Spontaneous Bilateral Auricular Seromas in a Newborn
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Objectives:
To describe a rare presentation of bilateral auricular seromas in a newborn infant. Initial work-up and management of auricular swelling in a newborn will be discussed. An otherwise healthy 7-day-old male presented with spontaneous left auricular swelling and no history of trauma. Incision and drainage revealed serous fluid and a bolster was placed. Six days later, the patient developed contralateral right auricular swelling that was drained for serous fluid. Acute, bilateral spontaneous auricular swelling is extremely rare and to our knowledge this is only described once in the literature in a young adult, but never in a neonate.

Methods:
We describe the presentation, work-up and management of a case of bilateral spontaneous auricular seromas in a newborn. A thorough review of the literature was performed reviewing the differential diagnosis of auricular swelling which includes auricular hematoma, seroma and pseudocysts. The presentation and management of auricular swelling is compared to published case reports.

Conclusions:
To our knowledge, this is the first report of bilateral auricular seromas in a new born infant. The differential diagnosis of auricular swelling includes auricular hematoma, seroma and pseudocysts. In the pediatric population, especially newborn, it is important to rule out nonaccidental trauma (NAT). Although the etiology of swelling can vary, management is essentially the same and involves drainage of fluid, bolster placement and close follow up. Auricular seroma is a benign condition, however close follow-up is necessary to prevent injury and devascularization of the helical cartilage (“cauliflower ear”).