

NAME OF THE HOSPITAL: \_\_\_\_\_

31). Adenoidectomy - Gromet Insertion: S2B2.6

1. Name of the Procedure: Adenoidectomy - Gromet Insertion
2. Indication: Mouth breathing/ Sleep apnoea in children/ Otitis media with effusion in children
3. Does the patient presented with nasal obstruction & discharge, sinusitis, epistaxis, voice change, conductive hearing loss, adenoid facies, lack of concentration: Yes/No
4. If the answer to question 3 is Yes then is there evidence of enlarged adenoids on X ray Neck lateral view/ Nasal endoscopy: Yes/No (Upload report)

For Eligibility for Adenoidectomy - Gromet Insertion the answer to question 4 must be Yes

I hereby declare that the above furnished information is true to the best of my knowledge.

Treating Doctor Signature with Stamp

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