



# Patient Information Leaflet

You will be asked to sign a consent form on the Tympa system before proceeding with otoscopy, wax removal and/or a hearing check to confirm you have read and understood the information contained within this document.

## 1. Otoscopy (Examining your ears)

The Ear Care Practitioner (ECP) will ask for your permission to examine your ear(s) using the digital video otoscope called the Tympa device. This allows examination of the ear canal and eardrum.

### Otoscopy risks

#### Common (Might happen)

- Mild discomfort when the otoscope is introduced / removed from the ear

#### Rare (Probably won't happen)

- Severe discomfort
- Trauma to the ear canal

## 2. Hearing Check

A hearing check involves placing headphones over both ears. The Tympa device will play a range of different sounds at varying loudness and pitch through the headphones. The aim of the test is to establish the quietest sounds you can hear and identify any potential hearing weakness.

If you have any implantable medical device in the head, neck, or shoulder region (e.g. ventriculoperitoneal shunt, cochlear implant, neurostimulator, or other magnet-sensitive implant), then you **MUST** inform your ECP and **NOT** proceed with the hearing check. Headphones may generate magnetic fields that could interfere with such devices.

### Hearing Check risks

#### Common (Might happen)

- Discomfort to some loud or high pitch sounds in the test, but this tends to be temporary.
- Temporary increased awareness of pre-existing tinnitus



#### **Rare (Probably won't happen)**

- Dizziness
- Permanent increased awareness of pre-existing tinnitus
- Triggering a new awareness of tinnitus

### **3. Ear Wax Removal**

Ear wax removal may be necessary to relieve fullness/blocked sensation of the ear, and/or to enable otoscopy and hearing check. If the wax cannot be fully removed, a second or third appointment may be required with further softening of the wax for a few days between visits using alternative softeners as advised.

#### **Procedure**

Two methods of wax removal may be used during your appointment, microsuction and/or manual removal using an instrument. Your ECP will choose the most appropriate method.

#### **Ear Wax Removal risks**

Your ECP has undertaken training and is certified as competent in ear care and wax removal and will use best practice procedures to minimise any risk. However, even when performed with the utmost care, there are some risks involved in wax removal. These risks include:

#### **Common (Might happen)**

- Complete wax removal cannot be achieved
- Stimulation of cough reflex

#### **Uncommon (Unlikely to happen)**

- Discomfort (minimised by application of olive oil prior to appointment)
- Damage to skin of the ear canal (minimised by application of olive oil prior to appointment)
- Bleeding from ear canal
- Ear infection
- Temporary change in sensitivity of hearing
- Temporary increased awareness of pre-existing tinnitus

#### **Rare (Probably won't happen)**

- Damage to the ear drum during the procedure



- Feeling lightheaded
- Temporary dizziness

**Extremely Rare (Probably won't happen)**

- Permanent hearing loss
- Persistent increased awareness of pre-existing tinnitus
- Sustained awareness of tinnitus
- Fainting during or shortly after the procedure