About Your Surgery

Please review this information very carefully. Please contact our office immediately should you have any questions.

Surgery Date: ________________ Time: ________________ Arrival time: ________________

Facility:

Sea Surgery Center, LLC
770 Pacific Coast Hwy
Seal Beach CA 90740
PH: 562-270-4327

Newport Plaza Surgical Center
1901 Newport Blvd., Suite 120
Costa Mesa CA 92627
PH: 949-515-1040

MemorialCare Surgical Center
1640 Newport Blvd., suite 100
Costa Mesa, CA 92627
PH: 949-478-8000

Hoag Hospital
1 Hoag Drive
Newport Beach, CA 92663
PH: 949-764-4624

Choc children's Hospital
1201 W Laveta Ave
Orange, CA 92868
PH: 888-770-2462

Pre-Operative Appointment Date: ________________ Time: ________________

This appointment is scheduled in our office. Please bring a list of medications you currently take and be prepared to leave it with your physician.

_____446 Old Newport Blvd., #100 Newport Beach 92663

_____ 770 Pacific Coast Highway, Seal Beach 90740

Unless otherwise indicated, follow-up with Dr. Shohet or Dr. Doherty 3 weeks after surgery

Initial Postop Appointment Date: ________________ Time: ________________

_____446 Old Newport Blvd., #100 Newport Beach 92663

_____ 770 Pacific Coast Highway, Seal Beach 90740

Specializing in:
• Adult and Pediatric
• Surgery of the Ear
• Skull Base Surgery
• Hearing Loss
• Vertigo
• Facial Nerve Disorders
• Hearing Aids
• Cochlear Implants
• Implantable Hearing Devices
• Diagnostic Audiological Services
• Tinnitus
• Tinnitus Therapy
Medications to Avoid Prior to Surgery

The following drugs contain aspirin and/or aspirin like effects that may affect your surgery by causing abnormal bleeding and bruising. **The following drugs should be avoided for at least 10 days prior to surgery or as directed by the physician who prescribed them:**

Advil products
Aleve products
Alka-Seltzer products
Alor
Amigesic
Anacin
Arthrapan
Ascomp with Codeine
Ascriptin
Aspergum
Aspirin
Asprimox
Bayer products
Bufferin
Carisoprodol Compound
Celecoxib (Celebrex)
Cilastozol (Pletal)
Clopidogrel (Plavix)
Darvon Compound 65
Diclofenac (Voltaren, Cataflam)
Diflunisal
Dipyriramole (Persantine)
Dipyriramole/Aspirin (Aggrenox)
Doans
Dolobid
Dristan Sinus
Ecotrin
Empirin
Empirin with Codeine
Etodolac (Lodine)
Excedrin products
Fenoprofen (Nalfon)
Fiormal
Flurbiprofen (Ansaid)
Halprin
Haltran
Ibuprofen (Motrin, Advil)
Indomethacin (Indocin)
Ketoprofen (Orudis, Orovail)
Ketorolac (Toradol)
Lobac
Lortab ASA
Magan
Magsal
Meclomenate (Meclomen)
Mefenamic acid (Ponstel)
Menadol
Midol
Mobidin
Mobigesic
Motrin
Nabumetone (Relafen)
Naproxen (Naprosyn, Anaprox, Aleve)
Norgesic
Novasal
Orphengesic
Oxaprozin (Daypro)
Panasol
Pepto-Bismol
Percodan products
Piroxicam (Feldene)
Roxiprin
Saeto
Salflex
Salysalate products
Salsitab
Soma products
Sulindac (Clinoril)
Synalgos-DC
Tailwin Compound
Ticlopidine (Ticlid)
Tolmetin (Tolectin)
Trilisate
Trisalicylate products
Valdecoxib (Bextra)
Vanquish
Warfarin (Coumadin)
Zorprin

Additionally, some vitamins and herbal supplements can cause abnormal bleeding problems and can affect your cardiovascular system. Below is a list of some herbal supplements/vitamins that may affect surgical outcome and safety. The following vitamins/herbal supplements should be avoided for at least two weeks prior to surgery:

- Dong Quai
- Gingko Biloba
- St. John’s Wort (all types)
- Echinacea
- Ginseng
- Valerian Ephedra
- Glucosamine
- Vitamin C (more than 2000mg daily)
- Feverfew
- Goldenseal
- Vitamin E (more than 400mg daily)
- Fish Oils (Omega-3 Fatty acids)
- Kava Garlic
- Licorice

There are medications not listed above so we encourage you to let your surgeon or nurse know if you have any questions about your medications. Failure to stop certain medications may result in cancellation of surgery.

