## ENT Emergency Clinic at the Royal Cornwall Hospital

What?	Acute ENT presentations in systemically well patients (see table below)		
Who?	The clinic is run by ENT junior doctors with support from ENT middle grades & Consultants		
When?	Typically on Monday, Tuesday, Thursday & Friday every week		
Where?	ENT/Audiology Outpatient Department, RCHT		
How?	<ul> <li>Contact 1<sup>st</sup> On-Call for ENT via RCHT Switchboard (01872 250000)</li> <li>Face to face review or telephone assessment will be arranged</li> <li>It is important that an up to date telephone number is given for the patient and they are told to expect a phone call from our team</li> <li>Please provide a short referral letter (referrer and patient contact details, suspected diagnosis, treatment to date, relevant PMHx and medications) to be emailed at time of referral to <u>rch-tr.entacutereferral@nhs.net</u></li> <li>If we are unable to contact a patient following multiple attempts we will write to the patient and discharge them from our clinic. In this event, and if on-going symptoms, a further referral will be required.</li> </ul>		

Conditions Suitable for Emergency Clinic Review			
Otitis Externa	No improvement on first line topical treatment Canal oedema preventing adequate topical treatment		
Recurrent Epistaxis	For consideration of nasal cautery		
Foreign bodies	Suitability and timing of review will be triaged depending on composition of foreign body		
Sudden hearing loss	Screening audiology or formal audiology review will be arranged depending on availability		
Nasal fracture	For consideration of manipulation within 7-10 days post- injury time frame		
Superficial neck abscess	In systemically well patients		
Post-op wound issues	If secondary care review required		

## If referral to ENT Emergency Clinic is deemed unsuitable, the on-call doctor will advise a more appropriate alternative pathway (Please note: this may require further discussion with middle grade on call)

	Examples of Conditions <u>NOT</u> Suitable for Emergency Clinic Review (this list is not exhaustive – refer to RMS referral guidelines)	
Earwax	Refer to earwax policy on RMS guidelines	
Vertigo	Refer to dizziness pathway on RMS guidelines	
Tinnitus	Refer to tinnitus pathway on RMS guidelines	
Non-acute	hroat pain Refer to throat and neck guidelines on RMS guidelines	

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