

- 1. **Supplies Needed:** Soap (Dove or Lever 2000 unscented), Baby Shampoo (Aveeno), Tap Water, Bacitracin Antibiotic Ointment, Xeroform or Telfa (non-adherent dressing), Burn or Flexinet Dressing, and Abdominal Pad (ABDs) or Gauze Dressing.
- 2. **Wound care:** An open wound of the ear is not sterile. When cleaning a non-sterile wound it is important to use good hygiene by washing your hands first and using non-sterile gloves when others are dressing the wound. The wound care sequence:
 - Once a day clean the wound with soap and water, Dove is best, baby shampoo is great around the scalp, gently pat dry. (Avoid soaking in bath or dishwater).
 - Gently remove old creams or ointments and debris during cleaning.
 - Apply Cream, Ointment or Vasalene as instructed to wound in a light layer and dress.
 - Use quarter percent Hydrogen Peroxide to remove old blood or clot
 - Avoid using non-diluted Hydrogen Peroxide and discontinue when old blood gone.
 - Shower when possible once a day and twice a day if wound appears dirty
 - Keep the hair out of the wound and remove debris if necessary to clean
 - Nutritional status must be maximized & nicotine products are strictly avoided
- 3. **Re-evaluation:** After the ear wound has been properly cared for it may need to be re-assessd to see if other procedures are required. Traumatic ear wounds are often the result of severe trauma and the soft tissue may need to recover or be cleaned for a period of time prior reconstruction. If the wound is to be close it must be cleaned first and debris must be removed slowly over time. Not everyone is a candidate for primary wound closure and some require staged reconstruction. If the wound becomes infected or remains dirty some patients may require a surgical debridement before closure is attempted. Second opinions are always recommended prior to initiating a treatment regimen. If the wound does not improve after proper wound care recommendations may include:
 - Local debridement
 - Change in wound care or medications
 - Wound clinic referral
 - VAC Application suction wound device
 - Skin grafting
 - Surgical Reconstruction with regional or distant flap
 - Secondary referrals
- 4. **Individualized care:** Ear wound care must be individualized. Each patient has different issues that impact care such as age, health, nutrition, location, and complexity. There are times when surgery is not appropriate or is contra-indicated. Please notify your physician:
 - Significant bleeding that does not stop after 15 minutes of continuous pressure
 - Wound becomes significantly red, swollen, hot, or is significantly oozing
 - You develop a persistent fever over 101.5 F°
 - Severe pain not controlled by medications

PSDA PHONE NUMBER:

(405) 942-4300

- Please call for all lab work if you have not heard from us within several days.
- Please feel free to call us at any time if you have questions, change in condition, or problems.