Lastly, Nicotine reduces the blood flow to the skin and may impair healing. Quitting smoking drastically improves the body’s response to surgery. Please avoid cigarettes, nicotine gum, cigars and patches prior to surgery.
Pre-Op:

Testing to be done prior to surgery:

If you are under the age of 45 and have no cardiac history, no elevated BP or diabetes, you will simply need a CBC (complete blood count) test, within 3 months audiogram, and an up-to-date tetanus shot.

If you are the age of 45 and older with no medical issues you will need a CBC, EKG, within 3 months audiogram and an up-to-date tetanus shot.

If you have any Cardiac issues you will need CBC, EKG and Cardiology clearance. If you have high blood pressure or diabetes you will need surgery clearance from your primary care physician.

Please see attached list of medications to avoid if having surgery. If you take any blood thinners, you should discontinue them 10 days prior to surgery.

**If you were prescribed any blood thinner medication, you will need clearance from your prescribed provider prior to discontinuation of medication. Inform your provider that you will need to be off this medication 10 days prior to surgery**

NOTHING TO EAT OR DRINK AFTER MIDNIGHT ON THE NIGHT PRIOR TO SURGERY (NOT EVEN A SIP OF WATER)

Leave all valuables at home

Bring ID, Insurance card and surgery packet

Arrive at least 1 hour prior to your scheduled surgery start time

Unless you are having surgery with straight local anesthesia, you will need a ride home from surgery. Your ride home must be someone you know who can offer care if need-be. **Taxi cabs and/or Uber services are unacceptable**

Acceptable transportation and postoperative nursing can be arranged ahead of time (at the expense of the patient) through Vitale Nursing: http://vitalenursing.com

Undigested food or drink in the stomach on day of surgery could cause serious injury with anesthesia and will require re-scheduling of surgery
Post-Op Precaution (General Ear Surgery—some may not apply based on the procedure)

Instructions following surgery:

1. If you have a bubble on your ear, you may remove it the day after surgery.
2. If you have only a cotton ball, change the cotton ball 2-3 times a day until there is no longer any drainage.
3. Clean the incision behind the ear with hydrogen peroxide and apply Polysporin ointment to it twice a day for 5 days. Keep the incision dry for the first five days and afterward you may get it wet.
4. No heavy lifting or straining until Dr. Shohet or Dr. Doherty indicates that it is ok. This will usually be about 3 weeks following surgery.
5. **DO NOT LET WATER GET INTO THE EAR CANAL.** Before stepping into the shower, coat a cotton ball with Vaseline and put it into your ear. Remove it after the shower. Dry ear precautions until instructed otherwise by your physician.
6. **DO NOT BLOW YOUR NOSE** for at least 4 weeks after surgery.
7. There may be some bleeding from the ear canal or the incision for several days after surgery. This is normal.
8. You may feel plugged or experience diminished hearing after surgery. This is normal and is usually due to surgical packing or debris (such as scabbing or dried blood) that will be cleaned out by your doctor at your post-operative visits.
9. **Unless otherwise indicated, follow-up with Dr. Shohet or Dr. Doherty 3 weeks after surgery.**
General Surgical Questions

Q: How far out do you book surgeries?
A: It depends on the time of year and how busy we are, but we can usually schedule within 2-3 weeks’ time.

Q: How soon after surgery can I return to work?
A: If there was an incision made behind your ear: You may wish to take 3 days-1 week off of work after surgery. You may return to work as soon as you feel comfortable as long as you are abiding by the postoperative precautions.

If there is no incision behind your ear and surgery was done completely through the ear canal: You may return to work as early as one day after surgery if you do not have any other surgical complications.

Q: Where do your doctors operate?
A: Dr. Shohet is on staff at Hoag Hospital, Newport Plaza Surgical Center, Pacific Surgery Center, Sea Surgery Center and the VA Hospital in Long Beach.

Dr. Doherty is on staff at Hoag Hospital, Newport Plaza Surgical Center, Pacific Surgery Center, Sea Surgery Center and Long Beach Memorial Hospital.

Q: Do I need any testing done prior to my surgical procedure?
A: Yes. If you are under the age of 45 and have no significant cardiac history, you will simply need a CBC (complete blood count) blood test and an up to date audiogram.

If you are over the age of 45 or have had a history of cardiac issues, you will need a CBC blood test as well as an EKG with cardiac clearance and an up to date audiogram.

