

# Central Adelaide Ear, Nose and Throat (ENT) Service

## Clinical Information Sheet

Clinical Condition	Sinonasal conditions
<b>Eligibility</b>	Chronic and Acute Rhinosinusitis Allergic and Non Allergic Rhinitis Nasal Obstruction Benign and Malignant Sinonasal tumours CSF Leak Epistaxis Epiphora
<b>Priority</b>	Urgent: Complicated acute or chronic sinusitis: Periorbital cellulitis, persistent severe headache associated with signs of meningitis including neck stiffness, photophobia, visual disturbance and drowsiness. Unilateral nasal discharge mixed with blood persistently for more than a month, persistent unilateral clear nasal discharge and beta-2 transferring positive on testing (CSF), Abnormal imaging with suspected malignancy is reported.  Otherwise Non – Urgent  Referrals should be faxed to 08 8222 5989
<b>Differential Diagnoses</b>	Acute sinusitis Chronic Rhinosinsitis Sinonasal Malinancy CSF leak Deviated Nasal Septum Cosmetic and Functional External Nasal Problems
<b>Information required with referral</b>	Information associated with: <ul style="list-style-type: none"> <li>• Duration of symptoms</li> <li>• Treatment prescribed and patient compliance with topical treatments for at least 3 months</li> <li>• Allergy results with RAST or skin prick testing</li> <li>• Facial pain</li> <li>• Purulent rhinorrhoea</li> <li>• Headaches</li> <li>• Increased congestion</li> </ul> History and physical examination may be non-contributory.
<b>Investigations required with referral</b>	CT paranasal sinuses- after a 6-8 week trial of medical management Allergy tests, if possible



<p><b>Pre-Referral management strategies (information required with referral)</b></p>	<p>Initial treatment:</p> <p>For chronic sinusitis (CRS)</p> <ul style="list-style-type: none"> <li>• Nasal rinsing/douching with saline irrigations</li> <li>• Topical steroid sprays daily (2 sprays each nostril daily for the first month then 1 spray each nostril daily for 2 months)</li> <li>• Oral antibiotics if there is a coloured nasal discharge (eg: greenish), eg Augmentin, Rulide for 2 weeks.</li> <li>• Advise to stop smoking</li> <li>• Topical decongestant sprays to a maximum of 3 days.</li> </ul> <p>For recurrent acute sinusitis</p> <ul style="list-style-type: none"> <li>• Same as CRS</li> <li>• Referral indicated only if . 4 infections/year or if complications evident</li> </ul> <p>If medical treatment fails – CT of sinus and refer</p>
<p><b>Discharge Criteria/information</b></p>	<p>Once condition stabilised</p>
<p><b>Fact sheets</b></p>	

[For more information](#)

**Central Adelaide - Ear, Nose and Throat (ENT) Service**  
**Royal Adelaide Hospital, North Terrace ADELAIDE Telephone: 08 8222 4000**  
**The Queen Elizabeth Hospital, 28 Woodville Road, WOODVILLE Telephone: 08 8222 6000**

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