**STANDARDIZED CHECKLIST FOR OTOSCOPY PERFORMANCE EVALUATION (SCOPE)**

Trainee Name/ID

Assessor Name

Examination Date

**Score**

General Examination:\_\_\_\_\_\_\_\_\_\_\_

Cerumen Removal:\_\_\_\_\_\_\_\_\_\_\_

Pneumatic Otoscopy:\_\_\_\_\_\_\_\_\_\_\_

Diagnosis:\_\_\_\_\_\_\_\_\_\_\_

TOTAL:\_\_\_\_\_\_\_\_\_\_\_

Patient Age

GENERAL EXAMINATION

Discussion with caregiver:

1. ⁫Yes ⁫No Discussed the need for otoscopic assessment

2. ⁫Yes ⁫No Described the possible need to remove cerumen to view ear

3. ⁫Yes ⁫No Described positioning and the possible need for secure holding method

Equipment:

4. ⁫Yes ⁫No Selected appropriate size ear speculum for proper seal and comfort to patient, given child’s age/size Age\_\_\_ Size\_\_\_

Positioning:

5. ⁫Yes ⁫No Ensured appropriate position (including caregiver assisted) for patient based on age and/or developmental status of

 patient.

6. ⁫Yes ⁫No ⁫NA If needed, assured that child’s head was appropriately secured

7. ⁫Yes ⁫No NA If not able to perform step 6, asked for assistance from caregiver

Distraction Techniques:

8. ⁫Yes ⁫No Used distraction techniques appropriate for age/development stage.

Otoscopic Examination:

9. ⁫Yes ⁫No Inserted otoscope with dominant hand.

10. ⁫Yes ⁫No Stabilized otoscope either by one-handed or two-handed method

11. ⁫Yes ⁫No Manipulated auricle to facilitate view of TM

12. ⁫Yes ⁫No Stabilized otoscope by bracing finger/dorsum of hand on infant/child’s face or head

CERUMEN REMOVAL

13. ⁫Yes ⁫No Identified need for cerumen removal

14. Yes No Asked appropriately for assistance

15. ⁫Yes ⁫No Secured and/or distracts child prior to removal attempt

16. ⁫Yes ⁫No Stabilized head

17. ⁫Yes ⁫No Used scope appropriately to aid in removal of cerumen

18. ⁫Yes ⁫No Used appropriate instrument for removal

19. ⁫Yes ⁫No Able to remove some cerumen but inadequate for appropriate TM visualization

 \_\_removed via direct visualization via open-headed otoscope

 \_\_removed via indirect visualization

20. ⁫Yes ⁫No Appropriately identified that cerumen removal was inadequate for TM visualization

21. ⁫Yes ⁫No Able to remove adequate cerumen for appropriate visualization of TM

\_\_removed via direct visualization

 \_\_removed via indirect visualization

PNEUMATIC OTOSCOPY

22. ⁫Yes ⁫No Appropriately attaches insufflators to otoscope

23. ⁫Yes ⁫No Uses appropriate speculum size: Age\_\_\_\_\_ Size\_\_\_\_

24. ⁫Yes ⁫No Checks for airtight seal

25. ⁫Yes ⁫No Use insufflator with patient appropriately

DIAGNOSIS

Trainee Diagnosis:

Assessor Diagnosis: