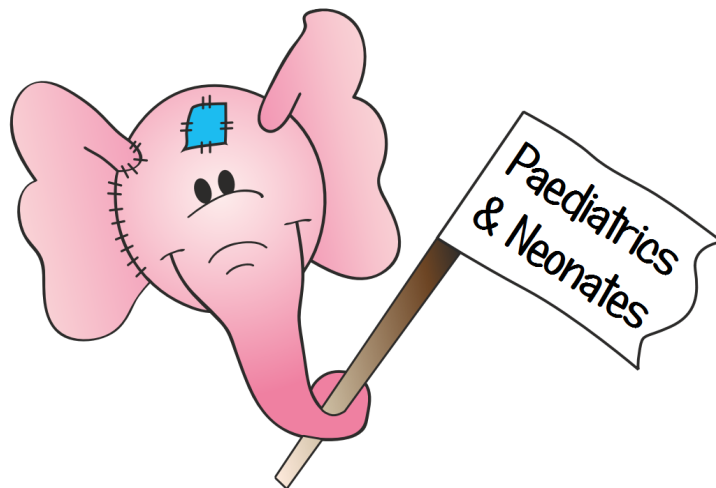


Operation to reshape ears

Children's Ward

Parent/Carer Information Leaflet



Introduction

Your child's consultant has suggested that your child could have an operation to reshape their ears. This leaflet explains more about the operation, the benefits and risks, and what to expect when your child comes to hospital. The medical name of the operation is a pinnaplasty.

If you have any questions or concerns, please contact a member of the Children's Ward.

Why should my child have this operation?

Having protruding ears does not usually affect a person's hearing but it can sometimes cause embarrassment and emotional distress. If the ears stick out (protrude), they can be particularly noticeable in children and may lead to teasing or bullying.

Protruding ears can develop if there is too much cartilage, or if the ridge of cartilage at the top of the ear does not fold properly as it develops. They can also be the result of an injury to the ears.

The operation involves re-modelling the cartilage in the ear to set the ear(s) closer to the head. This gives a less prominent shape and position to your child's ears. It is carried out using a general anaesthetic, which means your child will be asleep.

What are the benefits of the operation?

The benefits are:

- Your child should have less prominent ears.
- The shape of their ears will be better.

What are the risks?

As with all surgery, there are a few risks:

- Bruising and bleeding – if there is any bleeding through the bandages, or your child is in severe pain, please contact the Children's Ward on 01384 244271 immediately.
- Wound problems – your child's wounds will be monitored after the operation but if you have any concerns, ring the Children's Ward for advice.
- Unsatisfactory results – in a small number of patients the ears may spring back slightly. This may require further surgery.
- Scarring – the operation will result in your child having a scar, about three centimetres long, behind the ear(s).
- It is not always possible to achieve perfect symmetry and there may be a slight difference in the shape of the ears.

- There is a risk that a small ulcer could develop on the ear(s). This could take a few weeks to heal.
- There are some rare risks of general anaesthetics which you can discuss with your child's anaesthetist in more detail before the operation. After the anaesthetic, some people feel sick or are sick. Your child may have a headache, sore throat or feel dizzy or lightheaded but these effects should only be temporary.

You can discuss the risks with your child's doctor.

What is the alternative?

The operation is for cosmetic or psychological concerns. The alternative is for your child not to have this operation.

What happens before the operation?

We will give you instructions about when your child needs to stop eating and drinking before the operation, with your appointment letter.

What happens when we come for the operation?

You will have an appointment for the morning or the afternoon.

When you arrive at the Children's Ward, a nurse will ask you some questions and assess your child's:

- blood pressure
- heart rate
- breathing rate

If you have any questions or worries, please ask the nurse who is looking after your child. They are always happy to answer your questions.

The nurse will put a wristband on each of your child's wrists and put a numbing cream on the back of their hands. This is used so that when the anaesthetist puts a cannula into their hand to give the anaesthetic, they will not feel this being put in. A cannula is a thin, plastic tube.

The surgeon will come and see you to explain the operation. If you want your child to have the operation, the nurse will ask you to sign a consent form, if you have not already signed one at a previous appointment.

The anaesthetist will come and see your child to check that they are well enough to have the operation.

