1. Diabetic + ext ear furunculosis= Rx : Oral flucloxacillin
2. Syringing of the ear done >>> sudden onset of pain+ ruptured TM = immediate referaal to the specialist
3. h/ o vericella now complains of earache vesciles near pinna nd external ear = SHINGLES= oral Acyclovir
4. Progressive CD + pearly white mass + scarred ear drum = cholestetoma >> routine referral to the specialist for surgery
5. LVF 6 months back now complains of epistaxix = drug induced ( Aspirin)
6. Child in ICU with cellulititis >> Complains of epistaxis + Spleenomegaly. Cause of epistaxis = SEPSIS
7. Smoker + unilateral diplopia+ recurrent epistaxis+ wt loss>> Maxillary opacification seen on X-ray+ MAXILLARY ADENOCARCINOMA
8. Head trauma >> leakage of watery fluid from nose = ETHMOID BONE FX
9. Rx: Epistaxis= Pinch soft part of the nose
10. DVT+ neurological manifestation( facial numbness) = ACOUSTIC NEUROMA
11. Child with continuous stridor + mild fever + **drooling of saliva** + very ill>>> EPIGLOTITIS>> H. influenza>> Call anesthetist
12. Child with FB in ear ( plastic bead) + agitated >>> beast Rx refer to ENT for removal under GA
13. Post thyroidectomy >>> hoarseness after 6 hours of surgery + RECURRENT LARYNGEAL NERVE INJURED
14. Hoarseness of voice for 6 months of a school teacher >>>> SINGERS NODULE
15. 80 yr old smoker >> hoarseness (progressive ) + fever+ malaise + weight loss = Ca LARYNX
16. Unilateral conductive deafness>> eardrum obscured by brown mass>> WAX
17. Difficulty hearing in both ears + loss of lower frequency + family history present >>> paracusis Willisii >>> Otosclerosis ( Autosomal Dominat + bilatereral conductive deafness, pregnancy Rx: Stedectomy) As Graph
18. Meiner’s disease = TVS >>> low frequency hearing loss
19. 80 year old>>>difficulty in hearing>>>audiogram-marked high frequency hearing loss>>>can hear better in quiet surroundings =PRESBYCUSIS
20. 3 nose bleeds in the last two days + petechial hge + bruising over limbs and trunks = Platelet count
21. Nose bleed + GI bleed + talengectasia + Family history = HERIDITARY TALENGECTITIA >>> Inv Upper GI endoscopy
22. Repeated epitaxis+ menorrhagia+ family history+ clotting screen is n ormal . BT prolonged >>> Von Willibrand factoe assay
23. Warfarin gfro AF >>> epistaxis >>> check INR ( 2-3)
24. 65 yearold +epistaxis+ **perifollicular hemorrhages** + bruises over the limbs>>> Scurvy >>> Vit C assay
25. Intermittent tinnitus, vertigo, giddiness = meneire's disease
26. Bilateral conductive hearing loss>>>father similar history=OTOSCLEROSIS-A.D.
27. Sudden onset conductive hearing loss>>>brown mass=wax impaction
28. 52year old woman>>>3month history of increasing neck swelling>>> hoarseness>>> inspiratory and expiratory wheeze =CARCINOMA THYROID
29. H/o smoking 20 ciggs/day>>>2 month history of drooping eyelid+chronic cough+supraclavicular mass=PANCOAST TUMOUR
30. Tinnitus + muffled hearing+increased pressure in ear+ vertigo=MENIERE'S DISEASE
31. ventilated person >>>now extubated>>>develops hoaseness of voice>>>laryngoscopy normal=FUNCTIONAL DYSPHONIA
32. Drug abuser>>>weight loss 13kgs>>>cough+night sweats>>>hoarseness of voice>>>swelling in the neck+several non tender swellings in both side of the neck=TUBERCULOSIS
33. Teacher>>>hoarseness>>>circumscribed nodules on both vocal cords=VOCAL CORD NODULES
34. Painful sore swollen throat+ earache+difficulty in swallowing fluids+temp 39.7>>>treatment=inpatient parenteral antibiotics
35. Long-standing ear discharge >>>presents with fever, earache , anorexia, nausea, rigors>>>tenderness over mastoid>>>mastoiditis=ADMISSION FOR PARENTERAL ANTIBIOTICS
36. earache+pain in left maxilla>>>post root filling dental procedure >>>temp 37.8=maxillary sinusitis=ORAL AMOX+METRO
37. deafness in right ear after a swim>>>ear normal on examination>>>wax present>>>treatment=SYRINGING
38. acute pain and little bleed from the era after he sustained a blow to the ear>>>minimal blood in EAC+small perforation in tympanic membrane>>>next step>>>KEEP EAR DRY AND OBSERVE (OR PROPHYLACTIC ORAL AMOX)
