## DISEASES OF THE EAR, NOSE AND THROAT

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III. ADDENDUM
CERUMEN (380.4)

CERUMEN (380.4)

CRITERIA → Asymptomatic; partial obstruction of canal. → N/A → Complete obstruction of canal →

ACTION CLEAR → CLEAR WITH RESTRICTIONS → UNTIL: DEFER →

RESTRICTIONS/DEFER

RATIONALE Benign condition

MEDICAL INFORMATION NEEDED:

Generic Information

Ear, Nose & Throat
CHOLESTEATOMA (385.30), EXCISION OF (20.51), RECURRENT (383.32)

**CRITERIA**
- N/A
- Cholesteatoma surgically removed 1 yr. without recurrence, hearing WNL, CAT Scan clear.
- Cholesteatoma, current, or post surgery < 1 yr.
- Cholesteatoma, progressive, invasive, recurs after surgery

**ACTION**
- CLEAR
- CLEAR WITH RESTRICTIONS
- DEFER
- MNQ

**RESTRICTIONS/DEFER**
- Approved BC ENT for F/U.
- Post surgery 1 yr., CAT Scan clear.

**RATIONALE**
- Cholesteatoma is a cyst-like non-malignant growth that grows in the inner ear, destroying the structures of the inner ear. It can be successfully removed surgically in 50-80% of cases without recurrences. It can also invade the mastoid and then it is difficult to remove all parts.
- Treatment cannot be supported in PCMU's.

**MEDICAL INFORMATION NEEDED:**
- Generic information and ENT evaluation
- CAT Scan to R/O recurrence.
Reading an audiogram:

<table>
<thead>
<tr>
<th>250</th>
<th>500</th>
<th>1000</th>
<th>2000</th>
<th>4000</th>
<th>6000</th>
<th>8000</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>0-20</td>
<td>0-25</td>
<td>30-50</td>
<td>50-70</td>
<td>70-85</td>
</tr>
</tbody>
</table>

The boxes marked * represent the levels at which speech is understood. We screen according to the decibel levels recorded therein:

- 0-20: Within normal limits.
- 0-25: Borderline normal.
- 50-70: Moderate hearing loss.
- 70-85: Severe hearing loss.
- 90-above: Profound hearing loss.

We can accept applicants with readings up to 50. A 50 in all three boxes normally indicates the need for a hearing aid.

6. **Perforated Tympanic Membrane.**
   a. **Current.** PIE/ENT evaluation to include cause, symptoms, treatment, need for surgery, risk of complications, need for periodic evaluation.
   b. **Resolved.** Clear.

7. **Cerumen** (noted on exam).
   a. **Complete obstruction of canal.** Defer until resolved.
   b. **Asymptomatic, partial obstruction of canal.** Clear.
HEARING AID (95.49), HEARING DEFICIT (389.), CONGENITAL DEAFNESS (389.9)

**CRITERIA**

1. Stable hearing.
2. Deficit with or without hearing aid.

**ACTION**

- CLEAR
- CLEAR WITH RESTRICTIONS
- DEFER
- MNQ

**RESTRICTIONS/DEFER**

1-2) Notify Placement of deafness or degree of deficit if appropriate.

**RATIONALE**

**MEDICAL INFORMATION NEEDED:**

If \( \geq 30 \text{ db} \) hearing loss on audiogram: ENT evaluation to include generic information and ENT evaluation to include etiology; likelihood of progression, aggravating factors, functional limitations, need for periodic examination, and need for hearing aid in next 3 yrs.

<table>
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<tr>
<th>Component</th>
<th>Decibel Level</th>
<th>Criteria</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>ENT</td>
<td>0 - 20 WNL</td>
<td>Stable hearing deficit w/wo hearing aid</td>
<td>CLEAR</td>
</tr>
<tr>
<td>20 - 25</td>
<td>Borderline</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30 - 50</td>
<td>Mild hearing loss</td>
<td></td>
<td></td>
</tr>
<tr>
<td>70 - 85</td>
<td>Severe hearing loss</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&gt; 85</td>
<td>Profound hearing loss</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


Ear, Nose & Throat

ENT-3
MALIGNANCIES OF THE EAR (160.1), NOSE (160.0), AND THROAT (146 - 148)
HYOPHARYNX (148), LARYNX (161), TONSIL (146.0)

**CRITERIA**

- All types/sites 5 yrs. post all treatments cancer free no difficulty with swallowing.
- N/A
- All sites or types, < 5 yrs. post surgery, radiation and/or chemo.

**ACTION**

- CLEAR
- CLEAR WITH RESTRICTIONS
- DEFER
- MNQ

**RESTRICTIONS/DEFER**

The most common malignancy of the ENT is squamous cell cancer of the tonsil and hypopharynx. The cancer usually remains localized for long periods. Head and neck cancers are closely associated with alcohol and tobacco use (85% of patients).

Stage I: Primary neoplasm < 2 cm. - 90% 5 yrs. survival rate.

Stage II: Primary lesion < 2 cm., < 4 cm or 2 areas in site involved - 75% 5 yr. survival rate.

Stage III: Primary neoplasm > 4 cm or 3 areas in site involved - 45% - 75% 5 yr survival rate.

