Practical ENT
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Dedicated to
My students and
in loving memory of my Father, Mother and Brother
Reviews

This book is truly practical, unique, and to the point. This is best practical guide to ENT residents and specialists, I have ever seen. The style is so unique that it vividly represents a thorough bedside teaching from the master. I really believe that one can get the knowledge of ENT, which cannot be attainable from heavy-volume Western textbooks.

DR YONG JU JANG
MD PhD
Professor, Department of Otolaryngology and Head and Neck Surgery
Asan Medical Center, University of Ulsan, College of Medicine, Seoul, South Korea

Professor Sinha is a well-known ENT specialist who is traveling a lot to Asia and Europe to enhance his knowledge and experience in the latest development of ENT. His focus is especially on teaching the younger colleagues, and this book is ideal for this. It presents the latest standards of ENT in history taking, diagnosis and treatment. I congratulate Professor Sinha for this excellent book, and hope it will be widely spread and used. Every MBBS and MS students will also find in this book a good comprehension of ENT diseases. I wish this book a great success. All the best from Stuttgart.

DR WOLFGANG GUBISCH
Professor, Marienhospital, Stuttgart, Germany

Practical ENT book has elegantly captures the essence of ENT. It is very comprehensive and well written. The clinical history and examination has been well written with additional clinical points that will make it very clear and easy to understand. This book will truly benefit every reader, whichever level he/she may be. My compliments to Dr Vikas Sinha for this excellent work.

DR PREPAGERAN
Professor, Department of Otolaryngology and Head and Neck Surgery
University Malaya Medical Centre, Kuala Lumpur, Malaysia

As a very comprehensive synopsis of basic otolaryngology, the book serves as an excellent resource for the undergraduate medical students commencing their ward posting and practical instruction in otolaryngology, and a good refresher prior to the examination. The book would also serve as a useful resource for postgraduates to reappraise them of the "must know" facts of the subject, especially so with regard to the sections on X-rays, operations, audiology, osteology, instruments and FAQs.

DR ALOK THAKAR
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Professor, Department of Otolaryngology and Head and Neck Surgery
All India Institute of Medical Sciences, New Delhi, India

The author has made commendable effort to simplify and present a wealth of clinical information on ototrinolaryngology in this book. The clinical material is very useful for all who wish to have comprehensive understanding of ENT. The book will be of immense help to the medical students to sharpen their clinical acumen. This book is highly recommended to the medical students.

DR ASHOK K GUPTA
Professor, Department of Otolaryngology and Head and Neck Surgery
Postgraduate Institute of Medical Education and Research, Chandigarh, India
I am pleased to write the foreword for *Practical ENT* authored by Dr Vikas Sinha. This book gives a detailed and precise insight into clinical history taking, examinations, case studies, instruments and operative procedures. I would like to highlight the lucid language and comprehensive contents of the chapters which make the subject interesting. This book should also help the students in observing clinical techniques and patient rounds. I congratulate Dr Vikas Sinha for the tremendous efforts he has put in to make this book as complete as possible. The chapters are well planned and organized. I am sure this will be of immense help to all the medical students as well as aspiring surgeons.

**MV Kirtane**  
Ex-Professor  
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Foreword

It gives me great pleasure to write the foreword of the book *Practical ENT* written by Dr Vikas Sinha. This book is the result of a painstaking and laborious effort by the author to provide a systematic approach to the learning of the subject of otorhinolaryngology for the undergraduate students. The comprehensive chapters on importance of history taking and clinical examination of otorhinolaryngology will help the student imbibe the basics of ENT. The important topics for practical aspects of the undergraduate curriculum have been adequately dealt with in this book. Practical topics like different foramina of skull base, applied anatomy of skull bones, technique and intricacies in cranial nerve examination, audiology, calorimetry and study of X-rays relevant to ENT have been properly highlighted. I recommend this book to all the undergraduates to refresh their knowledge while preparing for their practical examinations. I feel this book will go a long way in fulfilling the pressing need for good undergraduate books in our specialty.

AK Gupta  
MS, FICS  
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There are many textbooks of ENT by the noted, distinguished and eminent otolaryngologists who command great respect from the ENT fraternity. Yet I believe there is a need for a genuine and short book of ENT dealing mainly with the history taking part, clinical examination and practical aspect of ENT where students can quickly go through the history and viva-voce aspect. This book is primarily meant for the undergraduate students, especially for those who have first posting in ENT. The postgraduates are advised to refer other referral and advanced books of ENT for better knowledge and understanding of the subject. Frequently Asked Questions (FAQs) is a chapter in which students can quickly revise the things while preparing for the examinations. It does not mean that only these types of questions are being asked in the examination. Students must go through the textbook for detailed knowledge of the subject. The italic face of the text of this book is suggestive of theoretical aspect of the subject. It is not possible to include everything of otolaryngology as it is not a textbook and efforts have been made on my part to cover all the practical aspects and related questions of table viva. I might have missed many things but sincere efforts have been made to cover the larger portion.

