

GENERAL OTOLARYNGOLOGIC EXAMINATION

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Required Reading: Chapter in any physical diagnosis text on the head and neck examination.

Date: Lecture: Monday, March 31, 2008
Lab: See individual student assignments

Learning Objectives:

After completing the required reading assignment, attending the lecture and laboratory session, the student should be able to:

- List the anatomic areas that are examined during the general otolaryngologic examination.
- Examine these areas thoroughly with the proper equipment by practicing and self-assessment.
- Identify the normal structures that can be visualized during this examination.
- Identify pertinent abnormal findings and their significance as emphasized by the lecturer.

Sample Quiz Question:

A patient with a right-sided sensorineural hearing loss and normal hearing on the left will have the following results on tuning fork testing of the ears:

- A. Weber midline, Negative Rinne on right.
- B. Weber to right, Negative Rinne on right.
- C. Weber to left, Negative Rinne on right.
- D. Weber to right, Positive Rinne on right.
- E. Weber to left, Positive Rinne on right.

Answer: E

GENERAL ENT EXAMINATION

This examination is a part of the total head and neck examination. It is divided into five areas:

Ear
Nose
Mouth
Pharynx and Larynx
Neck

Required Equipment:

Pneumatic otoscope with various specula	Nasopharyngeal (small) and
Turning fork	Laryngeal (large) mirrors
Tongue blades	Light source
Plastic gloves	Mirror warmer
Head mirror	Gauze

Examination Techniques:

Inspection - Visual examination with and without otoscope or mirrors
Palpation - Use pads of first three fingers for neck examination

Patient seated facing examiner. Examiner seated at same level or slightly higher than patient.

A. Ear

1. Inspect auricle and surrounding tissue
Note: Deformities
Masses
Skin Lesions
2. Turn patient's head to one side and slightly away (downward) for a more horizontal positioning of the auditory canal: grasp pinna and raise
3. Insert largest otoscope speculum the canal will accommodate into the auditory canal
4. Inspect the ear canal
Note: Wax Redness
Discharge Swelling
Foreign Bodies
5. Inspect tympanic membrane and identify its landmarks (move speculum to view entire membrane.)
Note: Color Light reflex position
Thickness Malleus position
Drum Luster Perforations

6. Using the otoscope bulb to compress the bulb and inspect membrane for motion
7. Test auditory acuity
 - Have patient occlude ear not being examined with hand or finger
 - Administer the following tests
 - a. Whispered/spoken voice test, ticking watch, finger rub test
 - b. Weber's test
8. Repeat steps 1-7 on other ear
9. Administers Rinne's test

B. Nose

1. Inspect nose
 - Note: deformity
 - symmetry
 - inflammation
2. Elevate tip of nose
3. Insert otoscope with correct specula or nasal speculum and examine nares (use head mirror or penlight to illuminate)
4. Bilaterally inspect nasal mucosa
 - Note: color exudate
 - swelling bleeding
5. Inspect nasal septum
 - Note: bleeding
 - perforation
 - deviation
6. Inspect nasal turbinates (inferior, middle and superior meatus)
 - Note: color polyps
 - swelling exudate
7. Tilt head back slightly and inspect higher middle turbinate and nasal passage
 - Note: abnormal drainage
 - crusting
 - growths
 - Remove speculum
8. Palpate frontal sinuses
 - Press up under bony brow of each side with thumb
 - Avoid pressure on eyes
 - Note: tenderness

9. Palpate maxillary sinuses
 - Press up on each sinus with thumbNote: tenderness

C. Mouth

1. Inspect lips

Note: Color Ulcers
 Moisture Cracking
 Masses

2. With patient's mouth open (if patient is wearing dentures, remove them)

- Inspect hard palate
Note: Color
 Inflammation
 Lesions

- If lesions are noted, palpate with gloved index finger

Note: Induration
 Mobility

- Inspect buccal mucosa with tongue blade and light source

Note: Color Parotid gland enlargement
 Ulcers Nodules
 Pigmentation (patchy pigment normal for blacks)

- Inspect gingiva (gums)

Note: Inflammation
 Swelling
 Hemorrhage

- Inspect teeth

Note: Shape Mobility
 Position Decay
 Missing teeth

- Inspect soft palate

Note: Color
 Architecture

3. First with tongue lying on floor of mouth and then with it extended

- Inspect

Note: Size Papillae distribution and size
 Symmetry Color

4. Bilaterally palpate tongue. Use gloves
 - Have patient extend tongue
 - Hold it with a gauze square
 - Gently pull the tongue out to the right side of the mouth
 - Inspect the left lateral border and ventral surface, then palpate

Note:	Reddened areas	Nodules
	White lesions	Ulcerations
 - Repeat the above procedures for the right lateral border and ventral surface.

5. Release tongue and have patient touch palate with tip of tongue.
 - Inspect dorsal surface and floor of mouth
 - Have patient touch inside of right and left cheeks respectively with tip of tongue
 - Inspect the borders and buccal mucosa

Note:	Reddened areas	Swelling
	White lesions	Ulcerations

6. Bimanually palpate the floor of the mouth
 - Use index finger of right hand. Press gently on floor of mouth (from inside mouth)
 - Use first three fingers of left hand to push up under chin area
 - Assess

Note:	Induration
	Nodules

D. Pharynx and Larynx

1. Inspect pharynx
 - Depress tongue with tongue blade
 - Have patient say “Ah” (to raise soft palate)
 - Inspect
 - a. Soft palate
 - b. Uvula
 - c. Tonsils
 - d. Anterior and posterior pillars
 - e. Posterior pharynx

2. Inspect Nasopharynx
 - a. Warm Nasopharyngeal mirror
 - b. Depress tongue
 - c. Shine light reflected from head mirror to nasopharyngeal mirror and identify nasal choanae, back of vomer, back of turbinates, and eustachian tube orifices.

3. Inspect larynx
 - a. Warm mirror
 - b. Pull tongue forward
 - c. Shine light on laryngeal mirror
 - d. Have patient say “eeeeee”
 - e. Inspect

Vallecula, base of tongue, epiglottis, pyriform sinus, vocal cords/ mobility

E. Neck

1. Inspect neck

Note: Anatomy Masses
 Symmetry Scars
 Submaxillary gland enlargement

2. Bilaterally palpate areas of lymph node concentration

- Have patient relax, with neck flexed slightly forward or to side being examined
- Begin at preauricular node area and continue to the supraclavicular area including the anterior and posterior cervical triangles
- Move skin over underlying tissue in a rotary motion with pads of first two fingers

Note: Size Mobility
 Shape Consistency
 Matted Tenderness

3. Identify thyroid and cricoid cartilages and the trachea below them

4. Inspect thyroid tissue

- Have patient swallow

Note: Contour
 Symmetry
 Movement
 Size

5. Palpate thyroid

- Use anterior or posterior approach
- Bi-manually palpate thyroid
- Push gently to the right with first two fingers of the left hand
- Palpate right lobe while patient swallows. The thyroid should rise with swallow.

Note: Enlargement
 Nodules
 Tenderness
 Asymmetry

- Repeat these procedures to examine left lobe