

Tympanometry Cheat sheet

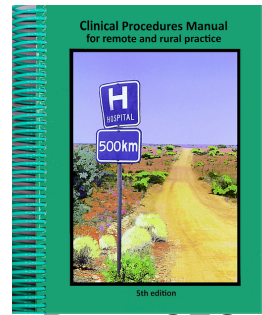


DO NOT PERFORM IF:

- ANY EAR PAIN
- The ear drum is inflamed or bulging
- If there is discharge or a foreign object in the canal
- within six weeks of surgery, or in accordance with medical advice



Page 398



Page 253

The 3rd question in the CARPA flowchart for diagnosing ear problems asks 'does the ear drum move when tested' Tympanometry is a simple test to determine whether the ear drum is moving.

1

OTOSCOPY- CHECK FOR CONTRAINDICATIONS. This includes discharge in the canal, pain, a post-operative client etc.

2

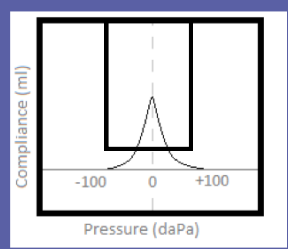
SELECT TYMP TIP SIZE.

3

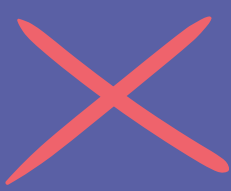
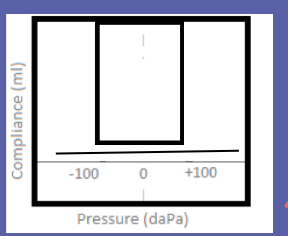
PREPARE CLIENT (Age dependent)

4

PULL EAR UP AND BACK, INSERT PROBE AND OBTAIN SEAL

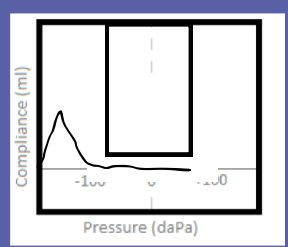


Ear Drum is **MOBILE-PEAK=PASS TYPE A** (peak in the box)



Ear Drum is **IMMOBILE-PROBLEM TYPE B** (no peak)

(otitis media w/effusion, AOM, perforation, wax occlusion, thickened/scarred eardrum)



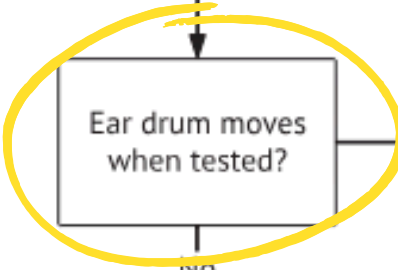
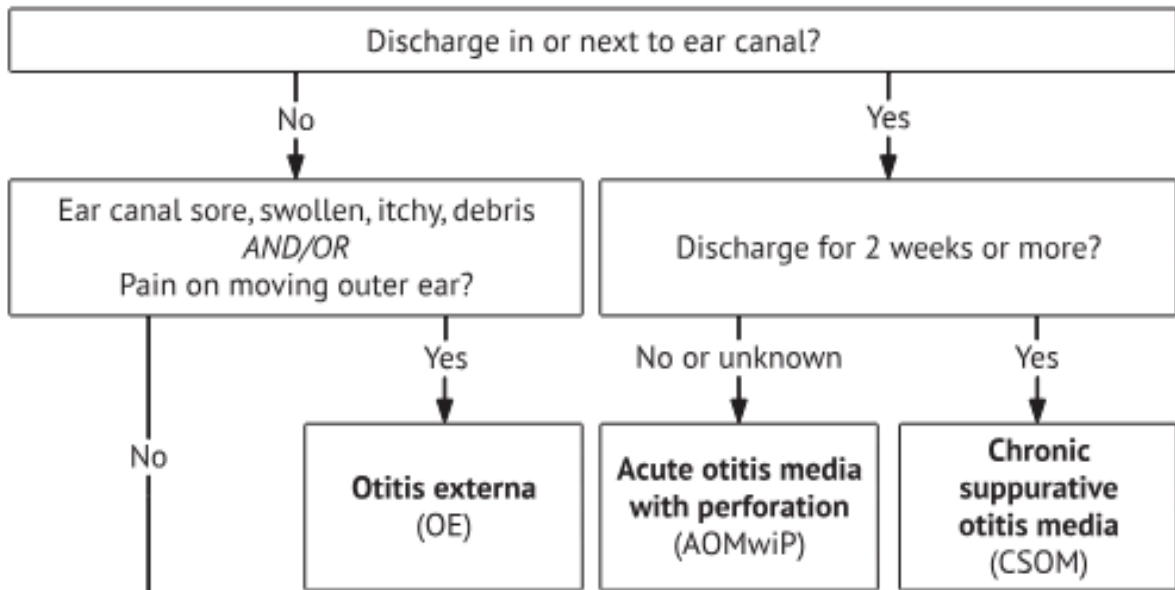
Ear Drum is **MOBILE** with negative pressure Eustachian Tube Dysfunction

TYPE C (peak left of the box)



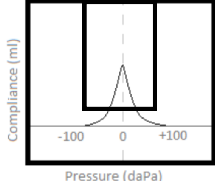
Diagnosing ear problems

Flowchart 7.1 Diagnosing ear problems



Normal eardrum

- Shiny and clear
- Dull and opaque
- Scarred or healed hole

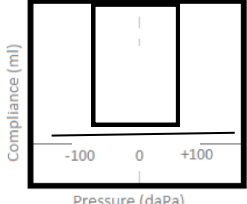


Type A

Hole in eardrum? — Yes —> **Dry perforation**

Bulging eardrum? (fluid/pus behind eardrum) — Yes —> **Acute otitis media without perforation (AOMwoP)**

Otitis media with effusion (OME)



Type B