Purpose:

The purpose of ear irrigation is to remove an obstruction from the external auditory canal (wax or foreign body) and cleanse auditory canal secretions. It is a process of flushing the external ear canal with water or normal saline.

Affirmation:

Nursing staff is obligated to utilize medical equipment in the appropriate manner in order to ensure patient safety and treatment effectiveness.

General Guidelines:

1. The temperature of the water for irrigation purposes SHOULD BE LUKE WARM (100 F – 105 F). Lukewarm is neither hot nor cold. If the temperature is not right, it will cause the patient to be dizzy and even experience nausea.
2. Use a gentle irrigation stream.
3. The solution should be directed into the upper auditory canal.

Procedure:

1. Wash your hands and then explain the procedure to the patient/parent.
2. Place a protective covering over the patient’s shoulders.
3. Set up equipment: Can use a commercial ear irrigation device, an ear irrigation tray, or a 50-60 cc syringe (20-30 cc for children) with or without tubing.
4. Fill syringe with water making sure all air is removed from the syringe.
5. Patient position: Have patient in a sitting position and head bent slightly forward and tilt to the unaffected ear. Direct patient to hold emesis basin directly under ear.
6. Grasp auricle and pull upward and backward (adults) or downward and backward for children. (SEE ILLUSTRATION ON FOLLOWING PAGE)
7. Introduce the tip of the syringe approximately ¼ inch into the auditory canal.
8. Slowly and gently push the irrigating solution into the upper ear canal.
9. STOP the procedure if the patient c/o pain or dizziness.
10. AFTER the procedure, have the patient tilt head towards the affected ear to allow excess fluid to drain. Dry the outer ear with cotton balls.
11. AFTER the procedure, have the patient sit quietly for a few minutes prior to ambulating. Sometimes, ear irrigation can cause dizziness.
Directing the irrigating solution into the upper ear canal.