EXAMINATION of the TYMPANIC MEMBRANE

2nd / 3rd year medical students

- Introduce yourself to the patient.
- Explain procedure, rationale and gain consent.
- Document that consent was granted.
- **Examine the area around the ear**- for scars from mastoidectomy, cochlear implant etc.
- **Examine the pinna** - look for scars, sinuses, redness, swelling or the presence of a hearing aid.
- **Examine the meatus**- look for evidence of discharge, eczema or previous surgery.
- **Examine the external ear canal** – look for evidence of infection, any discharge etc.
- Straighten the external ear canal by applying gentle traction to the ear in whichever direction straightens the external ear canal – usually backwards and upwards.
- Attach an aural speculum to the auroscope – choose the largest speculum which will fit comfortably into the patient’s external ear canal.
- Turn on the auroscope.
- Always hold the auroscope in the same hand as the side as the ear you are about to examine. Hold the auroscope like a pen such that your hand is positioned against the patients face – this controlled method of handling the scope prevents damage to the ear canal should the patient move suddenly.
- The features of the external ear canal should be noted.
- The tympanic membrane should be visualised- the normal membrane will appear as a thin semi-transparent, concave membrane with a pearly grey appearance.
- Identify the various areas of the tympanic membrane
1. Attic (pars flaccida)
2. Lateral process of the malleus
3. Handle of the malleus
4. End of the malleus
5. Light reflex. (QUB, 2007)

- Appropriately dispose of speculum.
- Thank and reassure the patient.

**Evaluation**

- Compare assessment with previous observations if any to identify change.
- Any abnormal findings should be noted and described.

*Picture with thanks from Error! Hyperlink reference not valid.*