39. furniture maker>>>anaesthesia of left cheek>>>repeated epistaxis=MAXILLARY ANTRAL CA
40. repeated epistaxis+ whistling on inspiration =SEPTAL PERFORATION>>>CAUSES:COCAINE , CHROME
41. sheep farmer>>>epistaxis+bleeding polyp from anterior nasal septum=ORF
42. old patient>>>epistaxis ×2hours>>>cause=HYPERTENSION
43. vertigo worsening on movement =BPPV>>>test=TILT TEST/HALPIKE MANOEUVRE
44. Painkiller for shoulder pain>>>tinnitus =SALICYLIC ACID LEVELS
45. blow behind ear>>>difficulty hearing+tinnitus =FRACTURE OF PETROUS TEMPORAL BONE
46. loss of corneal reflex+diminished hearing>>>ct-widened ear canal=ACCOUSTIC NEUROMA
47. unilateral sensory neural hearing loss =ACCOUSTIC NEUROMA
48. bilateral sensory hearing loss>>>resolves spontaneously =NOISE INDUCED HEARING LOSS
49. Family history of hearing loss>>>bilateral conductive deafness=OTOSCLEROSIS
50. bilateral sensory hearing loss=PRESBYCUSIS
51. sudden pain following ear syringing >> drum obscured with water and residual wax >>> Mx : same day referral to the specialist
52. travel history+ severe pain in both ears + swelling + redness around EAC + pain on pinna movement + TM normal >>> OTITIS EXTERNA>> Rx: topical GENTAMYSIN + oral CIPROFLOXACIN
53. sudden onset of pain + deafness in the ear + vescicular rash on the right side of the surface of the ear drum + Vescicles in the auditory canal >> Ram Say Hunt Syndrome >> Rx: Oral Acyclovir
54. Repeated h/o of pain and d/c from childhood + white mass visible thru drum>>> ??? same day referral to the specialist
55. Warfarin for prosthetic valve >> presents with severe nose bleed >> INR =10 + haemodynamically compromised >>> PROTHOMBIN COMPLEX CONCENTRATE.
    * + FRESH FROZEN PLASMA >>> FOR STABLE PT
      + Vit K >> Warfarin toxicity in stable pt
56. Intermittent epitaxis + crusting over ant nasal mucosa= CHROM=NIC INF VESTIBULITIS>> Rx: Apply neomysin cream
57. no history of bleeds>>> now presents with epistaxis + small haematoma in the nasal septum=REASSURANCE (if large=incision and drainage)
58. Before leaving house >>>feels out of breath +room goes round=ANXIETY
59. Atrial fibrillation +attack of vertigo+confusion which lasted for 2-3=TIA
60. Recurrent episode of TVS + deafness increases as vertigo settles=MENIERE'S
61. Vertigo without deafness>>>following URTI=labyrinthitis
62. traumatic head injury>>>nose bleed+ clear fluid>>>diagnosis-CSF RHINORRHOEA >>>ethmoid bone fracture
63. epistaxis 9 days after polypectomy>>>tender over nostril+febrile=SEPSIS
64. facial pain+recurrent nose bleeds for four weeks>>>xray-opacification of right maxillary antrum=ADENOCARCINOMA OF MAXILLARY SINUS
65. recurrent nose bleeds ×1year +splenomegaly=
66. Short history of earache+rhinorrhoea+pink left ear drum+ temp 38=viral infection>>>PARACETAMOL AND REVIEW
67. previous history of URTI +mild righ era ache+wax impaction>>>management =ERA SYRINGING
68. Persistent ear infection following 7 day antibiotics treatment +left ear drum dull amd scarred +purulent discharge=suppurative otitis media=CO AMOXICLAV
69. 5 day history of temp and ear ache>>>right ear drum red>>> Otitis media= amoxicillin
70. Child+ foreign body in ear>>>does not allow for examination =REMOVE UNDER GA
71. Gentamycin=ototoxicity
72. Poor personal hygiene>>>hearing loss after shower=WAX OBSTRUCTION
73. Cornmeal anaesthesia +SNHL+ xray- widening of internal acoustic meatus=ACOUSTIC NEUROMA
74. .Bruising to mastoid process+ hearing loss= petrous temporal fracture
75. return from spain with ear ache+pus in ear canal>>> otitis externa=gentamycin e/d
76. Red painful right ear following rugby match>>>erythematous pinna=PARACETAMOL
77. Pain in right ear following URTI>>>rhinorrhoea+pink tympanic membranes=viral=PARACETAMOL
78. Temperature, lethargy, red bulging inflamed tympanic membrane =otitis media=AMOXICILLIN
79. Bbb
