



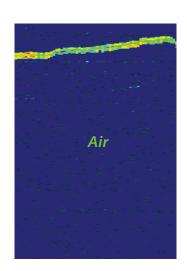


### OtoSight Middle Ear Scan with Healthy Eardrum

Age: 9 years

Presented to Pediatrician office for well visit. Surface Image and Middle Ear Scan show a representative healthy eardrum and Middle Ear Scan confirms no MEE is present behind the tympanic membrane.

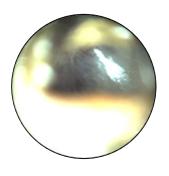


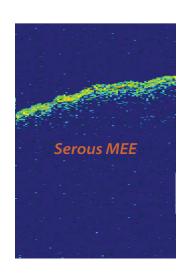


#### OtoSight Middle Ear Scan with Healthy Eardrum

Age: 19 months

Presented to ENT office for atelectasis. Surface Image and Middle Ear Scan show a representative healthy eardrum and Middle Ear Scan confirms no MEE present.





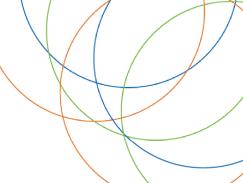
#### Low Turbidity Middle Ear Effusion

Age: 2 years

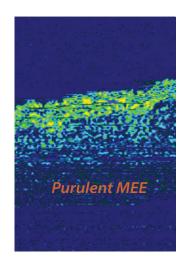
Presented to Pediatrician office for moderate otalgia and bilateral ear pain, but no fever. Middle Ear Scan shows low turbidity MEE present given low brightness sparse signal in the middle ear space.









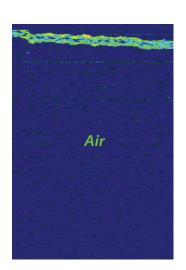


#### **High Turbidity Middle Ear Effusion**

Age: 29 years

Presented to Primary Care office for moderate otalgia and unilateral hearing loss, but no fever. Middle Ear Scan shows high turbidity MEE present given bright dense signal in the middle ear space. Surface Image shows bulging erythematous eardrum and yellowish purulent effusion is visible from behind the eardrum.



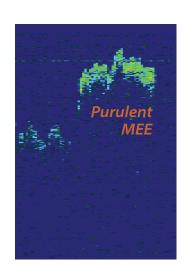


#### **Normal Ear**

Age: 18 months

Presented to ENT surgery center with bilateral chronic OME for tympanostomy tube surgery. However, Middle Ear Scan shows no MEE present, confirmed post myringotomy.





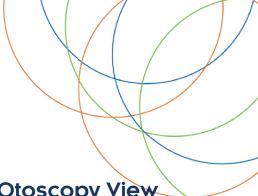
#### **High Turbidity Middle Ear Effusion**

Age: 15 Months

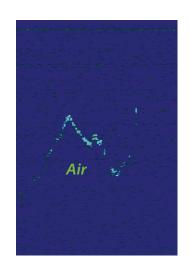
Presented to ENT surgery center with bilateral recurrent AOM for tympanostomy tube surgery. Middle Ear Scan shows high turbidity MEE present given bright dense signal in the middle ear space. Surgically extracted MEE was lab tested and classified as muco-purulent MEE.











#### **Limited Otoscopy View**

Age: 10 Months

Presented to ENT surgery center with bilateral recurrent AOM for tympanostomy tube surgery. However, Middle Ear Scan shows no MEE present, despite a minimally diagnostically useful Surface Image due to significant earwax obstruction of view. No MEE is confirmed post-myringotomy.



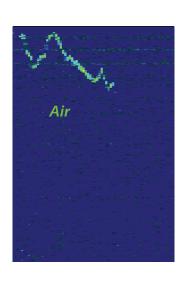


#### **Limited Otoscopy View**

Age: 13 months

Presented to ENT surgery center with bilateral recurrent AOM for tympanostomy tube surgery. However, despite an erythematous eardrum in the Surface Image, Middle Ear Scan shows no MEE present, confirmed post-myringotmy.





#### **Limited Otoscopy View**

Age: 14 months old

Presented to ENT surgery center with bilateral recurrent AOM for tympanostomy tube surgery. However, despite an erythematous eardrum in the Surface Image, Middle Ear Scan shows no MEE present, confirmed post-myringotmy.









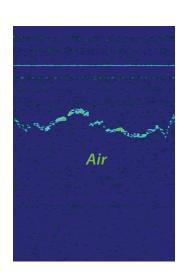


#### **Limited Otoscopy View**

Age: 19 months

Presented to ENT surgery center with bilateral recurrent AOM for tympanostomy tube surgery. However, Middle Ear Scan shows no MEE present, despite a limited diagnostically useful Surface Image due to small speculum tip and earwax obstruction of view. No MEE is confirmed post-myringotomy.