The nurse will be able to give you a rough idea of the time your child will have the operation. We try to minimise delays as much as possible but sometimes these occur.

When it is time for your child's operation, one parent can go with them to the anaesthetic room and stay until they are asleep. The operation will last between one to two hours.

What happens after the operation?

On waking, a nurse will bring your child back to you on the ward, when the recovery team are happy with them.

During the recovery period on the ward, the nursing team will assess your child and offer them something to eat and drink, when it is safe to do so.

Your child may still have a cannula in when they come back to the ward. We recommend that this is kept in until your child goes home. This can be used to give your child medicine if they need it. For example, some people feel sick or are sick after having a general anaesthetic. If your child feels sick, please tell the nurse and we can give them some anti-sickness medicine.

Your child may have a pressure bandage around their head after the operation. This is to reduce the risk of bleeding and to keep the ears in their new position. This will need to be kept on for up to 7 to 10 days.

Will my child be in pain?

It is usual for your child to be uncomfortable for a few days after this operation. We will give them pain relief while they are having their operation and they can have regular pain relief when they are back on the ward.

We recommend that you give them a simple painkiller such as paracetamol if your child is able to tolerate it (always read the label; do not exceed the recommended dose). Brand names of this include Calpol, Disprol and Medinol. Please ask for advice from your pharmacist if you need it.

When can my child go home?

Your child may need to stay in hospital for at least six to eight hours after the operation, or one night depending on the consultant's advice. One parent is welcome to stay overnight with their child.

Before they can go home, your child will need to have:

- Eaten an adequate amount of food and drink
- Had no bleeding
- Passed urine
- Stopped being sick
- A normal temperature
- The doctor's approval to go home

We recommend that your child does not travel home on public transport due to the risk of infection.

How do I care for my child after their operation?

- If your child has a pressure bandage around their head, they will need to wear this for up to 7 to 10 days. If the bandage moves or comes off, it is important that it is replaced as soon as possible. Please contact the Children's Ward on 01384 244271 and they will be happy to help.
- When the pressure bandage is removed, a normal bandage must be worn at night for a further week. A wide sport headband is a suitable alternative. It is a good idea to buy this before the operation so that you have it ready.
- There will be a row of stitches behind the ear(s). These may be dissolvable or may need to be taken out. If the stitches need to be removed, we will give you a letter to take to your GP surgery. The nurse at the surgery can take them out about seven days after the operation. Your nurse will advise you about this.
- Your child will be able to wash their hair when the pressure bandage has been removed and if the wound has healed well. We recommend using a mild shampoo to avoid discomfort.

When can my child go back to school?

Your child should be fit to go back to school two days after the operation. However, if they have a pressure bandage, they may want to wait a week until it is removed.

What about other activities?

Your child must not take part in boisterous activities or contact sports for six weeks, to prevent damage to the operation site.

They should not go swimming for at least two weeks after the operation, unless advised otherwise by nursing staff or your child's doctor.

What should I look out for?

If your child shows signs of the following during the next few weeks, always seek advice from the Children's Ward, your GP or the Emergency Department:

- High temperature
- A lot of pain
- Being sick

Even if the wound looks fine, this could mean that your child has an infection.

Follow up

If your child needs to see their consultant again, we will give you an outpatient appointment before you leave hospital or send you one through the post.

Can I find out more?

You can find out more from the following weblink:

NHS Choices

<http://www.nhs.uk/Conditions/Ear-reshaping/Pages/Introduction.aspx>

If you have any questions or if there is anything you do not understand about this leaflet, please contact:

Children's Ward on 01384 244271

Russells Hall Hospital switchboard number: 01384 456111

This leaflet can be downloaded or printed from:

<http://dudleygroup.nhs.uk/services-and-wards/c2-childrens-ward/>

If you have any feedback on this patient information leaflet, please email patient.information@dgh.nhs.uk

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

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此宣传单可提供大字版本、音频版本和其它语言版本，请拨打电话：0800 073 0510。

Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

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Aceasta broșura poate fi pusă la dispoziție tipărită cu caractere mari, versiune audio sau în alte limbi, pentru acest lucru vă rugăm să sunați la 0800 073 0510.

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