80. 48 hour earache+high temp >>>purulent discharge which relieves pain>>>otitis media=AMOXICILLIN
81. 81.ct scan=loss of aeration of middle ear cleft+ mastoid air cells+middle ear flood>>>bilateral hearing loss=OTITIS MEDIA WITH EFFUSION
82. ct scan of petrous bone=normal mastoid and middle ear+ cochlea appear hyper radio-dense + cochlear duct narrowed on both sides + discrete areas of rarefaction in cochlear bone=PAGETS DISEASE OF PETROUS BONE
83. Ct scan =soft tissue mass within the attic +extensive destruction of malleus and incus + mastitis air cells opacified + horizontal facial canal erosion +LCC eroded =CHOLESTEATOMA
84. HEREDITARY TELENGECTASIA=heavy nose bleeds + GI bleeds+ telengectasia (prominent small veins on lips + family history (3/4)
85. Cocaine abuse =minor bleed on nose blowing+large septal defect
86. Acute leukaemia +nose bleeds+ lyphadenopathy splenomegaly=ACUTE LEUKAEMIA
87. .INFECTIVE VESTIBULITIS=numerous nose bleeds + extensive crusting of nares (TOPICAL NEOMYCIN )
88. Hypertension +ACEinh +epistaxis + anterior septum cauterization =PROMINENT BLOOD VESSELS seen
89. BPPV=dizziness on postural change=TILT TABLE TEST
90. CHOLESTEATOMA=repeated ear infection +progressive conductive hearing loss + attic crust
91. NASOPHARYNGEAL TUMOUR =old age+ unilateral otalgia + signs of otitis media+ recurrent epistaxis
92. wax impaction= unilateral deafness + dark brown mass obscuring ear drum
93. MENIERE'S DISEASE= rotatory vertigo+tinnitus+ low frequency hearing loss in right ear
94. 81 year old woman>>> high tone hearing loss=PRESBYCUSIS
95. mumps=18 year old /adolescent + smooth tender swelling extending from ear to angle of the jaw + temp=38.5
96. Suspicion of acoustic Neuroma=MRI HEAD =vertigo +deafness+tinnitus+ right sided facial numbness
97. UNILATERAL RECURRENT LARYNGEAL NERVE INJURY= hoarseness of voice+ immobile vocal cord on one side
98. ACUTE SINSUSITIS =supra orbital pain+ tenderness over maxilla+ mild fever
99. rugby player+tender red ear+tympanic membrane normal=PARACETAMOL
100. Left sided sensory neural hearing loss+tinnitus=ACOUSTIC NEUROMA=MRI BRAIN
101. NASOPHARYNGEAL CARCINOMA=old age+long history of smoking and alcohol intake+ nasal obstruction +epistaxis +diplopia+otalgia+conductive deafness
102. MAXILLARY SINUSITIS=right sided facial pain following cold
103. SECRETORY OTITIS MEDIA(GLUE EAR) = young child raising the volume of TV+ not responding to his mother+ o/e dull greyish tympanic membrane + no shadow of handle of malleus
104. old age+History of weight loss+ hoarseness of voice+ ct shows opacity in the right upper mediastinum >>>appropriate inv=LN BIOPSY
105. OTOSCLEROSIS=A.D.+middle aged man+bilateral conductive hearing loss
106. Pregnancy+ bilateral conductive hearing loss=otosclerosis =measles
107. NASOPHARYGEAL CARCINOMA =25 year history of smoking+progressive hoarseness of voice+ difficulty in swallowing +episodes of hemoptysis + CANNABIS USER
108. SINUS SQUAMOUS CELL CARCINOMA= chronic sinusitis+ nasal obstruction+ blood stained nasal discharge +cheek swelling+ epiphora+ ptosis+ diplopia + maxillary pain
109. NASAL POLYP=asthmatic patient + post nasal discharge + bilateral painless nasal blockage (sampters triad=aspirin+asthma+nasal polyp)
110. .hypoglossal nerve lesion= deviation on tongue on same side on protrusion
111. tender ear+sudden onset of earache=otitis externa
112. Old woman +left sided facial weakness + painful ear ×48hours+ painful pustules in ear canal and ear drum=HERPES ZOSTER INFECTION
113. Old woman +left sided facial weakness + painful ear ×48hours+ painful pustules in ear canal and ear drum=HERPES ZOSTER INFECTION (ACYCLOVIR+PREDNISOLONE)
114. Swelling in the lower pole of parotid gland for the last ten years +o/e firm in consistency =PLEOMORPHIC ADENOMA (very slow growing tumour)
115. OTITIS MEDIA=URTI +fever+ earache + dull tympanic membrane
116. hypertensive+severe nose bleed>>>not controlled by anterior packing =DO POSTERIOR NASAL PACKING