**Cochlear implant patients will also need the Prevnar vaccine prior to surgery and must have plans to get the Pneumovax vaccine 8 weeks after surgery.**
Exostosis

Q: Can I have both ears operated on at the same time?
A: No. Due to healing time and insurance restrictions, we only operate on one ear at a time. The second ear can be done 90 days later.

Q: How long before I can go back in the water to surf/swim/etc.?
A: Between 3-8 weeks. The physician will check how well you’re healing at your 3 week post op appointment and clear you for water exposure if possible.

Q: How long does the exostosis surgery take?
A: You will be under general anesthesia for about 2 hours. You will be at the surgery center/hospital for approximately 4-5 hours total.
Q: Do you use a drill during the surgery?
A: Not typically, however, in severe cases it may be necessary.

Q: How soon before I can return to work after this type of surgery?
A: Generally, exostosis surgery is performed entirely through the ear canal and recovery is very quick. Most patients choose to return to work the following day. For those with jobs that are extremely strenuous or labor intensive, 3 days off is usually sufficient after this type of procedure.
Esteem

Q: I am interested in getting an Esteem implant. What is the process?

A: Local patients: Our Esteem coordinator will help make you an appointment for a comprehensive audiogram followed by a visit with Dr. Shohet (this can be done on the same day). If you decide to move forward after this, we will order a CT scan and schedule you for “Baseline Testing”. Baseline testing takes about 2 hours, is done by our audiologists and can be done in both of our office locations. We ask that you bring your hearing aids to this testing appointment.

Once baseline testing and the CT scan are complete, you will meet with Dr. Shohet one more time to review these results and he will perform his pre-operative exam. He will ask that you get a blood test and (depending on your age and medical history) an EKG with medical clearance.

At this point, we will schedule your surgery.

Traveling patients: The first step will be to get a comprehensive audiogram and a CT scan near where you live. Contact our Esteem Coordinator and he/she can send you an order for the exact type of CT scan you will need. Get these tests done and send the audiogram and a CD of the CT images to the Esteem Coordinator. Dr. Shohet will review your audiogram and CT scan and give you a call to discuss your candidacy. Before surgery, you will need a blood test, EKG and medical clearance (you may do this with your general physician at home and send us the results). You may then speak with the Esteem Coordinator to schedule a time to travel to our office for “Baseline Testing”—this is the last set of tests to determine whether or not you are a candidate for the device. If you are a candidate and wish to proceed, we can do surgery at this point.

Q: Do I need to bring anything with me to my baseline testing appointment?

A: Yes...you need to bring any hearing aids you may have (even if you no longer wear them). Our audiologists do aided and un-aided testing to determine whether or not you are a good candidate for this implant. Please bring your hearing aids to this appointment.

Q: Will I be able to hear better immediately after surgery?

A: No. You will not hear anything out of the implanted ear until you are activated by an Esteem-trained audiologist. Activation occurs about 8 weeks after surgery.

Q: How long does the implant surgery last?

A: The initial implantation of an Esteem implant takes about 3.5-4 hours and is done under general anesthesia at Sea Surgery Center.
Q: How soon before I can fly home after surgery?
A: You may fly right after this procedure although some patients choose to stay in town for a day or two after surgery to make sure they are healing well.

Q: May I swim with the Esteem implant?
A: Yes!

Q: How long does the Esteem’s battery usually last?
A: The battery usually lasts anywhere from 4-7 years depending on usage.

Extremely loud environments and leaving the device on overnight may cause your battery to drain faster.

Q: What do the two lights on the bottom of my personal programmer (“remote”) mean?
A: The light on the bottom left means that the battery in your personal programmer (“remote”) needs to be replaced. You can do this on your own at home.

The light on the bottom right means that you should call and begin scheduling a battery change surgery.

Q: Once I see the battery light go on, how long do I have before my battery dies completely?
A: This depends on usage and is extremely hard to predict. Your best option is to call and schedule a battery replacement surgery once your light goes on.

Q: What should I bring to my battery change surgery?
A: Your personal programmer is essential. Having this with you will allow our engineers and audiologists to load your settings into your new battery/processor.

Q: How long does the battery change surgery last and where is it performed?
A: Esteem battery changes are done as a 45 minute outpatient procedure (usually under local anesthetic) at Sea Surgery Center in Seal Beach.
Q: I think my Esteem battery is low, but I'm not sure. Should I just schedule surgery?

A: Before we do ANY battery change surgery, we require that our patients have their battery tested by Esteem-trained audiologists to verify that it needs to be replaced. Patients may be seen for a battery check at a facility that is not Shohet Ear Associates as long as records indicating a low battery are sent to us prior to surgery.