

# Grommets/Myringotomy for Children

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## VERSION CONTROL

<b>Version:</b>	4.0
<b>Ratified by:</b>	Governing Body Meetings in Common
<b>Date ratified:</b>	20 March 2019
<b>Name of originator/author:</b>	Joint CCG Clinical Commissioning Policy Development Group
<b>Name of responsible committees:</b>	Clinical Quality and Governance Committee
<b>Date issued:</b>	1 April 2019
<b>Review date:</b>	March 2022

## VERSION HISTORY

<b>Date</b>	<b>Version</b>	<b>Comment / Update</b>
April 2009	1.0	Previous PCT policy
June 2013	2.0	Version to Governing Body – approved on 12 June 2013
September 2016	3.0	Approved by Governing Body
March 2019	4.0	Approved by Governing Body meetings in common

## Commissioning policy: Warwickshire North CCG (WNCCG)

### Evidence-Based Intervention Commissioning policy:

#### Grommets/myringotomy for children

<b>Treatment</b>	Grommets/myringotomy for children
<b>Indication</b>	Otitis media with effusion (OME)
<b>Treatment:</b>	<p>Surgical treatment will only be supported in accordance with the care pathway for children with suspected otitis media with effusion in NICE Clinical Guideline CG60 (February 2008) on “Surgical Management of Otitis media with effusion in Children”</p> <p>Ref: <a href="http://guidance.nice.org.uk/CG60">http://guidance.nice.org.uk/CG60</a></p> <p><b>Myringotomy With/Without Grommets for Otitis Media will ONLY be funded in the following circumstances:</b></p> <ul style="list-style-type: none"> <li>• The child must have had specialist audiology and ENT assessment</li> </ul> <p><b>AND</b></p> <ul style="list-style-type: none"> <li>• The child has persistent bilateral OME documented over a period of 3 months</li> </ul> <p><b>AND</b></p> <ul style="list-style-type: none"> <li>• A hearing level in the better ear of 25-30 dBHL or worse averaged at 0.5, 1, 2 &amp; 4kHz</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>• Persistent bilateral OME with hearing loss less than 25-30dbHL where the impact of hearing loss on a child’s developmental, social or educational status is judged to be significant</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>• The worse ear averaged at 0.5, 1,2 and 4 kHz (or equivalent dBA where dNHL not available)</li> </ul> <p><b>Also, children should only be considered for grommet insertion if:</b></p> <ul style="list-style-type: none"> <li>• The child cannot undergo standard assessment of hearing thresholds where there is clinical and tympanographic evidence of persistent glue ear and where the impact of the hearing loss on a child’s development, social or educational status is judged to be significant.</li> <li>• The child has Down’s Syndrome or Cleft Palate and has had a specialist MDT assessment in line with NICE guidance</li> </ul> <p><b>Prior approval from the Clinical Commissioning Group will be required before any treatment proceeds in secondary care.</b></p>
<b>Diagnostic and Procedure Codes</b>	D151
<b>Equality Impact</b>	See NHS England Equality and Health Inequalities – Full Analysis Form