



**ThinkAskLearn**  
Health Professional Education

## Ears, Nose and Dental Emergencies

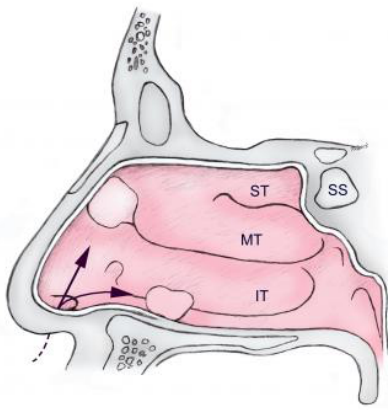
David Corkill  
Emergency Nurse Educator  
MEmergN, MAdvPrac (Hth Prof Edu), BN, Dip App Sc  
[www.thinkasklearn.com.au](http://www.thinkasklearn.com.au)



### Up your nose with a rubber hose

- Multiple objects – peas, corn, small balls, beads, lego!
- Kids between 2 and 5, males slightly more common
- Presents after witnessed or admitted insertion
- May complain of fullness in nose
- Running offensive discharge
- Incidental finding





<http://medicine.medscape.com/article/763767-overview>



AFP Volume 42, No.5, May 2013



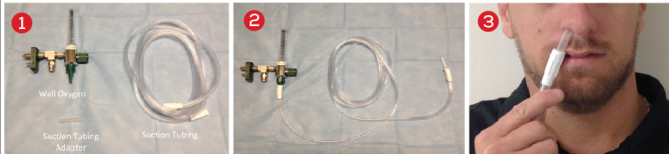
## Not just blowing in the mouth

- Occlude the unaffected nostril
- Parent then blows in the mouth until they feel the resistance caused by closure of the child's glottis
- Then the adult gives a sharp exhalation to deliver a short puff of air into the child's mouth
- Maybe repeated a number of times
- No reported incidence of tympanic membrane rupture or barotrauma
- Successful in approx 60% of cases

AFP Volume 42, No.5, May 2013

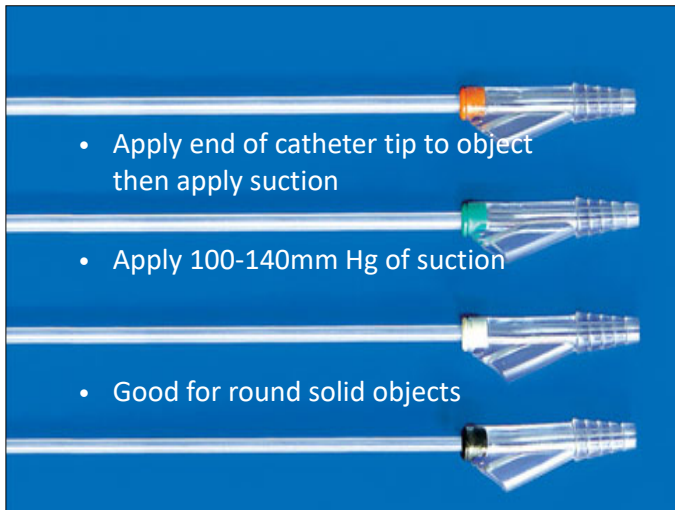


## Hi Flow Nasal Positive Pressure



- Titrate oxygen to 10-15 l/min
- 'Periorbital emphysema or blowing a globe out of its socket reflects a lack of understanding of the term titration.'
- Would need to have mouth closed ???

McNamee and Jeong 2014



[https://upload.wikimedia.org/wikipedia/commons/0/0b/Uberaria\\_nf\\_mae.jpg](https://upload.wikimedia.org/wikipedia/commons/0/0b/Uberaria_nf_mae.jpg)





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**Epistaxis**

From Greek – A dripping

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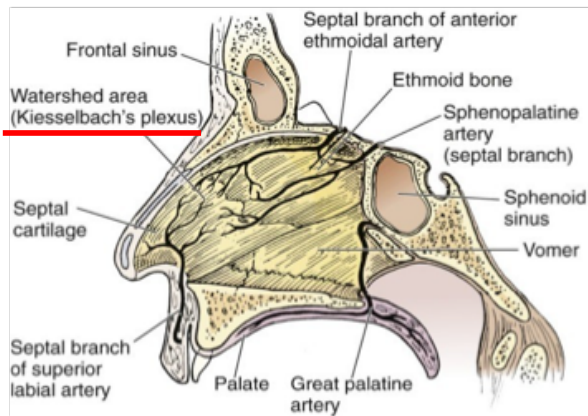