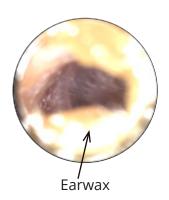


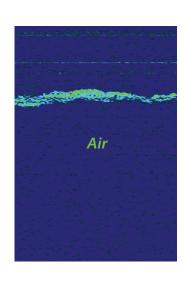


#### **Limited Otoscopy View**

Age: 21 months

Presented to ENT surgery center with bilateral recurrent AOM for tympanostomy tube surgery. However, despite an erythematous eardrum in the Surface Image, Middle Ear Scan shows no MEE present, confirmed post-myringotomy.





#### **Limited Otoscopy View**

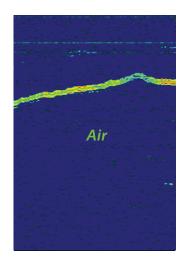
Age: 21 months

Presented to ENT surgery center with bilateral recurrent AOM for tympanostomy tube surgery. However, Middle Ear Scan shows no MEE present, despite a minimally diagnostically useful Surface Image due to significant earwax obstruction of view. No MEE is confirmed post-myringotomy.







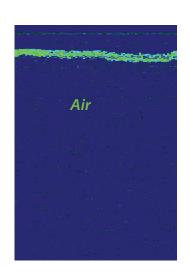


# Limited Otoscopy View Obstructed by Earwax

Age: 22 months

Presented to ENT surgery center with bilateral chronic OME for tympanostomy tube surgery. However, Middle Ear Scan shows no MEE present, despite a non-diagnostically useful Surface Image due to significant earwax obstruction of view. No MEE is confirmed post-myringotomy.

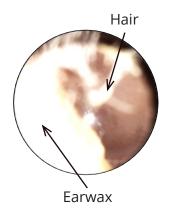


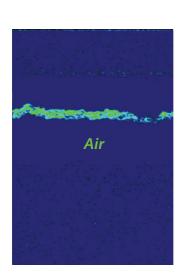


## Limited Otoscopy View Obstructed by Earwax

Age: 7 years

Presented to Pediatrician office for well-visit. Middle Ear Scan shows no MEE present, despite a nondiagnostically useful otoscopy image due to earwax and ear canal obstruction. The rising left side of the Middle Ear Scan is due to a steady insertion of the speculum tip into the ear, whereas the declining right side of the eardrum signal in Middle Ear Scan is due to a steady withdrawal of the speculum tip.





#### Limited Otoscopy View Obstructed by Hair and Earwax

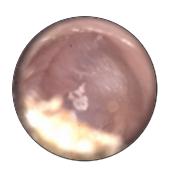
Age: 9 years

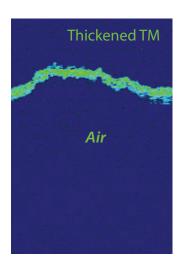
Presented to Pediatrician office for well-visit. Middle Ear Scan shows no MEE present, despite a nondiagnostically useful Surface Image due to earwax ear canal, and hair obstruction of view.







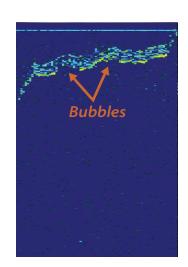




Age: 9 years

Presented with bilateral chronic OME with need for tympanostomy tube surgery. However, Middle Ear Scan shows no MEE present, despite imaging through a thickened sclerotic portion of the eardrum, seen as the white patch in the Surface Image.





### Bubbles Visible with Middle Ear Effusion

Age: 29 years

Presented to Primary Care office for follow-up on day 9 of a 10-day course of antibiotics for AOM. Surface Image and Middle Ear Scan show bubbles in the middle ear, indicative of resolving MEE. The centers of the bubbles in Middle Ear Scan are black, indicating the presence of air, while the edges of the bubbles can be seen by the white lines in the middle ear space.





### Debris Present on Eardrum with Middle Ear Effusion

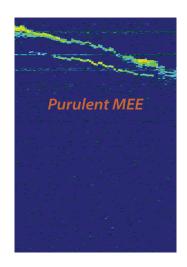
Age: 9 years

Presented to ENT with bilateral recurrent AOM for tympanostomy tube surgery assessment. Middle Ear Scan shows high turbidity MEE present given bright dense signal in the middle ear space. Surface Image shows bulging erythematous eardrum and whitish purulent effusion is visible from behind the eardrum. Also, there is debris seen on the eardrum, possibly dried earwax.





