

Ear Drops

● SKILL SNAPSHOT

Purpose

- Places prescribed medication into the external auditory canal for local treatment.

When to use

- Otitis externa, cerumen-softening, inflammation, pain, or another condition with an intact/approved tympanic membrane status.

Supplies needed

- Ordered otic drops; gloves; tissue/cotton only if ordered; medication warmer in hands; otoscope if within scope.

● PREP + PATIENT SETUP

- Verify right ear/left ear/both, medication, dose, timing, allergies, and eardrum status.
- Assess pain, drainage, hearing change, canal condition, and tubes/perforation history.
- Warm bottle in hands; cold drops may cause

● VAULT TIP

- Remember: age 3 and up, ear goes up and back; under 3, down and back.

● STEP-BY-STEP

1. Hand hygiene; identify patient; explain procedure and expected sensation.
2. Compare label with MAR/order; inspect solution and expiration.
3. Position affected ear upward with patient side-lying or head tilted.
4. Apply gloves if drainage is present. Clean only the outer ear gently; do not insert swabs into canal.
5. Straighten canal: adult and child age 3 or older - pull pinna up and back; child younger than 3 - down and back.
6. Hold dropper above canal without touching ear, skin, or fingers.
7. Instill prescribed number of drops along the side of the canal, not forcefully onto the tympanic membrane.
8. Release pinna. Gently press tragus several times if not contraindicated to help medication move inward.
9. Keep affected ear upward for the ordered time, commonly 2-5 minutes.
10. Place a loose cotton pledget at the opening only if ordered; never pack deeply.
11. Treat the other ear with clean technique if prescribed; avoid cross-contaminating the dropper.
12. Remove gloves, perform hand hygiene, and reassess for dizziness, pain, or reaction.

● SAFETY REMINDERS

- Use only otic products approved for known/suspected perforation or tympanostomy tubes.
- Never touch dropper tip to ear.
- Stop and report severe vertigo, sudden hearing change, intense pain, or allergic reaction.
- Do not force medication into an obstructed canal.

● COMMON MISTAKES

- Using eye/ear side incorrectly.
- Pulling the pinna in the wrong direction for age.
- Instilling cold drops.
- Occluding canal tightly with cotton.

● DOCUMENTATION

- Medication, dose, ear(s), date/time.
- Pain, drainage, hearing or canal assessment.
- Patient position and tolerance.
- Teaching and response.
- Adverse effects and notifications.