MYTH BUSTED



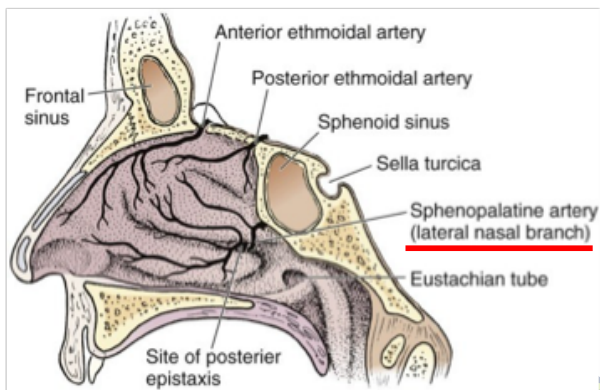
## Anterior Bleeds

Approx 85-90% of Nose bleeds



## Posterior Bleeds

Approx 10-15% of Nose bleeds





**EDExam**  
THE ED FELLOWSHIP EXAM RESOURCE

<http://edexamfellowshipexam.com/2014/07/2015-ways-to-use-a-tongue-depressor/>



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<http://thehealthscience.com/hsattacha/22529/11-1147630613-01.jpg>

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## Questions to ask the patient?

- Whilst applying pressure to nose
- Previous epistaxis episodes
- Previous nasal cauterizing events
- Any ongoing nasal problems
- Do you see an ENT surgeon regularly
- Additional medical history
- Anticoagulant medications
  - Plavix, Warfarin, Pradaxa



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- Trauma
  - Direct blunt trauma
  - Facial fractures
  - Intranasal lacerations
  - Digital trauma
  - Foreign body insertion
- Mucosal desiccation
- Chemicals
  - Cocaine
  - Ammonia
  - Acid fumes
  - Chromates
- Inflammation
- Allergy
- Infection
  - Viral upper respiratory infection
  - Sinusitis
- Wegener's granulomatosis
- Midline granuloma
- Nasal polyps
- Carcinoma of nose, sinuses, or nasopharynx
- Contributing Factors
  - Haematologic disorders
  - Primary clotting abnormalities
  - Hemophilia
  - Von Willebrand's disease
  - Thrombocytopenia or platelet dysfunction
  - Leukemia
  - Thrombocytopenia purpura
- Clotting abnormalities or platelet dysfunction with other diseases
  - Hepatic disease
  - Chronic renal failure
- Drug-induced clotting abnormalities, platelet dysfunction, or thrombocytosis
  - Salicylate
  - Chemotherapy
  - Coumadin therapy
- Vascular abnormalities
  - Hereditary hemorrhagic telangiectasia
  - Hemangioma
  - Arteriovenous malformation



## It is not hypertension!!!!

- Many patients are hypertensive with epistaxis
- Hypertension has being debunked as cause
  - Eur Arch Otorhinolaryngol. 2011 Dec;268(12):1749-53. Epub 2011 Jun 9.
  - Blood Press. 2003;12(3):145-8.
  - Int J Cardiol. 2009 May 29;134(3):e107-9. Epub 2008 May 21.
- Epistaxis causes hypertension



## MANAGEMENT AIMS

- Resuscitate the patient (Rare)
  - IV cannula, fluid resuscitation
- Establish site of bleeding
  - Anterior (90%), Posterior (10%)
- Stop the bleeding
  - Direct pressure, Packing, Drugs, Product
- Treat the cause
  - Consider reversing warfarin



## Stop the bleeding

- Direct pressure is 90% successful
- Vasoconstrictive agents on pledgets
  - Adrenaline with lignocaine
- Have suction available
- Chemical (Silver Nitrate) or Electrical Cautery (usually ENT)
- Packing
  - Many options



## ANNALS of Otolaryngology & Laryngology

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Impact Factor: 1.094 | Ranking: Otorhinolaryngology 29 out of 43 | 5-Year Impact Factor: 1.316  
Ranking: Otorhinolaryngology 25 out of 43

