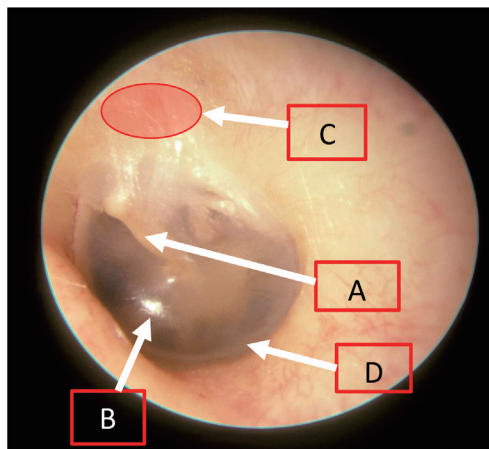


Appendix 1 Otologic Examination—A Survey for Junior Doctors

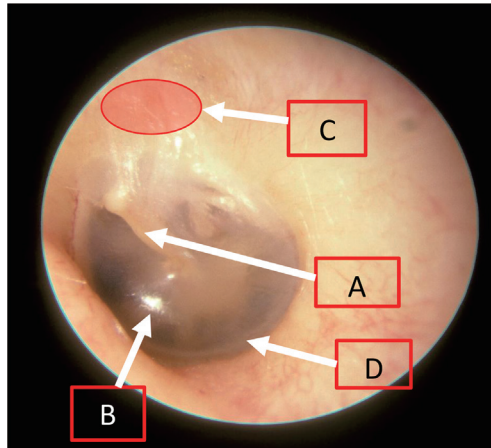
1. What is your current level of training?
 - Intern
 - Resident
 - PGY3+
2. How many weeks of ENT experience have you had in your undergraduate training?
 - < 1 week
 - 1-2 weeks
 - 2-4 weeks
 - 4 weeks
3. How much exposure to ENT surgery have you had in your post-graduate training
 - None
 - 4 weeks or less
 - 5-12 weeks
 - 3 months or more
4. How confident do you feel performing otoscopy and describing findings?
 - Not confident at all
 - Slightly confident
 - Somewhat confident
 - Fairly confident
 - Completely confident
- 5-8. Please identify structures labelled A, B, C, D



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Options: Incus, Malleus, Stapes, Annulus, Tegmen, Pars Tensa, Pars Flaccida, Attic, Light Reflex

9. Which ear is this?
-Left ear
-Right ear



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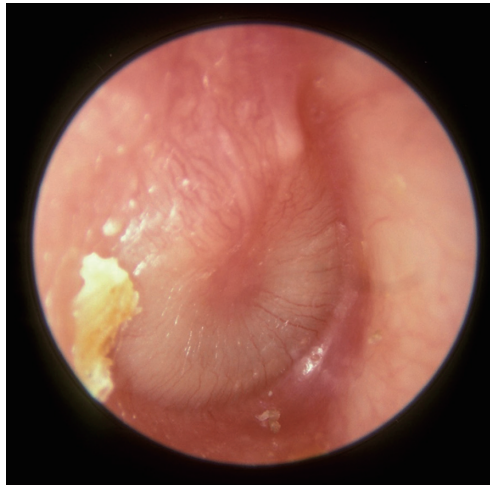
10. Identify the correct answer from the possible options



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- Normal ear
- Middle ear effusion
- Acute Otitis Media
- Cholesteatoma

11. Identify the correct answer from the possible options



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- Normal ear
- Acute Otitis Media
- Otitis media with effusion
- Ruptured tympanic membrane

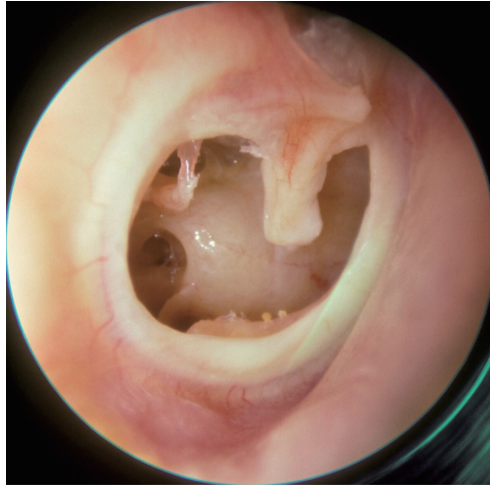
12. Identify the correct answer from the possible options



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- Normal ear
- Otitis media with effusion
- Tympanic membrane perforation
- Haemotympanum

13. Identify the correct answer from the possible options



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- Normal ear
- Acute Otitis media
- Tympanic membrane perforation
- Cholesteatoma

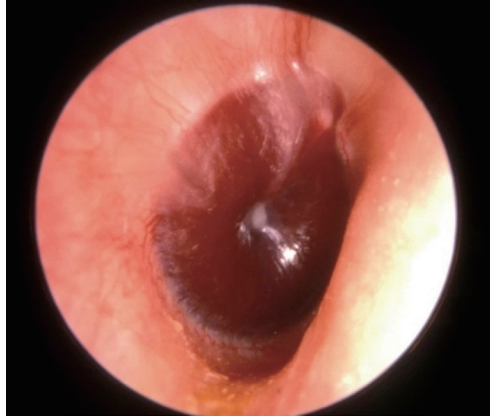
14. Identify the correct answer from the possible options



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- Normal ear
- Otitis externa
- Cholesteatoma
- Acute otitis media

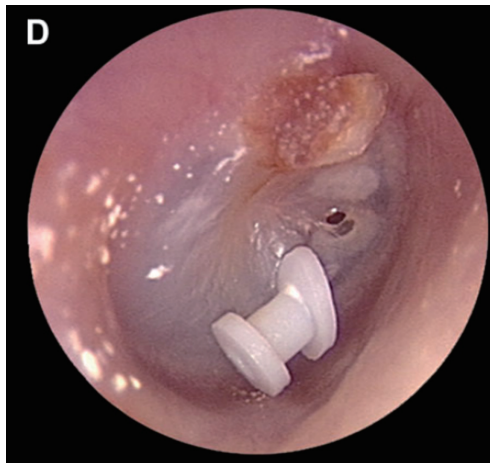
15. Identify the correct answer from the possible options



Reproduced under the terms of the terms of the Creative Commons Attribution 4.0 International License from “Hemotympanum from Head Trauma”, by Hawke M, Medtube, 2021 (<https://medtube.net/otorhinolaryngology/medical-images/28885-hemotympanum-from-head-trauma>).

