Specification for OTORHINOLARYNGOLOGY (ENT) REPORTS

The European Regulations and UK CAA’s Guidance Material for fitness decision, acceptable treatments and required investigations (if specified) can be found in the medical section of the CAA website (www.caa.co.uk/medical). For many conditions, there are also flow charts available for guidance on the assessment process.

The following subheadings are for guidance purposes only and should not be taken as an exhaustive list.

1. Diagnoses

2. History
   - Presenting symptoms and date of onset
     - Otologic (e.g. deafness, tinnitus, vertigo, otalgia, discharge, fever, barotrauma)
     - Nasal (e.g. obstruction, discharge)
     - Throat/larynx
   - Mechanism of injury or trauma
   - Circumstances surrounding onset, precipitating factors
   - Past history and family history of ENT disorders
   - Effect on daily activities/duties of working role, including altitude pressure changes and balance/orientation

3. Examination findings relevant to condition (as applicable)
   - Eustachian tubes (Valsalva manoeuvre)
   - Tympanic membrane integrity (perforations)
   - Hearing function Weber and Rinne Tests
   - Vestibular function
   - Oropharynx

4. Findings of Investigations Performed (as applicable)
   - Pure tone audiometry - required for all cases of hypoacusis
     - Up to date audiogram required post treatment when symptoms fully resolved
     - Tympanometry
   - Imaging reports (CT, MRI)
   - Histology reports
   - Other procedures and investigations

5. Treatment
   - Recent past and ongoing treatment must be detailed
   - Current and recent past medications (dose, frequency, start and finish dates)
   - Confirmation no side effects from medication
   - Surgical reports

6. Follow up and further investigations/referrals planned or recommended
   - Anticipated follow up/frequency of clinical reviews and investigations
   - Prognosis and risk of recurrence
   - Confirmation of full recovery at date of report

7. Clinical Implications
   - Any concerns regarding disease progression, treatment compliance or risk of sudden incapacity, difficulties with environmental pressure change or balance/orientation.