significant complications. First attempts made by non-ENT specialists (68.8%) all failed and were associated with a high risk of trauma (36.4%). The chances of successful removal on second attempt (28.6%) reduced dramatically when compared to the first attempt (52.9%). Two patients had no foreign body visualised upon second attempt, suggesting it has cleared itself. A total of 7 patients (20.6%) required removal under general anaesthesia.

Conclusions: Due to the unique circumstances of the COVID-19 pandemic, this is the first case series to look specifically at the relationship between duration of aural foreign bodies left in situ for over 30 days from presentation and the risk of complications. Our data suggests that prolonged duration did not increase the incidence of complications.

512 The Management of Aural Foreign Bodies During the COVID-19 Pandemic - MKUH ENT Department Experience

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Aim: During the initial wave of the COVID-19 pandemic, ENT UK published a clinical guide on surgical prioritisation which suggested that aural foreign bodies can be removed between one and three months from initial presentation. This case series aims to investigate the impact of leaving aural foreign bodies in situ for a prolonged period of time, including the risk of complications, success rates of subsequent removal attempts and whether foreign bodies can clear themselves without intervention.

Method: Retrospective study of all aural foreign body referrals to the ENT emergency clinic over a 6-month period.

Results: Thirty-four patients were identified. The duration of foreign bodies left in-situ ranged from 1 to 78 days. Four patients suffered from traumatic removal upon initial attempts, however there were no other