

**Patient name:**

### **Purpose of the procedure**

Ear microsuction is a procedure used to remove ear wax and/or debris from the ear canal using a small suction device and magnification.

### **Description of the procedure**

During the procedure, a clinician will examine the ear canal using magnification and remove wax or debris using a fine suction tube and, where appropriate, other suitable instruments. The procedure is usually performed with the patient seated. You may hear a loud noise from the suction device and may feel movement or mild pulling within the ear.

### **Benefits**

- Relief of blocked or full sensation in the ear where wax is the cause.
- Possible improvement in hearing when wax is obstructing the ear canal.
- Improved visibility of the ear canal and ear drum to assist diagnosis and management.

### **Risks and possible complications**

Complications of ear microsuction are uncommon but can occur. Known or potential risks, side effects, and material complications include:

- Discomfort, pain, or sensitivity during or after the procedure.
- Temporary worsening of symptoms such as a blocked feeling, tinnitus, or temporary hearing change.
- Dizziness or vertigo during or shortly after the procedure.
- Minor bleeding from the ear canal.
- Trauma to the ear canal skin, including abrasion or inflammation.
- Perforation of the ear drum, which may be temporary or permanent and may affect hearing.
- Rare risk of persistent tinnitus or hearing loss.
- Failure to improve symptoms if wax is not the cause of the problem.

If you have a history of ear surgery, perforated ear drum, recurrent ear infections, only hearing ear, significant tinnitus, vertigo, are taking blood thinning medication, or have any other relevant ear condition, the risk of complications may be increased.

### **Incomplete wax removal and repeat visits**

Because ear wax varies in hardness, amount, and how firmly it adheres to the ear canal, it is not always possible or safe to remove all wax in a single session.

If the wax is very hard, heavily impacted, or tightly adherent to the ear canal, only partial removal may be achieved at the first visit to reduce the risk of trauma. In such cases, wax softening drops or oil may be recommended and a further appointment may be required to complete removal. Additional visits may incur further fees in accordance with 1 Health billing policies.

### **Alternatives**

Reasonable alternatives may include:

- Wax softening drops or oil alone.
- Ear irrigation, where clinically appropriate.
- Manual removal with instruments alone.
- Choosing not to proceed with wax removal.

## Ear Microsuction Consent Form

### Patient declaration and consent

By signing below, I confirm that:

- I have had the ear microsuction procedure explained to me.
- I have had the opportunity to ask questions and have received answers that I understand.
- I understand the expected benefits, possible risks, and reasonable alternatives.
- I understand that no guarantee has been made about the outcome of the procedure.
- I understand that, depending on the type, amount, or adherence of the wax, complete removal may not be possible in one visit and I may require one or more repeat appointments.
- I consent to 1 Health performing ear microsuction on the ear or ears discussed with me.

**Ear(s) to be treated:** Left / Right / Both

**Patient name (print):** \_\_\_\_\_

**Patient signature:** \_\_\_\_\_

**Date:** \_\_\_ / \_\_\_ / \_\_\_\_

**If signed by parent / guardian / authorised representative:**

**Name:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_ / \_\_\_ / \_\_\_\_