



AAO 26: Otitis Media with Effusion: Diagnostic Evaluation - Assessment of Tympanic Membrane Mobility

Percentage of patient visits for those patients aged 2 months through 12 years with a diagnosis of OME with assessment of tympanic membrane mobility with pneumatic otoscopy or tympanometry

Quality Domain: Effective Clinical Care

This proposed measure on diagnostic evaluation of OME have emphasized the need to accurately diagnose OME and to differentiate OME from AOM. The hallmark of both conditions is fluid in the middle ear cavity; however AOM is associated with a bulging tympanic membrane and acute inflammation (pain, fever, erythema, otorrhea) whereas in OME the tympanic membrane may appear normal and there are no signs or symptoms of acute inflammation. Pneumatic otoscopy is especially useful in diagnosing OME because the tympanic membrane can be in a neutral or retracted position and the only sign of effusion can be reduced mobility. Pneumatic otoscopy has been recommended as the primary method for diagnosing OME because reduced tympanic membrane mobility correlates most closely with the presence of fluid in the middle ear.

Denominator: All patients aged 2 months through 12 years with a diagnosis of OME

Denominator Exclusions: None

Denominator Exceptions: Documentation of medical reason(s) for not assessing tympanic membrane mobility with pneumatic otoscopy or tympanometry
Documentation of patient reason(s) for not assessing tympanic membrane mobility with pneumatic otoscopy or tympanometry

Numerator: Patient visits with assessment of tympanic membrane mobility with pneumatic otoscopy or tympanometry

Measure Type: Process, Traditional, Proportional,

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