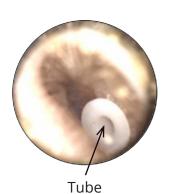




#### Tympanic Membrane with Scab

Age: 29 years

Presented to Primary Care office for moderate otalgia and unilateral hearing loss, but no fever. Middle Ear Scan shows high turbidity MEE present given bright dense signal in the middle ear space. Middle Ear Scan shows a scab on the eardrum, not interferring with the ability to visualize MEE. Surface Image shows an erythematous eardrum with a scab seen by the disruption of the light reflex, as well as yellowish purulent effusion visible from behind the eardrum.

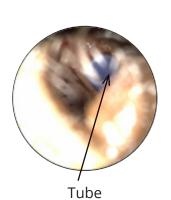




#### **Short-Acting Grommet Tube**

Age: 20 months

Presented to ENT office for post-tympanostomy tube follow-up. Surface Image and Middle Ear Scan show no MEE present and Surface Image shows a white grommet tympanostomy tube still in the eardrum. Careful OtoSight imaging to avoid the tube and capture data from the eardrum adjacent to the tube is important for making such an assessment.





# Visible Tube Following Tympanostomy Tube Surgery

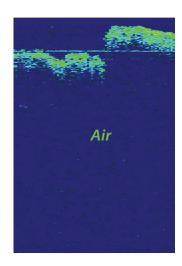
Age: 63 years

Presented to ENT for post-tympanostomy tube follow-up. Despite a non-diagnostically useful Surface Image, Middle Ear Scan shows no MEE present. Surface Image shows a blue Triune tympanostomy tube still in the eardrum, thanks to careful OtoSight Middle Ear Scope imaging technique.







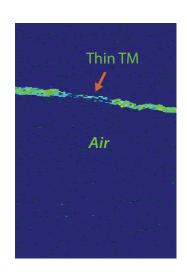


# Visible Hole from Prior Tympanostomy Tube Surgery

Age: 13 years

Presented to ENT office for post-tympanostomy tube placement follow-up with acute myringitis. Surface Image and Middle Ear Scan show no MEE with a hole present from tube that had fallen out.



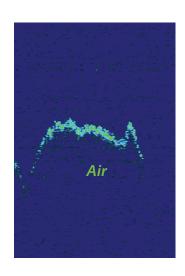


### Tympanic Membrane with Monomer

Age: 29 years

Presented to ENT office with history of tympanostomy tubes and barotrauma from scuba diving. Middle Ear Scan shows a monomer, or thinned portion of the eardrum. Surface Image shows an atypical light reflex for the monomeric portion of the eardrum.





#### **Erythematous Ear**

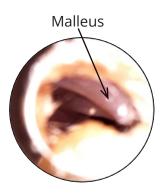
Age: 19 months

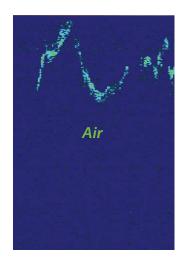
Presented to ENT surgery center with bilateral recurrent AOM for tympanostomy tube surgery. However, despite an obviously erythematous eardrum in the Surface Image, Middle Ear Scan shows no MEE present, confirmed post myringotomy.







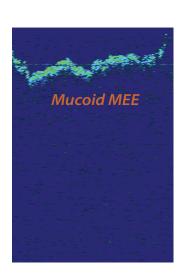




Age: 2 years

Presented to ENT with bilateral chronic OME for tympanostomy tube surgery. Despite a challenging otoscopy image, Middle Ear Scan shows no MEE present. Surface Image shows a retracted eardrum, which makes the malleus appear more pronounced.



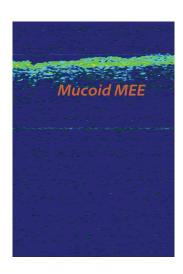


#### **Glue Ear**

Age: 21 months

Presented to ENT surgery center with bilateral chronic OME for tympanostomy tube surgery. Despite significant earwax obstruction of otoscopy view, Middle Ear Scan shows MEE present with moderately bright heterogeneous signal in the middle ear space. Surgically extracted MEE was lab tested and classified as non-purulent mucoid MEE.





#### Glue Ear Middle Ear Effusion

Age: 6 years

Presented to ENT surgery center with bilateral recurrent AOM for tympanostomy tube surgery. Middle Ear Scan shows MEE present with moderately bright heterogeneous signal in the middle ear space. Surgically extracted MEE was lab tested and classified as non-purulent mucoid MEE.