### Nasal Packing with Strips of Cured Pork as Treatment for Uncontrollable Epistaxis in a Patient with Glanzmann Thrombasthenia

Ian Humphreys, DO  
Sonal Saraiya, MD  
Walter Belenky, MD  
James Dworkin, PhD



## Summary

- Epistaxis is rarely but is potentially life threatening
- Hypertension is not a cause but patients are usually stressed
- Simple and direct pressure solves most episodes of epistaxis
- Packing noses presents multiple problems



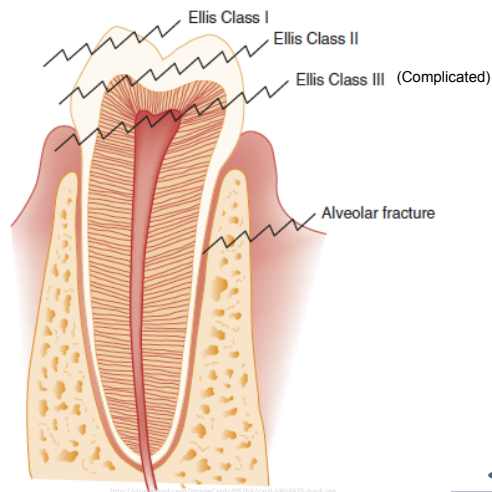
## Traumatic Dental Emergencies



## Dental crown fractures

- Ellis I - enamel only, painless
  - White fracture surface
- Ellis II - enamel and dentin, painful
  - Yellow fracture surface
- Ellis III (complicated) - pulp involved, painful
  - Red fracture surface



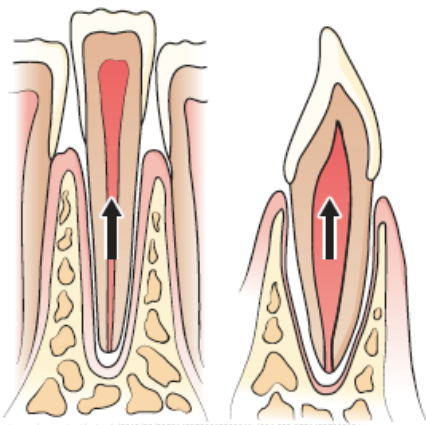


## Dental Trauma Terminology

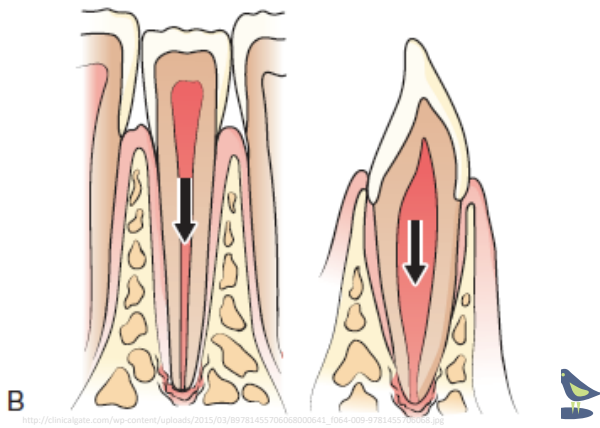
- Usual Conservative management
  - Concussion - pain but stable, nondisplaced
  - Subluxation - loose, nondisplaced
- Usual intervention required
  - Luxation - loose, displaced, malocclusion Can be intrusive, extrusive or lateral
  - Avulsion - completely removed from socket
  - Intrusion - forced into alveolar bone