Stage IV: Massive cancer or with metastases - < 35% 5 yr survival rate.

**MEDICAL INFORMATION NEEDED:**

- Ear, Nose $/. Throat

**Restrictions/Deferral:**

Difficulty swallowing.

UNTIL:

- Post all treatment 5 yrs., no evidence of recurrence.

Places PCV at risk for aspiration.

Treatment of choice is surgery and/or radiation, and sometimes chemotherapy.

**ENT Evaluation:**
The most common malignancy of the ENT is squamous cell cancer of the tonsil and hypopharynx. The cancer usually remains localized for long periods. Head and neck cancers are closely associated with alcohol and tobacco use (85% of patients).

Stage I: Primary neoplasm < 2 cm. - 90% 5 yr. survival rate.

Stage II: Primary lesion < 2 cm., < 4 cm or 2 areas in site involved - 75% 5 yr. survival rate.

Stage III: Primary neoplasm > 4 cm or 3 areas in site involved - 45 - 75% 5 yr survival rate.

Stage IV: Massive cancer or with metastases - < 35% 5 yr. survival rate.

Treatment of choice is surgery and/or radiation, and sometimes chemotherapy.

Medical Information Needed: ENT evaluation.
### Criteria
- 1) Resolved > 6 mos. ago, hearing WNL.
- 2) Post Mastoidectomy > 6 mos. hearing WNL.

### Restrictions/Deferral
- N/A

### Rationale
- 1) Recent mastoiditis < 6 mos.
- 2) Mastoidectomy < 6 mos.

### Action
- CLEAR
- CLEAR with restrictions
- DEFER

### Until:
- 1) Per. > 6 mos. post infection.
- 2) Per. > 6 mos. post surgery.

### Medical Information Needed:
- Generic information.
- ENT evaluation if within 2 yrs.
- Audiogram.

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Ear, Nose & Throat

5/4/93
### Meniere's Disease Criteria

**CRITERIA**

1. Asymptomatic, last episode > 1 yr. ago med. free
2. Resolved post surgery asymptomatic.
3. Occasional mild episodes, easily controlled with PRN meds.

**ACTION**

- CLEAR
- CLEAR WITH RESTRICTIONS
- DEFER

**Restrictions/Defeer**

- 1) Severity decreased.
- 2) Post surgery > 1 yr.

**Rationale**

Meniere's Disease can be a debilitating condition that interferes greatly with ability to function. Symptoms may be vertigo, tinnitus, hearing loss.

**Medical Information Needed:**

ENT evaluation, and Audiogram, if within 5 yrs.

8/9/93
OTITIS MEDIA ACUTE (381.0), CHRONIC (382.3), OR SEROUS (381.01)
MYRINGOTOMY (20.0), TYMPANOPLASTY (19.5), MYRINGOTOMY WITH INSERTION OF TUBES (20.01)

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<tr>
<th>CRITERIA</th>
<th>ACTION</th>
<th>RATIONALE</th>
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<td>→ 1) Acute, isolated incident resolved</td>
<td>CLEAR</td>
<td>Trauma-induced perforated TM usually heal in 2 mos. If persists after 2 mos. may require surgery.</td>
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| → 2) Post Tympanoplasty > 6 mos., healing stable. | CLEAR WITH RESTRICTIONS | MEDICAL INFORMATION NEEDED: Generic Information
ENT evaluation if chronic Otitis in last 2 yrs. |
| → 3) Post Myringotomy > 3 mos. | DEFER | ENT- 7 |
| → 4) Chronic Otitis, resolved, no episode within last year | | |
| → 5) Serous Otitis Media, resolved. | | |
| → 6) Post traumatic perforated TM, healed > 3 mos. | | |
| → 1) Myringotomy current < 3 mos. post. | N/A | |
| → 2) Acute OM | | |
| → 3) Chronic Otitis, exacerbation within last 1 yr. | | |
| → 4) Serous Otitis media, current | | |
| → 5) Tympanoplasty < 6 mos. post | | |
| → 6) Post traumatic perforated TM < 3 mos. | | |
| UNTIL: | | |
| 1) Post surgery > 3 mos. | | |
| 2&4) resolved | | |
| 3) Episode free for 1 yr. | | |
| 5) Post surgery 6 mos. graft accepted, requires 6 mos. to ascertain if graft will be rejected or accepted. | | |
| 6) Healed, 3 mos. | | |

5/4/93 Ear, Nose & Throat
Tinnitus (388.30)

**CRITERIA**
- 1) Single episode resolved.
- 2) Recurrent or continuous cause treated and resolved.

**ACTION**
- CLEAR
- CLEAR WITH RESTRICTIONS
- MRB/MED ADVISOR

**RESTRICTIONS/DEFER**
- UNTIL: Cause diagnosed and meets criteria for Clear.

**RATIONALE**
Tinnitus is a symptom. The underlying pathophysiology must be identified, i.e., ototoxicity, hearing loss, labyrinthitis, ear neoplasms, cardiovascular diseases, head trauma.

**MEDICAL INFORMATION NEEDED:**
- Generic information.
- Current/recent symptoms:
  - ENT evaluation
- Audiology report
- Current/recent symptoms:
- ENT-8

Ear, Nose & Throat

5/4/93