

## **Impacted Earwax - Eligibility criteria for referral to Primary Ear Care Centre**

Patients with symptoms associated with impacted earwax who have twice received irrigation in primary care if clinically indicated without success **OR**

Patients meeting any **ONE** of the following the criteria for referral as set out by NICE:

- The person has (or is suspected to have) a chronic perforation of the tympanic membrane
- There is a past history of ear surgery (except extruded grommets within the last 18 months, with subsequent discharge from an Ear Nose and Throat department)
- There is a foreign body, including vegetable matter, in the ear canal.
- Ear drops have been unsuccessful, despite using effective application technique and irrigation is contraindicated\*.

**NB** Refer or seek urgent advice if infection is present and the external canal needs to be cleared of wax, debris, and discharge

\*Patients with symptoms associated with impacted earwax for whom irrigation is contraindicated as per NICE<sub>2</sub>, as follows:

- A history of any previous problem with irrigation (pain, perforation, severe vertigo).
- Current perforation of the tympanic membrane.
- A history of perforation of the tympanic membrane in the last 12 months.
- Grommets in place.
- A history of any ear surgery (except extruded grommets within the last 18 months, with subsequent discharge from an Ear Nose and Throat department).
- A mucus discharge from the ear (which may indicate an undiagnosed perforation) within the past 12 months.
- A history of a middle ear infection in the previous 6 weeks.
- Cleft palate, whether repaired or not.
- Acute otitis externa with an oedematous ear canal and painful pinna.
- Keratosis obturans
- Presence of a foreign body, including vegetable matter, in the ear.
- Hearing in only one ear if it is the ear to be treated, as there is a remote chance that irrigation could cause permanent deafness.
- Confusion or agitation, as they may be unable to sit still.
- Inability to cooperate, for example young children and some people with learning difficulties.

### **Rationale for the policy**

Patients who have a foreign body in the ear should not be prescribed eardrops as these may cause the matter to swell. For other patients with symptoms associated with impacted earwax, irrigation should follow use of eardrops, except in those groups where irrigation is contraindicated. For most people, irrigation can be effectively and safely carried out in primary care. However; use your discretion in ensuring that this policy is appropriate for your patient.

### **References**

1. NICE Clinical Knowledge Summary. Scenario: Management of earwax. May 2012. Available at <http://cks.nice.org.uk/earwax#!scenario>

NICE Clinical Knowledge Summary. Scenario: Ear irrigation  
<http://cks.nice.org.uk/earwax#!scenariorecommendation:5>

## Impacted Earwax Referral form

Patient Name:            \${Title\_and\_surname} \${Forename}  
 Address:                 \${Patient\_address}  
 Date of Birth:            \${Date\_of\_birth}  
 NHS Number:            \${NHS\_number}  
 Consultant/Service to whom referral will be made:  
 Institution:

Instructions for use:

**To Referring Clinicians (e.g. GP's):** Please refer to the full policy and complete the box below prior to referral and provide evidence to support the criteria.

**To Consultants:** Please refer to the full policy, complete the box below and ensure there is evidence that the criteria are met.

NHS Rotherham CCG will only fund Earwax Removal in the Primary Ear Care Centre when the following criteria have been met: *In ordinary circumstances, referral should not be considered unless the patient meets **one** of the following criteria.*

Patients with symptoms associated with impacted earwax who have twice received irrigation in primary care without success <b>OR</b>	Y/N
The person has (or is suspected to have) a chronic perforation of the tympanic membrane	Y/N
There is a past history of ear surgery (except extruded grommets within the last 18 months, with subsequent discharge from an ENT department)	Y/N
There is a foreign body, including vegetable matter, in the ear canal	Y/N
Ear drops have been unsuccessful, despite using effective application technique and irrigation is contraindicated. **	Y/N

Please Indicate:

LEFT	RIGHT
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• **The only exceptions to the referral criteria above are as follows:**

\*\*Patients with symptoms associated with impacted earwax for whom irrigation is contraindicated as per NICE Guidelines, as follows:

A history of any previous problem with irrigation (pain, perforation, severe vertigo)	Y/N
Current perforation of the tympanic membrane	Y/N
A history of perforation of the tympanic membrane in the last 12 months	Y/N
Grommets in place	Y/N
A history of any ear surgery (except extruded grommets within the last 18 months, with subsequent discharge from an Ear Nose and Throat department).	Y/N
A mucus discharge from the ear (which may indicate an undiagnosed perforation) within the past 12 months	Y/N
A history of a middle ear infection in the previous 6 weeks	Y/N
Cleft palate, whether repaired or not	Y/N
Acute otitis externa with an oedematous ear canal and painful pinna	Y/N
Keratosis obturans	Y/N
Presence of a foreign body, including vegetable matter, in the ear	Y/N
Hearing in only one ear if it is the ear to be treated, as there is a remote chance that irrigation could cause permanent deafness.	Y/N
Confusion or agitation, as they may be unable to sit still	Y/N
Inability to cooperate, for example young children and some people with learning difficulties	Y/N

\* If clinician considers need for referral/treatment on clinical grounds outside of these criteria, please refer to IES CCG and WS CCGs' Individual funding request policy for further information.