

Information regarding diagnostic ear procedures, observation/recording of eye movements, and therapeutic procedures

This is an informed-consent document which has been prepared to provide you with information concerning a variety of procedures performed at Chicago Dizziness & Hearing.

In a patient whose complaints include disequilibrium (dizziness, unsteadiness, etc.) or ear symptoms (such as hearing loss, ear fullness, tinnitus, hyperacusis, ear wax, discharge from the ear, ear pain, etc.), or whose history and/or physical examination suggests to the physician that there may be underlying ear disease, we may recommend a variety of diagnostic and/or therapeutic procedures.

<p>The diagnostic procedures include, but are not limited to, the following:</p> <ul style="list-style-type: none">• Video Frenzel oculography• Otoscopy using a handheld otoscope• Otoscopy using a binocular microscope plus speculum• Audiometry• Tympanometry• Otoacoustic emissions• Brainstem auditory evoked responses• Vestibular evoked myogenic potentials• Videonystagmography• Rotatory chair testing• Electrocochleography• Computerized dynamic posturography	<p>The therapeutic procedures include, but are not limited to, the following:</p> <ul style="list-style-type: none">• Removal of earwax or foreign bodies from the ear using irrigation, vacuum suction or instruments• Physical therapy, including canalith repositioning maneuvers and other vestibular rehabilitation
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The **potential benefit** of these procedures is primarily that they facilitate diagnosis.

The main **risks** of these procedures include, but are not limited to, the following:

- The procedure may fail to obtain the expected diagnostic information.
- Discomfort in the form of loud sounds.
- Discomfort in the form of dizziness.
- Discomfort in the form of irritation of the ear from instrumentation.
- Abrasion or bleeding of the external auditory canal (not the eardrum).
- Perforation of the eardrum. While this risk exists, it is extremely rare.

A patient is not obliged to undergo any of these procedures, even if the physician recommends them. The main **risk of not undergoing the procedures** is that the physicians will be unable to obtain information relevant to diagnosis and treatment.

The main **alternative to undergoing the procedures** is simply proceeding without the information that the results would provide, while being aware that the diagnostic uncertainty may interfere with medical management.

These **procedures are performed by clinic staff**, including technicians, audiologists and physicians. The staff member, at his or her discretion, may seek to obtain assistance from other staff members as he or she considers advisable.