



General Ear, Nose, Throat (ENT) Examination

Introduction
Wash your hands and wear PPE if appropriate
Introduce yourself to the patient including your name and role
Confirm the patient's name and date of birth
Briefly explain what the examination will involve using patient-friendly language
Gain consent to proceed with the examination
The patient should be in sitting position
Ask if the patient has any pain before proceeding
Throat
Inspect lips for ulcers, vesicles, angular cheilitis.
Ask the patient to open his mouth and breath through his mouth.
Use tongue depressors for examination and shine the light into oral cavity.
Examine Teeth, gingiva and buccal mucosa (look for dental caries, and lesions)
Inspect peltate, tongue, floor of mouth and retromolar area (look for ulcers, masses, discoloration)
Depress the tongue down gently by the tongue depressor.
Inspect the soft palate and uvula (for swelling, ulcers, asymmetry)
Inspect the tonsils (look for swelling, erythema, exudate) and assess the size
Inspect the Posterior pharyngeal wall (for swellings, erythema, ulcers, and Postnasal drip). Nose
Inspect the dorsum of the nose from front and sides (comment about deformities, scars,
swelling).
Shine the light toward the nose of the patient.
Carefully Lift the tip of the nose with your thumb and inspect both nasal cavities.
Use the nasal speculum appropriately (Carefully introduce it inside each nostril while it
closed then pull it out while open).
Comment about the patency of nasal cavity, position of the nasal septum, size of the
inferior turbinate, condition of the nasal mucosa and presence or absence of nasal polyps
or discharge.
Ear
Inspect anterior to ear and pinna (for lesion, swelling, erythema, deformity).
Inspect ear pinna for congenital deformities (e.g. microtia), swelling, erythema and deformity.
Gentilly pull out the pinna and palpate tragus for tenderness.
Retract the pinna forward then inspect and palpate mastoid (for swelling, erythema,
tenderness).
Choose appropriate size of ear speculum.
Palpate postauricular area for tenderness.
Chose appropriate size of ear speculum and hold the otoscope in appropriate way.
Insert the otoscope in the external meatus slowly and gently while you are pulling the
pinna upward, backward and laterally (downward in children).
Identify the finding on External auditory canal (swelling, erythema, wax, discharge).
Identify the findings on Tympanic membrane (erythema, fluids, pulge, perforation,
retraction).
Examine the other ear.
Note: A complete ENT examination includes Head and Neck Examination, Cranial
Nerves Examination, Endoscopic Examination, and Hearing Assessment.
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After examination

Ensure patient comfort, cover and thank the patient.

Provide explanations, address questions, and discuss the management plan with the patient.

Dispose of waste material following infection control standards. Do not forget to wash your hands.

Reference: Talley, N. J., & O'Connor, S. Clinical Examination: A Systematic Guide to Physicians Diagnosis, 9th Edition.

