

# Ear Nose and Throat consult guide

Mar 4, 2018 | 0  | [onthephones](#)

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## In a hurry? Make sure you know

- Important signs and symptoms for early referral; Upper airway obstruction (stridor, foreign body), active bleeding, button batteries

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## What history should JMOs know/collect?

- Standard history including duration and nature of symptoms. Important general points in medical background (other than previous ENT issues) include; diabetes, immunosuppression, anti platelet/anti coagulation, smoking
- Ears – pain, discharge, hearing, dizziness, previous otology issues/surgery
  - Nose – (facial) pain, rhinorrhea, nasal obstruction, allergies, previous sinonasal issues/surgery
  - Throat – breathing, voice changes, swallowing, smoking,

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## What examinations and investigations should JMOs perform/collect results of?

- Ears – otoscopy, swab discharge
- Nose – anterior rhinoscopy, CT paranasal sinuses
- Throat – Oral cavity examination, neck palpation, lateral airways xray, CT neck soft tissues

## What additional information would impress you?

- Knowing specific drops/sprays used by the patient
- Tuning fork assessment in otology exam
- Details of previous ENT interventions

## What are common mistakes/omissions made by JMOs?

- Incidental radiological findings of fluid in the mastoid air cells or mucosal thickening in the paranasal sinuses are rarely significant in the absence of clinical signs and symptoms
- The best treatment for otitis externa is topical drops rather than oral antibiotics

## Helpful resources

Textbook - ABC of Ear, Nose and Throat (Harold S. Ludman, Patrick J. Bradley)

## Related Podcasts

- [Epistaxis](#)
- [Sore ear](#)
- [Hearing loss](#)

**Tags:** #ear nose throat,#ENT,#otoscope