



**BRUCE R. MADDERN, M.D., P.A.**

*Pediatric Otolaryngology  
Head & Neck Surgery*

Name: \_\_\_\_\_

Date: \_\_\_\_\_

DOB: \_\_\_\_\_

### **EAR TUBES AND ADENOIDECTOMY**

We have discussed Eustachian Tube Dysfunction (ETD) and the role that the adenoids may play in ear infections and ET problems. The removal of the adenoids may be beneficial in the treatment of ear infections and may be helpful for nasal symptoms as well. We have discussed the options of continued medical therapy vs. surgical intervention with the placement of ventilating tube and adenoidectomy. We have discussed that this is not a cure for the underlying ET problem and won't resolve all nasal symptoms but is a treatment alternative. This is a problem that most children generally outgrow but some children may have continued problems despite medical and surgical intervention requiring additional therapy. Ventilating tubes are temporary and usually fall out after 6 to 18 months.

We have discussed the potential benefit of the surgery as well as the treatment alternatives of medical therapy. We have discussed the risks of the surgery including but not limited to the anesthetic, bleeding, dental and mucosal trauma, voice change, and the possible need for additional treatment or surgery. We have discussed peri-operative diet and activity restrictions, fever, halitosis, pain and the importance of maintaining adequate oral intake.

We have discussed the need for water precautions, the possibility of otorrhea, ear infections, the possibility of a tympanic membrane perforation, cholesteatoma formation, and the possible need for additional treatment or surgery. We have stressed that this is not a cure for ear infections or nasal symptoms but that it may diminish the incidence of otitis media and improve nasal symptoms. Questions have all been answered.

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Parent/Guardian

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10475 Centurion Parkway N., Suite 302 • Jacksonville, FL 32256  
(904) 398-KIDS (5437) • (904) 398-3077 (FAX) • [www.entforkids.com](http://www.entforkids.com)