Protruding Ears (Otoplasty) can be a source of embarrassment and ridicule, which can lead to lower self-esteem and a conscious attempt to cover the ears. The ear is close to full adult size by age six so surgery is usually done at or after this age. Although usually done during youth, this procedure can be done on teenagers and adults. There are usually two components to an overly protruding ear: an enlarged conchal bowl (the bowl where the ear canal exists) or the lack of the normal fold on the top or widest part of the ear. A patient with protruding ears may have one or both of these components that require surgical alteration.
THE CONSULTATION

When considering an Otoplasty, you want to not only know your surgeon but trust that they understand how you want to look and feel, and that they can help you achieve the look you desire. The consultation gives you the opportunity to get to know Dr. Layton and discuss your goals, desires and expectations with him.

In a comfortable, low stress environment, you will have an examination by Dr. Layton where he will explain the anatomic abnormalities or problems that cause the ears to stick out. He will then demonstrate correction of the problem and the surgical goal, which will give you an idea of the expected surgical outcome. You will also be able to review photos of other patients that have had protruding ears fixed by Dr. Layton.

You will be given information to read and will be provided ample time to have all your questions answered by Dr. Layton. Our desire is for each patient to be fully informed and educated so that they are comfortable with their decisions and we are able to understand and exceed their expectations.
THE PROCEDURE

The procedure is performed in an accredited surgery center under general anesthesia. It may be performed in a hospital for younger children. You will be marked by Dr. Layton before surgery and given the opportunity to ask any questions. The procedure usually takes two hours to perform. The incisions are hidden behind the ear and inconspicuous. You can usually go home the day of surgery.

After making the incision behind the ear, the skin is elevated from the cartilage. Modifications and alterations are made to the cartilage to correct the deformity and produce the desired results. It may be necessary to remove some skin as well to prevent bunching up or skin folds.
POST-OPERATIVE

Prior to the day of surgery, you will be given prescriptions for antibiotics and pain medication to take after surgery. Before discharge following surgery, you will be given an instruction sheet that will explain incision care, activity detail, medication usage and follow-up appointment scheduling. Driving is not permitted while taking pain medication.

A wrap around the head holding the corrected position of the ears will be in place. A headband holding the ears in place will be needed for eight weeks post-operative. Follow-up appointments will be done at one week, two weeks, eight weeks and three months. In the younger patients, absorbable stitches will be used so that no stitch removal is necessary.