

NOTTINGHAM EAR & SCAN CLINIC

Patient Information Leaflet

Private GP-Led Ear Examination and Treatment Service

Please read before attending your appointment

This leaflet explains the examinations and treatments we offer and the **possible risks**, so you can make an informed decision.

This is a **private, GP-led service**. It operates alongside NHS services and does not replace NHS primary or secondary care.

Patients are encouraged to discuss any questions or concerns with their clinician **before or during the appointment**.

Treatments and Services We Offer

- Otoscopic / video-otoscopic ear examination
 - Microsuction ear wax removal
 - Manual wax removal (instruments)
 - Removal of a foreign body from the ear canal
 - Hearing check (screening audiometry)
 - Assessment and initial management of ear infections
 - Ear swabs when clinically indicated
 - Advice, safety-netting and signposting to NHS services when required
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Before Your Appointment

You may be advised to soften wax before your appointment (e.g. olive oil spray such as Earol). Wax softeners can temporarily make hearing feel more blocked.

If you wear hearing aids, it may be best to apply softener overnight and avoid wearing hearing aids immediately after application.

Please tell your clinician if you have:

- Previous ear surgery
- A perforated eardrum (known or suspected)

- Ear pain, discharge, or current infection
 - Significant dizziness/vertigo
 - Sudden hearing loss
 - Anticoagulant medication (blood thinners)
 - Any medical implants relevant to hearing testing
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Consent

By **proceeding with your appointment**, you confirm that:

- You have read and understood this leaflet
 - You understand the intended benefits and **risks** of examination and/or treatment
 - You understand that procedures may be **modified, postponed, or stopped** if it is not clinically safe to continue
 - You understand that treatment may require more than one appointment
 - You understand that you may decline any part of the examination or treatment at any time
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Procedures and Risks

1) Otoscopy (Examining your ears)

Your clinician will examine the ear canal and eardrum using an otoscope (often with video capability).

Risks

Common

- Mild discomfort

Uncommon

- Temporary irritation of the ear canal

Rare

- Minor trauma to the ear canal (soreness or small amount of bleeding)
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2) Hearing Check (Screening Audiometry)

A hearing check involves wearing headphones and responding to tones at different volumes and pitches. This is a **screening test** and not a full diagnostic audiology assessment.

Important

If you have a **programmable ventriculo-peritoneal (VP) shunt**, you must inform your clinician and **not proceed** with hearing screening.

Risks

Common

- Temporary discomfort from louder or high-pitched sounds

Uncommon

- Temporary increase in awareness of existing tinnitus

Rare

- Dizziness

Very rare

- Persistent increase in tinnitus awareness
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3) Ear Wax Removal (Microsuction and/or Manual Removal)

Wax may be removed using microsuction and/or fine instruments. Your clinician will choose the safest method depending on wax type and ear anatomy.

Risks

Common

- Complete wax removal may not be achieved in one visit
- Cough reflex triggered during suction

Uncommon

- Discomfort or pain
- Small abrasions to the ear canal
- Bleeding from the ear canal
- Ear infection (otitis externa)

- Temporary change in hearing sensitivity
- Temporary increase in awareness of tinnitus

Rare

- Temporary dizziness/vertigo
- Eardrum (tympanic membrane) injury or perforation

Very rare / extremely rare

- Fainting (vasovagal episode) during or shortly after the procedure
 - Persistent tinnitus
 - Permanent hearing loss
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4) Removal of a Foreign Body from the Ear Canal

Foreign bodies can include hearing aid parts, cotton fragments, beads, insects, etc.

Risks

Common

- Discomfort

Uncommon

- Minor trauma or bleeding of the ear canal

Rare

- Damage to the eardrum
- Infection

If safe removal cannot be achieved

If removal cannot be performed safely in clinic, **no further attempts will be made**. You will be advised to attend **Accident & Emergency (A&E)** for urgent assessment.

5) Ear Infections

During your examination, your clinician may identify signs of infection or inflammation.

What patients need to understand

- Some ear infections **should not be instrumented**

- Wax removal may be **unsafe** if infection is present
- Proceeding in these situations may worsen pain, bleeding, or infection

What may happen

- The procedure may be **postponed or stopped**
 - You will be given **clear advice on next steps**
 - **NHS patients may be advised to consult their NHS GP**
 - If symptoms are severe or urgent, you may be directed to **A&E**
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6) Ear Swabs

Ear swabs may be taken when infection is suspected, and results are likely to influence management.

Risks

Rare

- Mild discomfort
 - Temporary irritation of the ear canal
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When Treatment May Be Stopped or Deferred

Treatment may be stopped or deferred if:

- Infection is present
 - Ear canal anatomy makes treatment unsafe
 - Eardrum abnormality or damage is identified
 - You experience significant pain, dizziness, or feel faint
 - Continuing would increase risk of harm
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Aftercare

- Keep ears dry for **24–48 hours** after wax removal or instrumentation
- Avoid inserting cotton buds or other objects into the ear canal
- Follow any specific advice given by your clinician

Seek medical advice urgently if you develop:

- Increasing pain
- Swelling/redness
- Discharge or foul odour

- Vertigo
 - Sudden or significant hearing loss
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Media (Images and Video)

During your appointment, your clinician may record images or video of your ear(s). This may be used:

- To document findings in your clinical record
- To explain findings to you and support informed decision-making
- To request advice/second opinion from an appropriately qualified clinician, if required
- For training, audit, and service improvement

Marketing use: Images/videos will not be used for marketing purposes without your explicit permission, and no patient-identifiable information will be included.

Please tell your clinician if you do not consent to images or video being taken.

NHS Care and Signposting

This is a private GP-led service. Where appropriate:

- NHS patients may be advised to consult their **NHS GP**
- Urgent concerns will be directed to **Accident & Emergency (A&E)**
- This clinic does not generate NHS referrals directly