Appendix

Acute Otitis Media

Otoscopist Training

DP McCormick, MD

Objectives

Learner will:

1. Define acute otitis media (AOM) and otitis media with effusion (OME).
2. Demonstrate use of symptom questionnaire and faces scale to assess the patient for otitis media associated symptoms
3. Demonstrate positioning of the young child and infant for examination of the tympanic membrane
4. Demonstrate removal of cerumen using saline and suction tip through the operating head
5. Demonstrate removal of cerumen using headlight and curette
6. Demonstrate removal of cerumen using irrigation
7. Demonstrate appropriate use of the pneumatic otoscope to evaluate the tympanic membrane
8. Correctly describe the anatomy of the tympanic membrane and visible middle ear structures.
9. Correctly describe the 8 grades of severity of the otoscopy scale OS-8.
10. Demonstrate correct use of the tympanometer to evaluate for middle ear effusion
11. Use tympanogram gradient and compliance to establish the likelihood of a middle ear effusion.
12. Demonstrate correct use of the tele-otoscope to obtain photos of the tympanic membrane
13. Demonstrate method of correctly labeling and saving photos on the ENV server
14. Demonstrate use of the double examination head for two observer assessment of the TM.
15. Correctly identify all unknown TM’s on the teaching deck of cards
16. Correctly define relapse and recurrence of AOM.
17. Describe appropriate treatment for the following scenarios, child aged < one year: a) low risk child with AOM, 2) high risk child with AOM, 3) AOM not responding to antibiotic, 4) recurrent AOM, 5) uncertain AOM.

Prerequisite: Review and be familiar with AOM teaching website on UTMB dept of Pediatrics home page.

Review teaching deck of cards with answer key.

If you have an otoscope please bring it.

Examiner validation certificate:

1. Review the AOM teaching website.
2. Complete the AOM ENV workshop
3. Score 80% correct on teaching photoset
4. Demonstrate 80% agreement with a validated observer on AOM grade: 20 live ears.