Practical aspects of nasal endoscopy

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Examination
- Anterior rhinoscopy
- Posterior rhinoscopy
  - Mucosa, Septum, Turbinates, Pathology
- Diagnostic Nasal Endoscopy
- Ears
- Throat & Larynx

DNE - Tips
- Attach light and camera securely
- Make sure scope and lens is clean
- Use antifog or demisting solution
- Focus camera, white balance
- Correct orientation
- Decongest and use local anesthesia
- Use top of nostril for entry and stability
- Never force the endoscope

Diagnostic Nasal Endoscopy
- Routine
- Anatomy
- Early Pathology
- Extent of Pathology
- Swab
Diagnostic Nasal Endoscopy

- Complete view of the nasal passages
- Examination of the nasopharynx
- Inspection of the middle meatus
- Detect & Differentiate Pathology: tumors, polyps, discharge, turbinates
- Painless, short office procedure
- Preoperative assessment

Allergic Rhinitis

- Sneezing
- Rhinorrhoea (bilateral)
- Nasal obstruction
- Itching of nose, eyes & palate
- Paranasal pain, headache
- Anosmia, hyposmia
- Pharyngitis, hoarseness

Nasal Obstruction – Polypoid IT

- Nasal obstruction
- Headache
- Epistaxis
- Anosmia
- Allergic rhinitis
- Suspected FB
- Documentation

Polyps

Polyps & FESS
Encephalocoele

Precautions
- Consent
- Equipment
- Decongestants
- Local anesthesia
- Be gentle!! No Bleeding !!!!
- See what is easy
- Start with 0 scope, only then 30
- Ct Scan

Thank you