

## AAO 12: Topical Ear Drop Monotherapy for Children with Acute Tympanostomy Tube Otorrhea

Percentage of patients age 6 months to 12 years of age at the time of the visit with a current diagnosis of an uncomplicated acute tympanostomy tube otorrhea who were prescribed or recommended to use topical antibiotic eardrops and NOT prescribed oral antibiotics for acute tympanostomy tube otorrhea.

Quality Domain: Effective Clinical Care

There is concern and evidence to support that oral antibiotics are inappropriately prescribed for acute uncomplicated tympanostomy tube otorrhea.

**Denominator:** All patients 6 months to 12 years of age at the time of the visit with a current diagnosis of an uncomplicated acute tympanostomy tube otorrhea.

## Denominator Exclusions: None

**Denominator Exceptions:** Medical reason for not prescribing/recommending topical antibiotic monotherapy or for prescribing oral antibiotics (e.g. patients with high fever, cellulitis of the ear or adjacent skin, children who are immunocompromised, oral antibiotic given for other concurrent condition including but not limited to streptococcal pharyngitis, bacterial sinusitis, pneumonia, pharyngitis, osteitis abscess, or other concurrent acute infection beyond the confines of the ear canal; patients who failed topical antibiotics by another clinician; concurrent diagnosis of acute suppurative otitis media effusion with intact drum); acute TTO persists, or worsens, despite antibiotic therapy; administration of ear drops is not possible because of local discomfort; TTO persists, or worsens, despite topical antibiotics (e.g. Administration of eardrops is not possible because of lack of tolerance by the child). System reason for not prescribing/recommending topical antibiotics (e.g. cost considerations prevents access to non-ototoxic topical antibiotic drops)

**Numerator:** Patients who were prescribed or recommended to use topical antibiotic eardrops and NOT prescribed oral antibiotics for acute tympanostomy tube otorrhea

Measure Type: Process, Traditional, Proportional, High Priority

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