I am extremely thankful to my undergraduate and postgraduate students for encouraging me to write this short book Practical ENT. My every clinical lecture has been a new lesson for me. Every lecture has taught me something, and in every lecture I learn new things from my students. I am extremely thankful to them. My patients are another source of inspiration, as without them I would not have made any attempt to write this book. My all residents deserve lot of credit for helping me to update my knowledge for the latest things in ENT. My daughters Swastika and Shijita, were too generous to help me in every stage of my book writing as the entire process of writing of this book took lots of valuable time which I should have passed with them. My all-family members including my late brother, bhabhi, and sister encouraged me to write a book of ENT since beginning.

Vikas Sinha
Acknowledgments

I am thankful to the Government of Gujarat, India to allow me to use the clinical material from the hospital for writing and publishing this book. I am also thankful to KB Bhargava, SK Bhargava and TM Shah to allow me to use few illustrations from their book *Short Textbook of ENT Disease*, Sixth Edition 2002 to include in my book.
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   - Ear
   - Nose and Sinuses
   - Tonsil
   - Larynx
   - Cranial Nerves

18. **Case Presentation of Ear, Nose, Throat**
HISTORY

- A painless and slow-growing swelling of parotid gland is suggestive of mixed parotid tumor. If it starts growing rapidly, it is suggestive of malignant transformation.
- A watery flow from the parotid gland on the skin surface during meals with the previous history of trauma or abscess is suggestive of parotid fistula.
- A swelling in the submandibular region with colicky pain at the time of meals is highly suggestive of stone in the submandibular duct. The swelling becomes tense and tender during the meals.

EXAMINATION

Inspection

i. Swelling:
   - Parotid swelling appears below, in front and behind the lobule of ear causing usually lifting of the lobule. It also obliterates the normal fissure behind the ramus of mandible.
   - Submandibular gland swelling is present in the submandibular triangle.

ii. Duct:
   The Stensen’s duct (parotid duct) is seen on the buccal surface, opposite to the upper second molar tooth. In suppurative parotitis, pus may come out of the duct on pressing the gland while in malignant growth, blood may come out. Ask patient to touch the palate by the tip of tongue, the opening of submandibular duct (Wharton’s duct) on either side of frenulum linguæ or sublingual duct (Bartholin’s duct) is seen. It may be inflamed or swollen.
Stensen's duct was discovered by Niels Stensen, while dissecting sheep head he discovered a channel in the parotid gland through which he could pass his probe up to the teeth.

Wharton's duct was discovered by Thomas Wharton.

### iii. Palpation

- The parotid duct may be palpated on the masseter muscle by rolling the finger across it, while patient clinches the teeth by making the muscle taut. The terminal part of duct is palpated bidigitally between index finger in the mouth and thumb over the cheek
- The submandibular gland and duct are palpated bidigitally. A finger is inserted inside the mouth along the groove between the alveolus and the tongue and pressed on the floor of mouth. The finger of the other hand is placed under the jaw. The gland and duct are palpated from behind. This bidigital palpation helps to differentiate it from the enlarged submandibular lymph node. The finger inside the mouth can feel the deeper part of salivary gland but not the lymph node (as salivary gland is situated above the mylohyoid muscle while lymph node is situated below the muscle).

**Saliva Flow Test:** Test the flow of saliva by asking the patient to suck lemon. In absence of any stone or obstruction in the duct, saliva flows freely from the duct. If duct is obstructed by the stone, the salivary outflow is markedly obstructed and there is obvious swelling of the gland.

*The stone formation is more common in submandibular gland and duct (50 times more as compared to parotid gland), as the secretion of submandibular gland is more mucoid, rich in calcium and more alkaline in pH. The tract of submandibular duct is narrow, more tortuous and opens in the floor of mouth vertically with antigravity.*

*The salivary calculus is radiopaque, as it is composed of calcium and magnesium phosphates. If the calcium content is low, it may not be radiopaque.*

**Parotid Tumors:**
- **Benign:** Papillary cystadenoma lymphomatosum, i.e. Warthin's tumor or mixed parotid tumor (most common)
  *(It is called mixed as there are both cartilage and epithelial cells in it).*
- **Malignant:** Adenocarcinoma.