Purpose

The purposes of this procedure are to treat ear infections, to administer medications into the auditory canal, and to soften wax deposits.

Preparation

- 1. Review the resident's care plan to assess for any special needs of the resident.
- 2. Assemble the equipment and supplies as needed.
- 3. Provide privacy.

Equipment and Supplies

The following equipment and supplies will be necessary when performing this procedure.

- 1. Medicine dropper;
- 2. Cotton balls;
- 3. Solution (as prescribed)
- 4. Bowl (one-half full of warm water);
- 5. Cotton applicators; and
- 6. Personal protective equipment (e.g., gowns, gloves, mask, etc., as needed).

Steps in the Procedure

- 1. Place the equipment on the bedside stand or overbed table. Arrange the supplies so they can be easily reached.
- 2. Wash and dry your hands thoroughly.
- 3. Put on gloves.
- 4. Place the ear solution bottle into the bowl of warm water. Allow the solution to warm. DO NOT administer a cold solution in the ear unless ordered by the physician.
- 5. If the resident is sitting up, instruct the resident to tilt his/her head with the affected side up.
- 6. If the resident is bedfast, position the resident's head on the pillow so that the affected side is facing up.
- 7. Gently cleanse the external auditory canal with cotton applicators.
- 8. Draw medication into the dropper. Test it on the wrist to be sure it is warm.
- 9. Gently drop the medication into the ear. (Note: Do not let the tip of the ear dropper touch the ear or any other surface.) Replace the cap and keep the bottle tightly closed.
- 10. Grasp the auricle (flap of the ear) to straighten the canal and allow the medication to enter the ear.
- 11. If the resident complains of pain, cease the procedure and summon the nurse supervisor.
- 12. Place a small amount of cotton into the external auditory canal. (**Note**: This is to catch any medication that may run out. However, **do not block the ear canal**. Keep cotton in the lower part of the ear.)
- 13. Instruct the resident to remain in this position for 10-15 minutes.
- 14. Gently dry the ear with cotton balls if dripping occurs. (**Note**: Use only one cotton ball per wipe.)
- 15. Discard used cotton balls into designated container.
- 16. Remove gloves and discard into designated container. Wash and dry your hands thoroughly.
- 17. Clean your equipment and return it to its designated storage area (i.e., bedside stand, bathroom, etc.).

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Steps in the Procedure (continued)

- 18. Discard disposable equipment and supplies in designated containers.
- 19. Clean the overbed table and return it to its proper position.
- 20. Lower the bed into lowest position and place the siderails and the head of the bed in the appropriate position **as indicated in the resident's plan of care**.
- 21. Reposition the bed covers. Make the resident comfortable.
- 22. Place the call light within easy reach of the resident.
- 23. Wash and dry your hands thoroughly.
- 24. If the resident desires, return the door and curtains to the open position and if visitors are waiting tell them they may now enter the room.

Documentation

The following information should be recorded in the resident's medical record:

- 1. The date and time the ear drops were instilled.
- 2. The name and title of the individual(s) who instilled the ear drops.
- 3. The type of solution instilled in the ear.
- 4. All assessment data obtained concerning the resident's ear.
- 5. How the resident tolerated the procedure.
- 6. If the resident refused the treatment, the reason(s) why and the intervention taken.
- 7. The signature and title of the person recording the data.

Reporting

- 1. Notify the supervisor if the resident refuses the care.
- 2. Report other information in accordance with facility policy and professional standards of practice.

References	
MDS (RAPs)	O1, O2
Survey Tag Numbers	F311, F333
Related Documents	
Risk of Exposure	Blood-Body Fluids-Infectious Diseases-Air Contaminants-Hazardous Chemicals
Procedure Revised	Date: By:
	Date: By:
	Date: By:
	Date: By: