Guideline: Cleft Palate Clinic Appointments for Children with Acute Ear Infections - Outpatient - CHW

CLEFT PALATE CLINIC APPOINTMENTS FOR CHILDREN WITH ACUTE EAR INFECTIONS - OUTPATIENT - CHW

PRACTICE GUIDELINE®

DOCUMENT SUMMARY/KEY POINTS

- Children with a history of cleft lip and palate are at an increased risk of developing middle ear infections, particularly within the first 10 years of life.
- Parents of children with acute ear infections should be instructed to seek initial treatment with their local family doctor/general practitioner (GP).
- Parents should be informed that their GP can refer a child to the Clinic should the condition not improve, or be deemed by the GP to require tertiary level, specialist, assessment and intervention.

CHANGE SUMMARY

Not Applicable – New Guideline

READ ACKNOWLEDGEMENT

 This guideline should be read by all Cleft Palate Clinic, Audiology Department, and ENT Surgery Department staff, both administrative and clinical.

This document reflects what is currently regarded as safe practice. However, as in any clinical situation, there may be factors which cannot be covered by a single set of guidelines. This document does not replace the need for the application of clinical judgement to each individual presentation.

Approved by:	SCHN Policy, Procedure and Guideline Committee	
Date Effective:	1 st November 2022	Review Period: 3 years
Team Leader:	Cleft Speech Pathologist	Area/Dept: Cleft Palate Clinic

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Background

Children with a history of cleft lip and palate are at an increased risk of developing middle ear infections, particularly within the first 10 years of life. The parents of these children often call the Cleft Palate Clinic requesting an urgent appointment with an Ear, Nose and Throat (ENT) Surgeon for the management of these acute ear infections, bypassing their local family doctor/general practitioner (GP).

While it is understandable why parents contact the Clinic seeking an ENT appointment, parents should be reminded that the most appropriate course of action is to make an appointment with their local family doctor/general practitioner (GP) for initial assessment and treatment, and not have the child seen by an ENT Surgeon in the Clinic in this first instance.

Purpose of this Guideline

This guidelines seeks to document the required response to parents requesting ENT Surgery appointments in the Cleft Palate Clinic for the management of acute ear infections, and provide a source for consistent messaging on this subject.

Recommended Actions

Verbal Advice to Parents

Parents should be:

- Asked to keep their child's ear dry, including:
 - No swimming
 - Using a shower cap when in the bath/shower
 - Placing a cup over the ears when washing hair
- Asked to attend their local family doctor/general practitioner (GP) for initial assessment and management of their child's ear infection.
- Informed that their GP can send a referral to the Cleft Palate Clinic requesting further assessment should the condition not improve following their treatment, or should the condition warrant further specialist assessment. This referral should include details of:
 - The duration of the infection
 - o The treatment (including medication) given to the patient
 - The results of any ear swab testing
- Informed that an SMS message can be sent to the parents providing this information.



Written Advice to Parents

To assist staff in communicating this message consistently to parents, an SMS Template message has been constructed using the Cleft Palate Clinic's MessageMedia software account. This message can be sent to parents as a standalone SMS message or copied into an email as part of an email response to a parent.

The specific message text is as follows:

Message from the Cleft Palate Clinic at The Children's Hospital at Westmead:

Dear Parent.

Thank you for contacting the Clinic about your child's ear infection.

Most ear infections, including infections with fluid coming out of the ear, can be successfully managed by your family doctor. The Ear, Nose and Throat (ENT) Surgeons from the Clinic would ask that you make an appointment to see your family doctor as the first step for managing your child's ear infection, and to keep your child's ear dry. Keeping an ear dry means that you can still give ear drops from your doctor, but:

- No swimming
- Use a shower cap when in bath/shower
- Place a cup over the ears when washing hair

If your family doctor feels that more specialist assessment is required, please ask them to fax or email a referral letter to the Clinic. We will then show this referral letter to our ENT Surgeons to determine the next steps.

Your family doctor will know to include the following information in their letter:

- The duration of the infection
- The treatment given (including any medication)
- The results of any ear swab tests

The Clinic staff cannot make an appointment to see an ENT Surgeon until this referral letter has been received and reviewed.

We hope this information is helpful to you, and please feel free to pass this message on to your family doctor.

Yours sincerely,

The Cleft Palate Clinic and ENT Surgery Teams

T: (02) 98452079

F: (02) 98452078

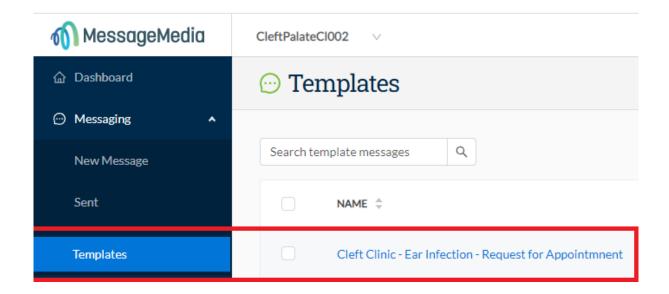
E: SCHN-CHW-CleftPalateClinic@health.nsw.gov.au



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This message is accessible under as the "Templates" option within the "Messaging" section of the Cleft Palate Clinic's MessageMedia software account, as depicted below:



Clinical Discretion

Acute ear infections following surgical procedures may warrant specialist ENT Surgery review, and this will be determined by discussion between the Cleft Palate Clinic staff and the ENT Surgery team as needed.

Hearing Assessments for Patients with Acute Ear Infections

Should a child be referred by their GP and be allocated an appointment for clinical review with an ENT Surgeon, this appointment will not include a formal hearing test by the Audiology Department. It is both difficult and invalid to conduct a hearing assessment on an acutely infected ear, particularly if the ear is discharging. The clinical relevance of any information obtained from the hearing test is minimal in this situation.

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