

Otitis Externa

Queensland Ambulance Service

Exclusion from transport to General Practice

- Extreme redness and swelling of outer ear
- Systemically unwell
- Observations:
 - Temperature >38° or <36°
 - Heart rate >90bpm
 - Respiratory rate >24bpm
 - Blood Pressure <100mmHg Systolic.

Management

• Analgesia as required.

General Practice

Assessment

- Elderly patients may not have observations typical of sepsis.
- 1. Continually assess observations
- 2. Determine cause (injury)
- 3. Determine environmental contribution (fresh or sea water)
- 4. Check patency of the auditory canal and integrity of the tympanic membrane
- 5. Review comorbidities and medications.

Management

- Suspected malignant otitis externa or mastoiditis is for direct admission to Emergency Department
- Inability to clear material from auditory canal is for direct admission to Emergency Department.











First line treatment:

- Consider appropriate analgesia +/- NSAID
- Mild otitis externa (**no** peri-auricular erythema/cellulitis):
 - Patent canal and tympanic membrane visualized/intact
 - Otodex/Sofradex 2 to 3 drops QID TOPICAL; or,
 - Ciprofloxacin 3 drops BD TOPICAL
 - Occluded canal
 - Insert wick and soak with either of the above medications
- Otitis Externa (with peri-auricular erythema/cellulitis):
 - For direct admission to **Emergency Department**
- Review in clinic in 48 hours.

Failure to respond to antibiotics at 48 hours:

- Reconsider environmental factors and alter treatment accordingly
- If the auditory canal is unable to be cleared (via suctioning), for direct admission to **Emergency Department**
- Review with usual G.P. in 1 week.

Escalation triggers

Refer to the Emergency Department

If the patient has any of the following, please call the Infectious Diseases Registrar (5470 6600) prior to referral to the Emergency Department:

- Presence of sepsis
- Suspected malignant otitis externa or mastoiditis
- Failure of oral therapies at 48 hours
- Inability to clear material from auditory canal
- Worsening pain requiring intramuscular analgesics
- Any other serious clinical concerns not already listed.

Disclaimer:

This clinical pathway is a suggested guideline only, based on current evidence, and does not replace use of clinical judgement.



Governance for Safety and Quality in Health Service Organisations - Standard 1

Involves setting direction, making policy and strategy decisions, overseeing and monitoring organisational performance and ensuring overall accountability for a service.



Service Delivery - Standard 11

Patients and the community have access to safe, high quality healthcare services that are appropriate, effective and meet their needs.



Provision of Care - Standard 12

The intention of this standard is to ensure high quality care is delivered to consumers/patients throughout the care continuum.