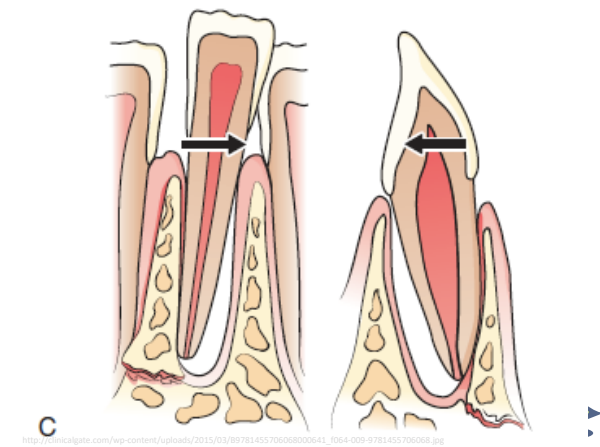
## Extrusive luxation



## Intrusive luxation



## Lateral luxation

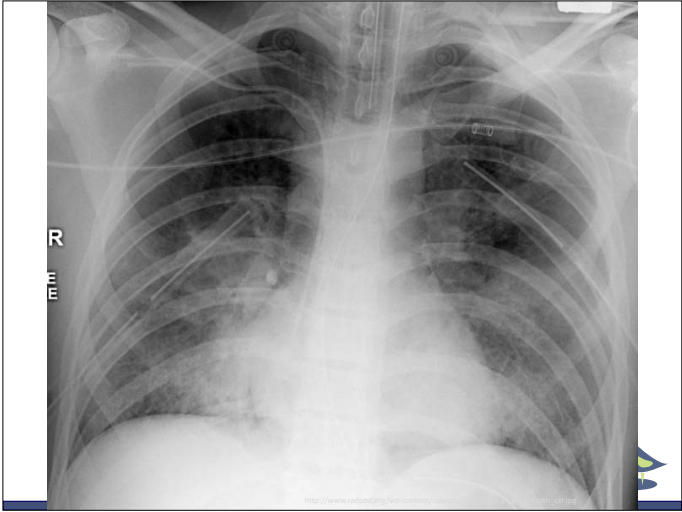


## Avulsion

- Where is the tooth?
- Consider XR if “missing”
- Reimplant or place tooth in physiologic medium ASAP
- Avoid traumatizing periodontal ligament
- Chance of successful reimplantation inversely proportional to time out of socket
- Handle by crown, not by root
- Rinse gently, place in milk or saline solution







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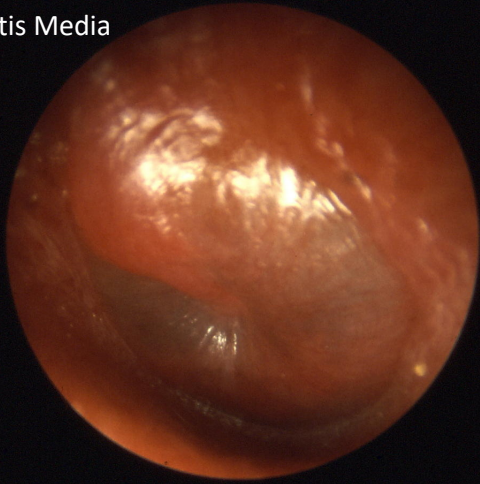
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Otitis Media



## Otitis Media

- Caused by virus and bacteria
- Common in the preschool child
- Peak incidence in 6-18 months
- 80% resolve spontaneously
- Pain is commonest problem
- Fever and being miserable



## Antibiotics for Otitis Media

- Most resolve spontaneously
- Only approx 25% caused by bacteria
- NNT 20 for pain reduction
- NNT 33 to prevent perforation
- NNT 11 to prevent opposite ear infection
- Risk vs Benefit for AB
- Diarrhoea, vomiting or rash common



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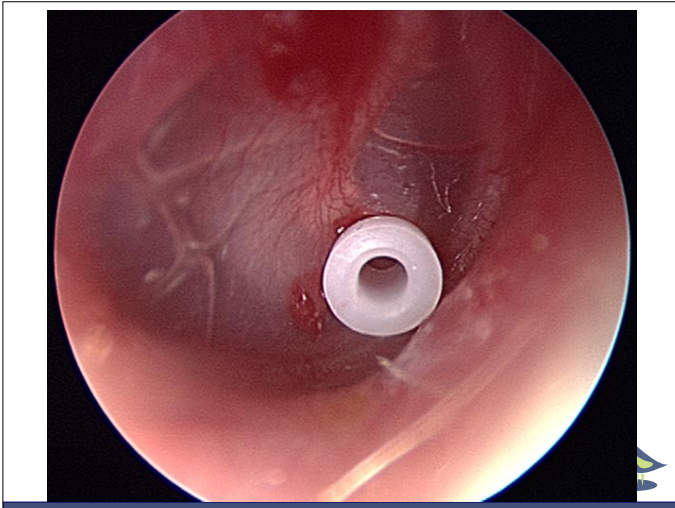
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