**Holistic Assessment of an Adult Ear Using an Otoscope (Observation) and Palpation**

[Student name]

[Department, College/ Institution]

[Course Name]

[Instructor Name]

August 26, 2020

**Holistic Assessment of an Adult Ear Using an Otoscope (Observation) and Palpation**

 Assessment or examination of the ear for appropriate and correct diagnosis uses the techniques of inspection or observation as well as palpation. Because there are internal structures in the ear, the inspection aspect is facilitated by the use of an otoscope (Ball et al., 2019). This paper presents some of the findings that may come out of the examination of an adult patient’s ears.

Table 1: Examination of an adult ear

|  |  |
| --- | --- |
| **Part/ Procedure** | **Findings**  |
| Inspection of the external ear structures  | The gross structure of the ears including the lobules of the auricles appears the same in size and shape. The tragus and antitragus do not appear swollen or inflamed bilaterally. There are no piercings bilaterally on the lobule, the helix, or the tragus. The intertragic notch shows no sign or evidence of otorrhea or ear discharge. There are no visible lesions bilaterally on both ears, and the color of the ears is homogeneous with the rest of the body. |
| Palpation of the external structures of the ear | The auricle, the helix, the tragus, and antitragus all do not show any tenderness or swelling. No masses are palpable bilaterally. On palpation of the mastoid process, the patient denies any tenderness. The auricle feels soft and flexible on palpation.  |
| Inspection of the internal structures using the otoscope | The patient denies any discomfort when the otoscope is inserted in the external auditory canal. Inspection of the external auditory canal reveals a clear canal with just a little cerumen that is brown in color. There is no otorrhea visible bilaterally. The canal walls are smooth with no evidence of nodules or inconsistencies bilaterally. The tympanic membrane shows no perforation or sclerosis on both sides. There are also no visible fluid levels behind the tympanic membrane bilaterally. However, there are bubbles that are visible on otoscopy on the right side. There is no cholesteatoma in the attic area of the membrane bilaterally. The tympanic membrane shows a visible bulge and demonstrates reduced mobility on pneumatic otoscopy on the right side too. The tympanic membrane on the left is round, smooth, and has no bulge.  |

**A Common Ear Problem**

 A common ear problem that a patient may suffer from is acute otitis media (AOM). This is what the patient examined above may be suffering from as per the otoscopic findings on the right ear. In this condition, the tympanic membrane shows an abnormal reaction to light and may also bulge. Fluid may be demonstrated in the middle ear through otoscopy and visible through the tympanic membrane. There is inflammation shown by redness of the tympanic membrane and the patient may have fever and tenderness on inserting the otoscope. The fluid behind the tympanic membrane may be pus at times. Acute otitis media is not very common in adults but is quite common in children because of their relatively short Eustachian tube. Treatment of this condition in adults is by antibiotics and analgesics. For patients not allergic to penicillin, the first choice antibiotic is amoxicillin at high doses. For instance, the patient may be given a dose of 90 mg/kg body weight per day in divided doses. This ensures greater bioavailability and therapeutic concentrations in the middle ear and hence higher chances of eradicating the causative organism of the infection (Hammer & McPhee, 2018).

**References**

Ball, J., Dains, J.E., Flynn, J.A., Solomon, B.S., & Stewart, R.W. (2019). *Seidel's guide to physical examination: An interprofessional approach, 9th ed*. Elsevier.

Hammer, D.G., & McPhee, S.J. (Eds). (2018). *Pathophysiology of disease: An introduction to clinical medicine, 8th ed*. McGraw-Hill Education.