



ENT / Audiology Departments
Royal Berkshire NHS Foundation Trust
London Road, Reading RG1 5AN

ENT: 0118 322 7139
Audiology: 0118 322 7238

Paediatric post-grommet care: A guide for GPs

Your patient has been fitted with grommets for glue ear / ear infections. They have had a post-operative follow-up, normal audiogram and have been discharged from ENT / Paediatric Audiology follow-up. This information leaflet details ongoing management.

Swimming

Children with grommets are allowed to swim without earplugs but are advised against diving under water. If they suffer ear infection after swimming, they should consider using earplugs or stop swimming. When washing hair, prevent bath water getting into the ears with cotton wool and Vaseline.

Discharging ear

If children develop a discharging ear but are otherwise well, please treat with topical eardrops such as **Gentisone HC or Sofradex** for 10 days. As an alternative, use Ciprofloxacin drops (CILOXAN eye drops 0.3%). Please note that the risk of infection in the middle ear causing cochlear deafness is greater than the risk of using amino glycoside eardrops for 10 days. In addition, oral antibiotics may be used if the child has a temperature or is systemically unwell.

When should the GP refer back to ENT?

If the child has a persistent ear discharge despite the above treatment, please refer back to ENT Outpatients via the ENT assessment unit – telephone: 0118 322 7139 or seek ‘advice and guidance’ from the ‘Surgeon of the Week’ (SOW).

If at any time there is concern that the hearing is deteriorating, despite the grommets being in place, please refer routinely to the Paediatric Audiology / ENT Clinic.

Grommets usually extrude from the tympanic membrane after about 9–12 months.

If you have any questions about the care of your patient with grommets, please contact the consultant, under whose care they were fitted.

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