



General Commissioning Statement

Condition or Treatment	Removal of Ear Wax in secondary care
Commissioning Threshold	<p>Ear wax removal is normally carried out in primary care.</p> <p><i>Refer to secondary care only if:</i></p> <ul style="list-style-type: none"> • Conservative treatments including irrigation are unsuccessful (following initial softening with ear drops for at least 14 days) OR • Conservative treatments including irrigation are contraindicated. The contraindications are: <ul style="list-style-type: none"> ○ Complications following this procedure in the past ○ Current perforation of the tympanic membrane ○ A history of healed perforation of the tympanic membrane in the last 12 months ○ Ear surgery in the past (apart from grommets that have come out at least 18 months previously and you have been discharged from the hospital ear department) ○ A cleft palate (even if it has been repaired) ○ A current middle ear infection or a history of middle ear infection in the previous six weeks ○ A history of current or recurring otitis externa ○ Hearing only in one ear, if it is the ear to be treated ○ Inability to cooperate with the procedure (eg confusion, agitation, young children, some people with learning difficulties)
Referral guidance	<p>Procedure of limited clinical value</p> <p>Exceptional cases can be referred to the CCG's Individual Funding Request Panel for prior approval.</p> <p>Please find form here:</p> <p>Referral form</p>
Effective from	01/10/2016
Summary of evidence / Rationale	<p>A build-up of earwax is a common problem that can often be treated using eardrops bought from a pharmacy.</p> <p>NICE Clinical Knowledge Summaries (CKS) recommends using drops for 3–5 days as first-line management, with the aim of avoiding irrigation whenever possible.</p> <p>CKS does not recommend irrigation without prior use of a softening agent as extra force may be needed which is more likely to cause</p>

	trauma http://cks.nice.org.uk/earwax#!management
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