## Chronic Ear

**Patient Name:** 
**Date of Birth:** 
**Age:** 
**Left**  **Right**  **MRN #:** 
**Date of Surgery:** 
**Time:**  
**Surgeon:** AJ +  
**Facility:**

### Diagnosis
- Acquired Atresia / Stenosis
- Cholesteatoma
- Chronic Aticoantral Otitis Media
- Chronic Mastoid Cavity Infections
- Chronic Tubotympanic Otitis Media
- Conductive Hearing Loss
- Mixed Hearing Loss
- Other: _______

### Procedure
- CWD Tympanomastoidectomy / No OCR
- CWD Tympanomastoidectomy / OCR
- ICW Tympanomastoidectomy / No OCR
- ICW Tympanomastoidectomy / OCR
- Mastoidectomy
- Middle Ear Exploration
- Obliteration / EAC Closure
- Radical Mastoidectomy
- Staged OCR
- Tympanoplasty
- Tympanoplasty / OCR
- Other: __________

### Anesthesia
- General
- Local
- MAC

### Speculum Size
- 4 4.5 5 5.5 6 6.5 7 7.5 8 NA

### Approach
- Transcanal / Tympanomeatal Flap
- Transcavity / Tympanomeatal Flap
- Postauricular / Tympanomeatal Flap
- Postauricular / Vascular Strip
- Postauricular / No Canal Incisions
- Other: __________

### Surgery
- Primary
- Planned Second Stage
- Revision AJ
- Revision Elsewhere __________

### TM Perforation
- None
- Small (< 10%)
- Medium (10-40%)
- Large (> 40%)
- Attic

<table>
<thead>
<tr>
<th>Tympanosclerosis</th>
<th>Cholesteatoma</th>
<th>Middle Ear Mucosa</th>
<th>Stapes</th>
<th>Mastoid</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tymanosclerotic</td>
<td>None</td>
<td>Normal</td>
<td>Normal</td>
<td></td>
</tr>
<tr>
<td>Tymanoplastic</td>
<td>None</td>
<td>Diseased</td>
<td>Fixed</td>
<td></td>
</tr>
<tr>
<td>Tymanoplasty</td>
<td>None</td>
<td>Granulation Tissue</td>
<td>Partially Eroded Superstructure</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>None</td>
<td>Recurrent</td>
<td>Mobile Footplate</td>
<td></td>
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<tr>
<td></td>
<td>None</td>
<td>Residual</td>
<td>Stapedectomy</td>
<td></td>
</tr>
</tbody>
</table>

### Middle Ear Mucosa
- Normal
- Diseased
- Granulation Tissue

### Cholesteatoma
- None
- Middle Ear
- Middle Ear / Attic
- Attic / Mastoid
- Middle Ear / Attic / Mastoid
- Other: __________

### Chorda Tympani
- Intact
- Stretched
- Sectioned
- Absent

### Facial Nerve
- Normal
- Exposed Mastoid
- Exposed Tympanic
- Exposed Iatrogenic

### Fistula
- None
- Horizontal SCC
- Cochlea
- Other: __________

### Lateral Chain
- Normal
- Medialized
- Fixed
- Eroded
- Dislocated
- Absent
- Congenital
- Discarded
- Other: __________

### Lateral Chain
- Malleus
- Incus

### Silastic
- Name:

<table>
<thead>
<tr>
<th>Silastic Name</th>
<th>Size</th>
<th>Location</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>0.005&quot;</td>
<td>Middle Ear</td>
</tr>
<tr>
<td></td>
<td>0.02&quot;</td>
<td>Scutum</td>
</tr>
<tr>
<td></td>
<td>0.04&quot;</td>
<td>Middle Ear / Facial Recess</td>
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</tbody>
</table>

### Meatoplasty
- Name:

<table>
<thead>
<tr>
<th>Meatoplasty Name</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>½&quot; Nugauze – Needle Cap</td>
</tr>
<tr>
<td></td>
<td>Sutured</td>
</tr>
<tr>
<td>Other: __________</td>
<td></td>
</tr>
</tbody>
</table>

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### Other:

- __________
- __________
- __________

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