

Gelfoam and Paper Patch Myringoplasty

Procedure Information and Consent

This document explains the planned procedure for patients and parents/guardians.

Patient Name: _____ **PHN:** _____ **Date of Birth:** _____

1. Recommended procedure

Gelfoam and Paper Patch Myringoplasty

Myringoplasty is a minor procedure to help close a perforation (hole) in the eardrum.

2. Why this procedure is recommended

This procedure may help treat:

- A small, persistent tympanic membrane perforation (a hole in the eardrum that has not healed)
- Recurrent ear infections related to the perforation (hole in the eardrum)
- Mild conductive hearing loss (hearing loss caused by sound not passing normally through the eardrum)
- An eardrum that does not heal on its own

The goal is to promote healing of the eardrum.

3. What the procedure involves

- Usually performed in clinic or day surgery
 - The procedure may use local anesthesia (numbing medicine), sedation (medicine to relax you or make you sleepy), or general anesthesia (medicine to keep you asleep). The plan depends on the patient.
 - The edges of the perforation are gently treated to help healing
 - A paper patch is placed over the perforation (hole)
 - Gelfoam, a soft sponge that is absorbed by the body over time, is used to support healing
 - No external incision (cut outside the ear) or graft harvesting (taking tissue from another area) is needed
 - Patients usually go home the same day
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4. Expected benefits and limitations

Potential benefits:

- Closure of the perforation (closing the hole)
- Fewer infections
- Better protection of the middle ear from water
- Possible hearing improvement

Important:

Closure is not guaranteed. Hearing may stay the same. Some patients need repeat patching or formal eardrum repair surgery.

5. Risks and side effects

Common or expected:

- Mild discomfort
- Temporary muffled hearing
- Minor bleeding
- Patch displacement (the patch moves out of place)

Less common but important:

- Failure of closure (the hole does not close)
 - Recurrent perforation (the hole opens again)
 - Infection
 - Dizziness
 - Worsening hearing
 - Need for further treatment or surgery
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6. Alternatives

- Observation (waiting to see if the hole heals)
 - Hearing aid amplification. A hearing aid may improve hearing but does not close the perforation.
 - Formal myringoplasty or tympanoplasty (a larger operation using a tissue graft to repair the eardrum)
 - No treatment
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7. Recovery expectations

- Keep the ear dry until your surgeon says it is safe. Do not swim. Follow the clinic's instructions for keeping water out during bathing or hair washing.
- Avoid forceful nose blowing
- Do not pull out the paper patch or Gelfoam packing. Your surgeon will tell you if anything needs to be removed.
- Temporary muffled hearing may occur
- Follow-up is needed to assess healing. Contact the clinic if you have not received an appointment.

Seek medical care for:

- Increasing pain
 - Fever
 - Persistent or worsening ear drainage (fluid leaking from the ear)
 - Sudden hearing loss
 - Significant dizziness (severe dizziness)
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8. My understanding

I confirm that the procedure, risks, possible benefits, alternatives, and recovery expectations have been explained to me. My questions have been answered. I understand this document supports, but does not replace, the consent discussion or hospital consent form.

Patient / Parent / Guardian Name: _____

Signature: _____

Date: _____