

DISCHARGE INSTRUCTIONS FOR VESTIBULAR SCHWANNOMA (ACOUSTIC NEUROMA)

Vestibular Schwannoma is a benign (non-cancerous) tumor. It is the second most common tumor inside the head. The tumor forms from the Schwann cells that line the balance nerve fibers that connects the inner ear to the brain.

BEFORE SURGERY:

- ▶ No blood thinners including Aspirin, Coumadin, Xarelto, Plavix, and Eliquis. Please ask the prescribing doctor when to stop and start this medication in regard to your surgery.
- ▶ No over-the-counter pain medication except for Tylenol **1 week** after your surgery. This includes Advil, Motrin, Aleve, and generic ibuprofen, naproxyn.
- ▶ You will be contacted by phone the night before surgery and given your arrival time. Usually, you are instructed to arrive **2 hours** before your surgery starts
- ▶ Please eat your normal dinner and drink non-alcoholic fluids the night before surgery. Nothing to eat or drink after midnight. No breakfast or beverages (nothing by mouth) the morning of your surgery.
- ▶ Please wash your hair the night before or the morning of surgery.

WHAT TO EXPECT DURING YOUR HOSPITAL STAY:

- ▶ Your surgery will take up most of the day.
- ▶ Afterwards, you will stay in the Intensive Care Unit (ICU) one night so that you can be closely monitored.
- ▶ The next day you will usually be transferred to a regular unit for monitoring.
- ▶ If needed for balance problems after surgery, Physical Therapy will be ordered to help you get up and walk around. Some people need to use a walker after surgery to help prevent falls.
- ▶ For your safety, please request assistance from the hospital staff when getting up or using the restroom.
- ▶ People usually stay in the hospital **3-5 days** after surgery.
- ▶ You are considered safe to go home when:
 - ▶ You are steady on your feet.
 - ▶ You are eating and drinking fluids without issue (like vomiting).
 - ▶ You do not have extreme dizziness.
 - ▶ Your pain is controlled.
 - ▶ There are no complications such as cerebral spinal fluid (CSF) leak.
- ▶ Some people have weakness of half their face after surgery. If you have this right after your surgery, please use lubricating eye drops **every 1-2 hours** during the day. At night, use lubricating eye ointment and tape your eye shut so it does not get dried out, red or get scratched. Please see the eye care handout.
- ▶ You will have an incision on your scalp. This needs to stay clean and dry for **3 days** after surgery (do not wash your hair). After that, treat it like normal skin and scalp. Clean the incision gently with your fingers, shampoo, and warm water. Do not submerge the incision, such as in a bath.
 - ▶ Sutures or staples should be removed between **10-14 days** after surgery.
- ▶ You may also have an incision along your abdomen or hip where fat was removed. This needs to stay clean and dry for **3 days** after surgery. After, treat it like normal skin. Gently clean with your fingers, warm water, and mild soap.
 - ▶ There are usually no sutures or staples for this incision, only skin glue, which will dissolve with time.

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HOME CARE:

- ▶ No bending over or heavy lifting for **1 month** after your surgery.
- ▶ **Avoid** straining: Sneeze with your mouth open, avoid constipation by using stool softeners as needed, and **do not** blow your nose.
- ▶ Sex is okay after surgery, but for the first month, your partner should take the active role.
- ▶ You will likely be discharged home with medication.
 - ▶ Please take steroids and antibiotics as instructed.
 - ▶ You may have medication for dizziness or nausea, please take as needed.
 - ▶ If you have any medication issues or unexpected side effects, please call Dr. Voelker immediately.
- ▶ After surgery, it is normal to have some pain, discomfort, headaches, tiredness, dizziness, feelings of being off balance, and weakness. You will have some difficulty focusing while reading or on the computer and will likely need frequent breaks. This may last several weeks to several months.
- ▶ Try to stay as active as possible.

THINGS THAT REQUIRE IMMEDIATE ATTENTION:

- ▶ Uncontrolled pain even with use of prescription pain medication.
- ▶ Uncontrolled vomiting where you cannot hold down any food or fluids.
- ▶ Dizziness to where you cannot stand up and walk, or are having frequent falls.
- ▶ Fever, neck stiffness, unusual drowsiness, or confusion.
- ▶ Pus or fluid drainage from the incision, changes in swelling or redness to your incision.
- ▶ Changes in vision such as double vision, blurry vision, loss of vision.
- ▶ New onset facial droop, problems closing your eye, or eye pain. If you have facial weakness, the most important thing for you to do is eye care. Please use lubricating eye drops every **1-2 hours**, and please use lubricating eye ointment at night, then tape your eye shut. Please see the eye care handout for more information.
- ▶ Clear watery drainage dripping from your nose or ear, suggestive of cerebral spinal fluid leak.