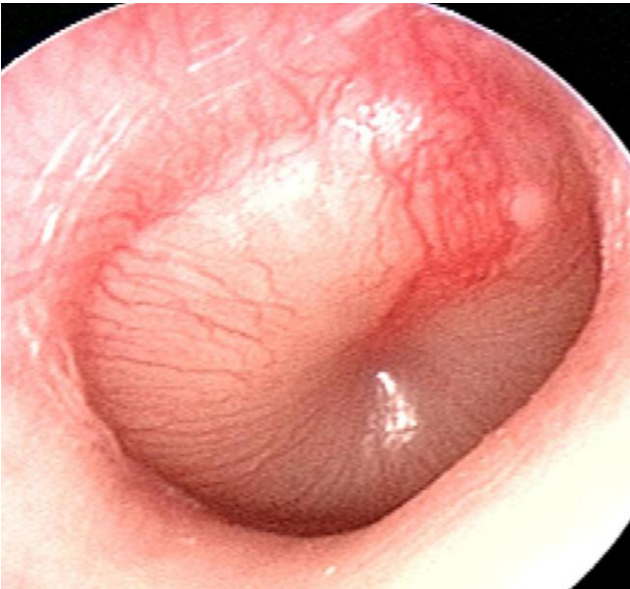


**Normal Tympanic Membrane**

Light reflex

Silver/grey

Malleus visible

**Acute Otitis Media**

Acute infection of the middle ear

Mucosal inflammation -> effusion

Opaque with white/pink discolouration

Bulging tympanic membrane

Erythema/prominent vessels

Pain, fever, hearing loss, URTI symptoms

Amoxicillin if persistent or progressive

**Otitis Media with Effusion**

AKA glue ear, serous otitis media

Acute infection resolves

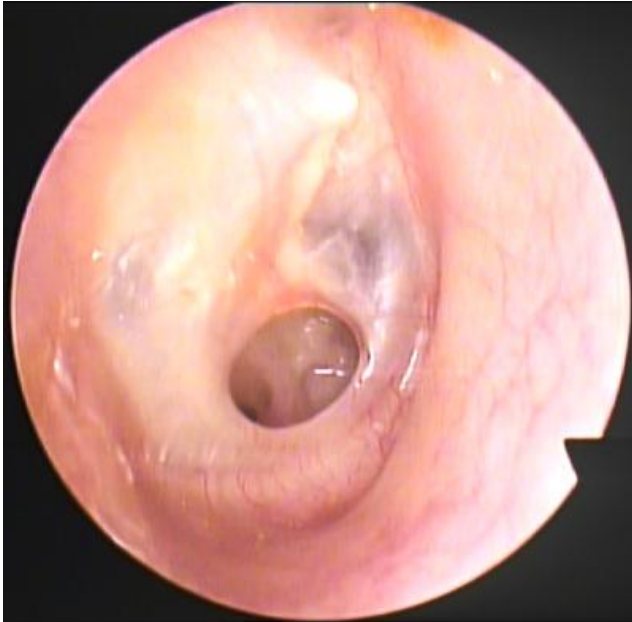
Middle ear effusion does not resolve

Tympanic membrane retracted

Bones easily visible

Painless, persistent hearing loss

Refer to GP



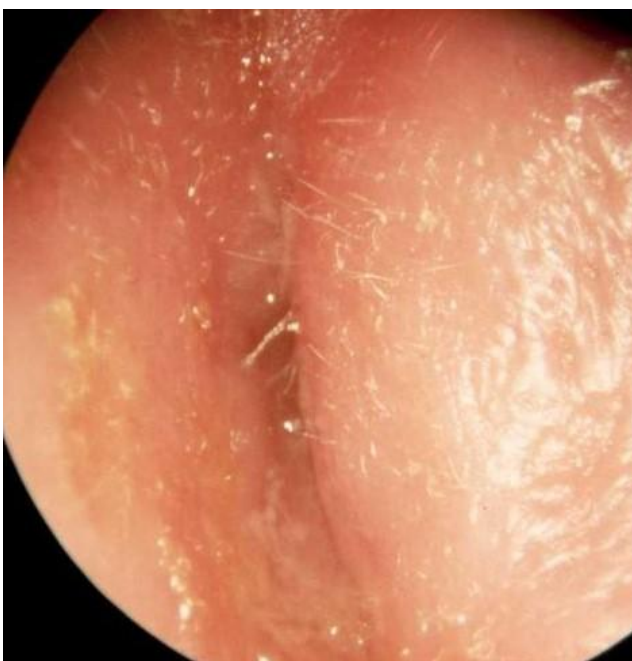
Chronic Suppurative Otitis Media

Chronic middle ear infection
 Perforated tympanic membrane
 Purulent discharge from ear
 Hearing loss
 Usually painless
 Refer to GP
 Will need ENT outpatient f/u



Acute Mastoiditis

Infection of mastoid air cells
 Spread from adjacent middle ear
 Destruction of bone
 Mastoid tenderness & cellulitis
 Fever, intracranial extension
 If suspected perform CT
 IV antibiotics, refer to ENT



Diffuse Otitis Externa

Acute inflammation of external canal
 Caused by moisture (swimmer's ear)
 Pseudomonas most common pathogen
 Discharge, ear pain, tragal tenderness
 Narrow ear canal due to swelling
 May be unable to see tympanic membrane
 Gentamicin/steroid eardrops if severe