

Histopathology not needed with tympanomastoidectomy

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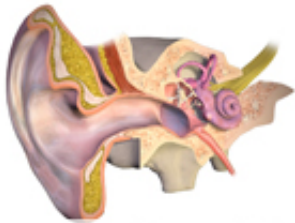


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The clinical utility of histopathologic evaluation of cholesteatoma cysts is low in patients undergoing tympanomastoidectomy for chronic otitis media, according to research published online July 9 in *The Laryngoscope*.

(HealthDay)—The clinical utility of histopathologic evaluation of cholesteatoma cysts is low in patients undergoing tympanomastoidectomy for chronic otitis media, according to research published online July 9 in *The Laryngoscope*.

Matthew L. Kircher, M.D., from the Michigan Ear Institute in Detroit, and colleagues reviewed medical records data from patients undergoing tympanomastoidectomy for chronic otitis media. Specimens were submitted for pathologic review between 2010 and 2011. Intraoperative surgical findings were compared to the pathologic diagnosis.

The researchers found that there was perfect agreement between the

surgeon's intraoperative findings and pathologic diagnosis of cholesteatoma after tympanomastoidectomy. For cholesteatoma, the average cost for microscopic evaluation was \$61.95 based on 2012 Medicare reimbursement.

"In the absence of concern for other pathology, intraoperative findings of cholesteatoma are adequate to confirm diagnosis in patients undergoing tympanomastoidectomy for chronic otitis media without the use of histopathology," the authors write.

More information: [Abstract](#)
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