

Arizona Hearing & Balance Center

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Bone-Anchored Sound Processor Results and Risks

You have chosen to proceed with the placement of a bone-anchored sound processor. This requires the placement of a flange fixture as well as an abutment. As with any surgery, there are but also risks. The following information will help you understand the results and risks for the surgery above.

The placement of a bone-anchored sound processor requires approximately a 1-2 inch incision made above or behind your ear down through the soft tissue. A small hole is drilled into the skull. This hole is widened and then the titanium flange fixture is placed into the hole and screwed in. Between the flange fixture and the sound processor is the abutment. The abutment is a cup shaped structure that protrudes through the skin. Sometimes, we are able to do the operation in one stage, and other times we need to do the operation in 2 stages. We typically wait at least 3 months in adults and closer to 6 months in children before snapping the sound processor onto the abutment.

Infection:

Likelihood of infection after the placement of a bone-anchored sound processor screw is approximately 5%. This is where the soft tissue around the post becomes infected and requires antibiotics and sometimes the removal of the abutment. Typically, this can be handled as an outpatient procedure in the office.

Bleeding:

After a bone-anchored sound processor placement, bleeding can occur. The bleeding usually is self-limited, but approximately 1-2% of patients may need to go back to the operating room to evacuate a clot and/or to control the bleeding.

Anesthesia:

Although anesthesia is used for this surgery, the risk of a problem from anesthesia is less than 1%.

Postoperative Nausea and Vomiting:

As with any general anesthetic or local sedation, postoperative nausea and vomiting is possible. We will do our best to control this, but it may happen anyway.

Soft Tissue Issues:

The bone-anchored sound processor requires the thinning of a skin flap. When the skin is this thin, the flap can die and form granulation tissue. It may cause significant hair loss in this region as well as require surgery to revise the skin around the post. The abutment is a

foreign body coming out of your skull and through the soft tissue, complications are not uncommon. Also, there will be a significant indentation or depression of the soft tissue down to the skull. This indentation or depression is usually 1-2cm in diameter.

Cerebrospinal Fluid Leak:

Any time we drill into the skull, there is a chance that we can go through the skull and into the dura, or lining of the brain, and this may cause a spinal fluid leak. This is rare and controlled easily with bone wax over the hole. Please be aware of this risk.

Post Rejection:

The post is a titanium foreign body that is being placed into the skull. There is a chance that your skull may reject this post and it may extrude out. This is extremely rare and occurs in less than 1-2% of patients, but it is something you should be aware of.

Our goal in performing the surgery is to provide you with the best chance of success with the least risk of failure. Like other aspects of life, there are no guarantees.

If you have a bad result after surgery, we will do our best to treat the problem. Please let Dr. Fucci or our office staff know if you have any questions.

Bone-Anchored Sound Processor Results & Risks

Informed Consent

Our intent is to make sure you understand your ear surgery.

(Please Circle)

1. Do you understand the type of surgery you will have?
Yes No
2. Do you know the purpose of the surgery?
Yes No
3. Were you told what we expect to accomplish?
Yes No
4. Do you have a copy of the BAHA Results & Risks?
Yes No
5. Have you read the BAHA Results & Risks?
Yes No
6. Do you understand the BAHA Results & Risks?
Yes No
7. Do you understand there are no guarantees?
Yes No
8. Are you satisfied that all your questions have been answered?
Yes No
9. Are you allergic to any medications?
Yes No

If yes, please list:

Your surgeon will be:

I ACKNOWLEDGE RECEIPT OF THE DOCUMENT ENTITLED "**BONE-ANCHORED SOUND PROCESSOR RESULTS & RISKS**". I HAVE READ AND UNDERSTOOD THIS DOCUMENT AND HAVE HAD ALL MY QUESTIONS ANSWERED.

I HEREBY AUTHORIZE ARIZONA HEARING & BALANCE CENTER, ITS PHYSICIANS, NURSES, EMPLOYEES, AND AGENTS TO PERFORM THE SURGERY REFERRED TO HEREIN. I HAVE HAD AN OPPORTUNITY TO DISCUSS THE POSSIBLE RISKS AND REWARDS OF SUCH SURGERY WITH DR. FUCCI WHO HAS EXPLAINED THE PROCEDURE AND HAS ANSWERED ALL OF MY QUESTIONS TO MY SATISFACTION.

Patient's Name:

Date of Surgery:

Patient is scheduled for:

Signature: _____

DOB _____