Procedure Information Sheet

Introduction

To implant the internal component of a cochlear implant system

Indication

- Bilateral severe to profound sensorineural hearing loss in adults and children > 12 months old
- Limited benefit with appropriately fitted hearing aid

The Operation / Procedure

1. Open the mastoid bone behind the ear
2. Implant the receiver and electrode bands
3. Hook up the transmitter headpiece and speech processor after 4-6 week when the wound is healed

Before the Operation / Procedure

1. Inform doctor of any medical condition e.g. diabetes mellitus, heart disease, hypertension and any regular medication, including herbs and dietary supplement.
2. Stop food and drink if needed as instructed by doctor or nurse
3. Other special preparation or investigation before the procedure
4. Intended benefits and expected outcome
   - 4.1 Hearing improvement
   - 4.2 Will not restore normal hearing
   - 4.3 Implant performance varies among individual patients
   - 4.4 Postoperative rehabilitative programs necessary to maximize performance
5. Conditions that would not be benefited by the procedure
   - 5.1 Deafness due to acoustic nerve or central auditory pathway lesions

After the Operation / Procedure

1. May discharge home one or two days after the procedure
2. Skull x-ray to assess the position of electrode
3. Wound normally heals one week after the procedure
4. Arrange for implant hook up and fitting of external part of the device few weeks after the procedure
5. Over the next few months the audiologist will make adjustments to the speech processor to make you hear better
6. Continuing evaluation of hearing status and adjustment of speech processor if needed

Patient's Label
Patient Name: _____
Hospital No:_____
Adm No/Episode No:_____

Risk and Complication

1. There are always certain side effects and risks of complications of the procedure. Medical staff will take every preventive measure to reduce their likelihood.
2. Common risks and complications (>=1% risk)
   - 2.1 Wound and implant infection
   - 2.2 Bleeding and haematoma
   - 2.3 Loss of residual hearing in the implanted ear
   - 2.4 Transitory balance problem
   - 2.5 Numbness around the ear
   - 2.6 Tinnitus
3. Uncommon risks with serious consequences (<1% risk)
   - 3.1 Facial nerve injury
   - 3.2 Meningitis
   - 3.3 Death due to serious surgical and anaesthetic complications
   - 3.4 Implant failure
   - 3.5 Electrode migration and implant extrusion
   - 3.6 Change in taste
   - 3.7 Flap necrosis
   - 3.8 Failure of insertion of electrode
   - 3.9 CSF/perilymph leakage
   - 3.10 Delayed abscess formation
4. Consequences of no treatment
   - 4.1 Speech deterioration
   - 4.2 Auditory brain centre degeneration
   - 4.3 Loss of ability to acquire speech

Alternative Treatment / Investigation

1. Hearing aid
2. Other means of communication

Disclaimer

This leaflet only provides general information pertaining to this operation / procedure. While common risks and complications are described, the list is not exhaustive, and the degree of risk could also vary between patients. Please contact your doctor for detailed information and specific enquiry.

Reference

Smart patient website by Hospital Authority: Cochlear Implant (2009)

Patient's Label
Patient Name: _____
Hospital No:_____
Adm No/Episode No:_____

Patient's Signature:_____ Date:_____