- Normal ear
- Tympanic membrane rupture
- Otitis media with effusion
- Haemotympanum

16. Identify the correct answer from the possible options

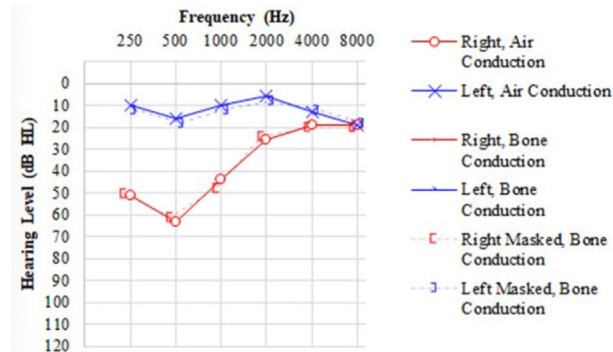


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- Tympanostomy in situ and patent
- Extruded tympanostomy tube
- Foreign body
- Acute otitis media

17. How confident do you feel interpreting an audiogram
- Not confident at all
 - Slightly confident
 - Somewhat confident
 - Fairly confident
 - Completely confident

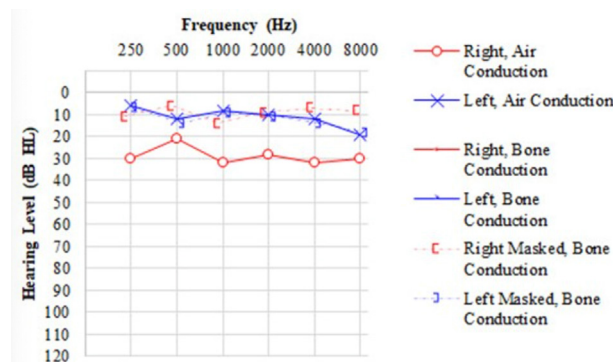
18. Please indicate the hearing pattern in the audiogram



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- Normal audiogram
- Conductive hearing loss
- Sensorineural hearing loss
- Mixed hearing loss

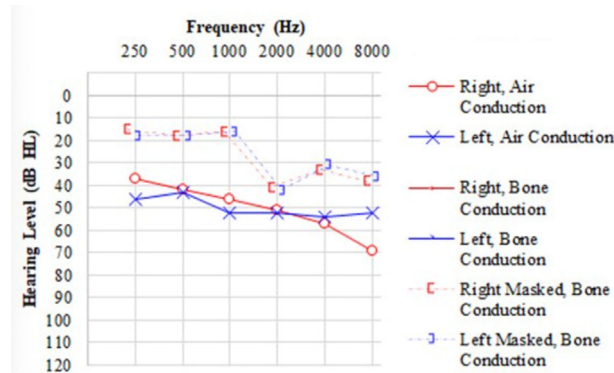
19. Please indicate the hearing pattern in the audiogram



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- Normal audiogram
- Conductive hearing loss
- Sensorineural hearing loss
- Mixed hearing loss

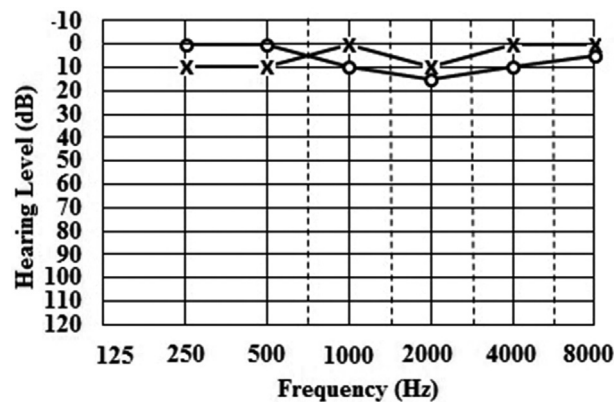
20. Please indicate the hearing pattern in the audiogram



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- Normal audiogram
- Conductive hearing loss
- Sensorineural hearing loss
- Mixed hearing loss

21. Please indicate the hearing pattern in the audiogram



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- Normal audiogram
- Conductive hearing loss
- Sensorineural hearing loss
- Mixed hearing loss

22. Please interpret the following. Weber's test does not lateralise, left-sided Rinne's test is positive (air conduction > bone conduction)
- Normal left sided exam
 - Left sided conductive hearing loss
 - Left sided sensorineural hearing loss
 - Right sided conductive hearing loss
23. Please interpret the following. A patient complains of reduced hearing in the right ear. Weber's test refers to the right ear, Rinne's test is negative on the right (bone conduction > air conduction) and positive on the left
- Conductive left sided hearing loss
 - Conductive right sided hearing loss
 - Sensorineural left sided hearing loss
 - Sensorineural right sided hearing loss
24. Do you think that increased ENT exposure during medical school/post-graduate training would be useful?
- Strongly disagree
 - Disagree
 - Neutral
 - Agree
 - Strongly agree