



## Operation Information

### Preauricular Sinus Excision

#### Introduction

Preauricular Sinuses are common congenital malformations. A sinus is a tract that leads to the skin. This can become blocked, infected, and form an abscess. Preauricular Sinus Excision is a surgical excision of the preauricular sinus and excision of a scar from previous infection.



Source:  
<http://rlbatesmd.blogspot.com/2010/01/histologic-relationship-of-preauricular.html>

#### Indications

1. Previous history of infection of the preauricular sinus
2. Symptomatic preauricular sinus e.g. discharge

#### Outcomes

The expected outcome of this operation is to remove the preauricular sinus in order to prevent infection and relieve symptoms.

#### Procedures

1. The operation can be performed under general anaesthesia or local anaesthesia.
2. Make incision in front of the ear with the inclusion of the sinus opening and scar.
3. Remove soft tissue along the area, including all the tracts.
4. The wound is closed with stitches and covered with a sterile waterproof dressing.
5. Head bandage may be necessary.

#### Possible Risks and Complications

1. Common risks and complications ( $\geq 1\%$ )
    - i) Wound bleeding
    - ii) Wound infection / abscess
    - iii) Wound breakdown
    - iv) Poor wound healing
    - v) Scar / keloid
    - vi) Recurrence
  2. Uncommon risks with serious consequences (<1%)  
Damage to nearby structures (facial nerve / vessel)
- \*\* The risks listed above are in general terms and the possibility of complications is not exhaustive. Please understand that even though all operations are carried out with utmost professionalism and care, this does not rule out the possibility of complications arising. In the event of peripheral organ damage or post-operative haemorrhage or leakage, further operations may be required.

## **Pre-operative Preparations**

1. The procedure and possible complications will be explained by the doctor and a consent form must be signed prior to the operation.
2. Please inform the doctor and nurse all your past medical history, previous surgical operations, current medication and any complication with drug or anaesthesia.
3. Shaving of hair near the ear may be needed.
4. No food or drink six hours before the operation if it will be performed under general anaesthesia.
5. Please change into a surgical gown after removing all belongings including undergarments, dentures, jewellery and contact lenses.
6. Please empty your bladder before the operation.

## **Post-operative Instructions**

### General

1. After general anaesthesia, you may:
  - experience discomfort in the throat after tracheal intubation.
  - experience side effects of anaesthesia including feeling tired, drowsy, nausea or vomiting.  
Inform the nurse if symptoms persist or worsen.
2. Please inform the nurse of wound pain. Proper pain relief treatment by injection or oral medication may be prescribed by the doctor.
3. A normal diet may be resumed as instructed after recovery from anaesthesia.
4. You are usually discharged on the same day after the operation.

### Wound Care

1. Head bandage (if used) can be removed after one or two days.
2. Keep the wound clean and dry.
3. Stitches on the incision site will be removed or dissolved within a week.

## **Advice on Discharge**

1. Please comply with the medication regime as prescribed by your doctor.
2. You can return to work or school as soon as you feel able.
3. Please avoid strenuous activities, contact sports and swimming.
4. Immediately consult your doctor or return to hospital for professional attention in the event of severe bleeding or purulent discharge from the wound, wound swelling, increasing pain, chills, shivering, high fever over 38°C or 100.4°F, or any other unusual symptoms.
5. Any follow-up consultations should be attended as scheduled.

## **Alternative Treatments**

Conservative treatment: antibiotic and drainage

## **Consequences of No Treatment**

1. Risk of infection and subsequent sequelae
2. Persistent symptoms from preauricular sinus

Should there be any enquiries or concerns, please consult the attending doctor.

Under the professional care of the doctor, you will gradually recover. We wish you all the best during your treatment and recovery.

If you have any questions after reading the entire leaflet, please write them down in the spaces provided in order for the doctor to further follow-up.

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Compiled by Union Hospital Operating Theatre (OT) Governance Committee

The above information is for reference only, please enquire your physician for details  
Our Hospital reserves the RIGHT to amend any information in this leaflet without prior notification

