

IMPLEMENTATION ISSUES TEMPLATE

Malignant Otitis Externa (MOE)

1. What are the major risks and challenges for implementation that have been identified while revising the Protocol?

1. Lack of awareness/education regarding Malignant Otitis Externa (MOE)
2. Low recognition of severity and morbidity MOE carries
3. Locums unaware of protocols
4. Staff furlough
5. Overworked/overburdened staff work force

2. Who needs to use the new protocol?

- ✓ Aboriginal Health Worker
- ✓ Aboriginal Health Practitioner
- ✓ Enrolled and Registered Nurses in AMS setting
- ✓ Remote Area Nurse
- ✓ Community Health Nurse Generalists
- ✓ District Medical Officer (whether Hospital-based GP/Doctor working in Emergency, inpatient care, outpatient General Practice, Remote clinics)
- ✓ GP (FACRRM, FRACGP) in AMS or community GP setting
- ✓ GP Registrar
- ✓ Pre-vocational RMO
- ✓ Regional and Visiting Specialists not-otherwise- specified
- ✓ Regional Physician
- ✓ Regional Paediatrician
- ✓ Medical interns
- ✓ Nurse Practitioners

3. Please give three key messages about the Protocol for users:

1. Recognise and understand that MOE carries significant morbidity and mortality
2. Early recognition and having a higher index of suspicion are crucial when treating a high-risk patient with a discharging ear that is not responding to standard therapy
3. Where MOE is suspected, further investigation via CT temporal bones is first line and seek specialist advice (ENT, Infectious Diseases)

4. For each of the following implementation strategies, please indicate their value for this specific Protocol and provide additional details as requested:

Strategy	Essential	Optional	Comments
Proactive dissemination Eg orientation / in-service	Yes		Protocol release timed with ENT visit to provide specialist teaching. Discuss at journal club
Clinic audit and feedback		Yes	Option to audit and review patient cases
Service-wide audit		Yes	Option to audit and review

5. Please summarise major barriers and enablers as identified in the literature or during your discussions as the Writing Group

Major barriers

- No database of patients who have been burdened by MOE
- Low (but significant) incidence rates of MOE in Kimberley
- No previous protocol in Kimberley region

Enablers

- The Royal Victorian MOE guideline

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