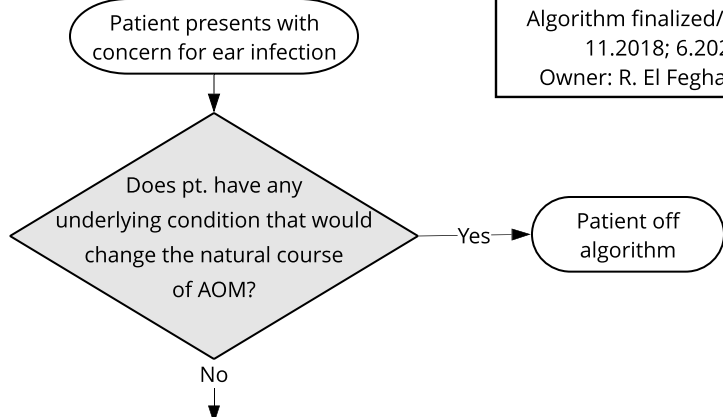


Underlying conditions that may alter the natural course of AOM include, though are not limited to:

- Presence of tympanostomy tubes
- Anatomic abnormalities (including cleft palate)
- Genetic conditions with craniofacial abnormalities (such as Down Syndrome)
- Immune deficiencies
- Presence of cochlear implants

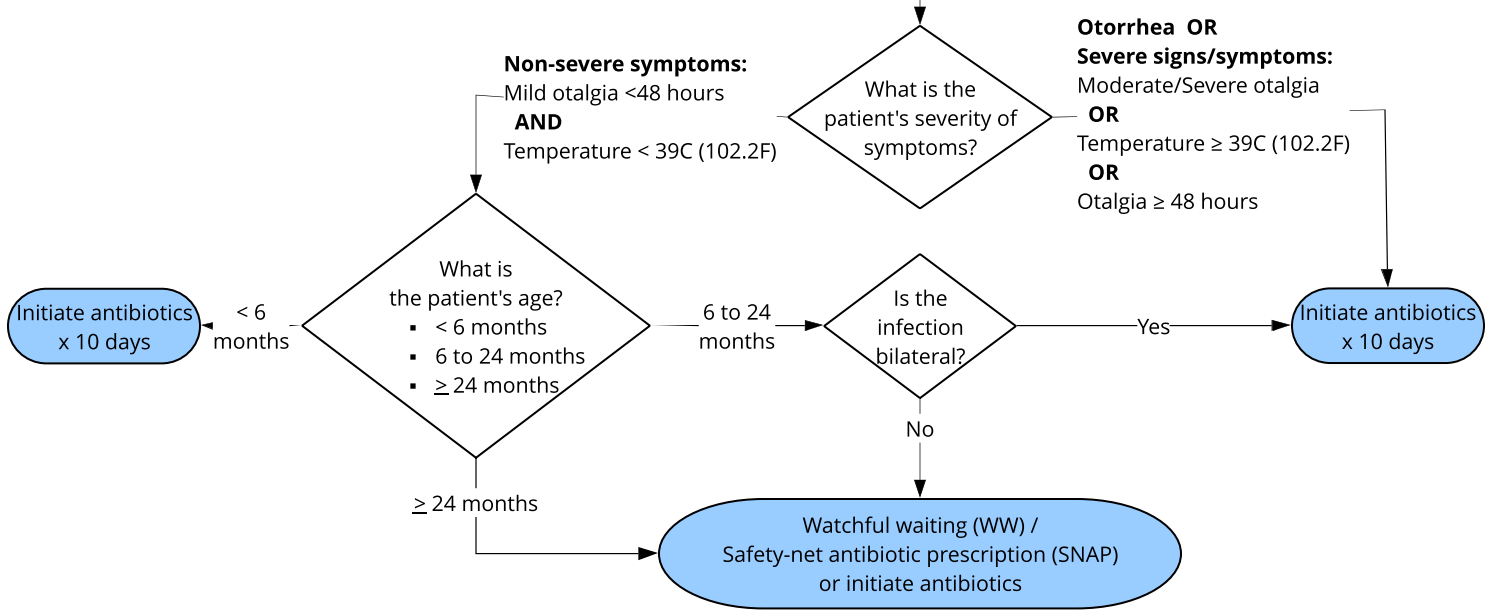
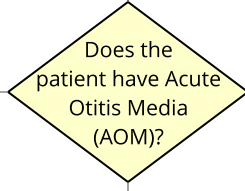


Criteria for diagnosis of AOM:

- Middle ear effusion
- **PLUS one** of the following:
 - moderate/severe bulging of TM
 - new onset otorrhea not caused by otitis externa
 - mild bulging of TM and 48 hours of otalgia
 - mild bulging of TM & intense erythema of the TM

Patient may have Otitis Media with Effusion (ear effusion with no signs of infection)
No antibiotics recommended

Assess and treat ear pain (see Table 3 in AAP guideline for Otolgia treatments)



Link to:
Children's Mercy Kansas City Outpatient Antibiotic Handbook

Antibiotic duration for amoxicillin, amoxicillin/clavulanate, cefuroxime, cefdinir, cefpodoxime, cefprozil, and clindamycin:
 <2 years of age **OR** severe AOM **OR** chronic AOM **OR** recurrent AOM **OR** TM perforation = **10 days**
 2-5 years of age with non-severe symptoms = **7 days**
 ≥6 years of age with non-severe symptoms = **5-7 day**