CONDITION

Ear tag

An ear tag is a harmless skin-and-cartilage bump present near the outer ear from birth.

WHAT IT IS
Congenital skin-and-cartilage bump beside the outer ear

BODY SYSTEM
Skin and outer ear

MAIN SYMPTOMS
Small ear-side bump, no pain, occasional rubbing

WHAT CAUSES IT
Differences in ear development before birth

HOW IT IS DIAGNOSED
Physical examination, with hearing assessment when indicated

MAIN TREATMENT
Observation or elective surgical removal

CAN IT BE CURED?
Yes - complete removal is usually permanent

IS IT AN EMERGENCY?
No - unless severe bleeding or spreading infection

LONG-TERM OUTLOOK
Usually harmless, stable, and without health effects

Overview

An ear tag is a small piece of extra tissue on or near the outer ear that is present at birth. Most sit just in front of the ear, between the ear and cheek, although they can appear elsewhere around the ear.

Some ear tags contain only skin and fat. Others have a firm cartilage core and may be called an accessory tragus. The tragus is the small flap of cartilage in front of the ear canal.

An ear tag is a physical difference, not an infection or cancer. It is usually harmless and does not affect the ear canal or hearing. Many people leave it alone.

Removal may be considered if the tag catches on clothing, becomes irritated, or causes concern about appearance. Because cartilage may extend below the skin, removal should be performed by a healthcare professional rather than attempted at home.

Occasionally, an ear tag appears with other differences involving the face, ears, hearing, or other parts of the body. An isolated tag does not usually indicate a wider medical condition, but a clinician will check for other findings.

Symptoms

The main feature is a small bump or flap of tissue near the ear. It may be flesh-coloured or slightly darker than the surrounding skin and can have a narrow stalk or wider base.

An ear tag is usually:

Most ear tags cause no symptoms. A larger or longer tag may rub against clothing, glasses, helmets, hearing devices, or face coverings. Repeated friction can make the skin sore.

An ear tag does not normally cause ear discharge, fever, deep ear pain, or sudden hearing loss. These symptoms may have another cause and should be assessed separately.

- Present from birth
- Painless and covered by normal-looking skin
- Soft or firm, depending on whether it contains cartilage
- Stable in shape, although it may grow as the child grows

Causes and risk factors

The outer ear forms early in pregnancy from several areas of developing tissue. An ear tag forms when some of this tissue remains as an extra bump. It is not caused by anything a parent did during pregnancy.

The exact reason is often unknown. Most ear tags occur by themselves and may affect one ear or, less commonly, both sides.

Ear tags sometimes run in families. In other cases, they are one feature of a genetic syndrome affecting several parts of the body. This is more likely when there are other findings, such as an unusual ear shape, facial differences, a cleft lip or palate, hearing problems, or abnormalities of other organs.

An isolated ear tag does not by itself show that a child has a kidney problem. Kidney ultrasound is generally unnecessary solely because an otherwise healthy baby has one isolated preauricular tag. Imaging may be considered if the examination, family history, or other congenital differences suggest a wider condition.

Diagnosis

A clinician can usually identify an ear tag by looking at and feeling it. No blood test or scan is normally needed for an uncomplicated tag.

The examination may assess:

A newborn should have hearing screening according to the local programme. An ear tag does not necessarily mean hearing is affected. If a baby does not pass the initial screen, or concerns later arise about hearing or speech development, an audiologist may perform a formal assessment.

Kidney imaging and genetic assessment are not routine for every isolated ear tag. They may be appropriate if there are additional findings, a relevant family history, or signs of a syndrome.

If the tag is removed, it may be sent to a laboratory for routine examination under a microscope. This does not usually mean cancer is suspected.

- The tag's position, size, base, and firmness
- The shape of both outer ears and ear canals
- Other facial or physical differences
- Family history of hearing loss or congenital conditions

Treatment and management

No treatment is required if an ear tag is not causing problems. Leaving it in place does not usually harm the ear.

If removal is wanted, the method depends on the tag's size and attachment, whether it contains cartilage, and the person's age. A clinician can explain the likely scar and what pain relief or anaesthesia will be used.

Surgical excision removes the tag through a small cut. Any cartilage stalk beneath the skin is also removed so that a firm bump is not left behind. The skin is then closed, often with stitches. The procedure may be performed by a plastic, ear, nose and throat, paediatric, or dermatologic surgeon, or another appropriately experienced clinician.

Very small tags with a narrow stalk and no cartilage may sometimes be treated with a clip or by tying off their blood supply. The tissue dries and falls away. This is not suitable for every tag: if cartilage extends into the base, tying it off may leave a noticeable lump.

Do not cut, burn, freeze, or tie off an ear tag at home. These methods can cause bleeding,

infection, skin injury, scarring, or incomplete removal.

After professional removal, the area may be mildly sore or swollen for a short time. Follow the specific care instructions for stitches, dressings, or skin adhesive. A small scar is expected but often becomes less noticeable over time.

Complications

An untreated ear tag rarely causes medical complications. Irritation from repeated rubbing or pulling is the most common practical problem.

Possible complications of removal include bleeding, infection, changes in skin colour, a raised or widened scar, or a remaining cartilage bump. Complete removal usually prevents the tag from returning, but no procedure can guarantee an invisible scar.

Some people develop thick, raised hypertrophic scars or keloids. The risk is higher in those who have formed these scars before and should be discussed with the surgeon before elective removal.

An ear tag may occur alongside hearing loss or other congenital differences, but it does not directly cause them. A wider condition is more likely to be considered when there are several unusual findings rather than one isolated tag.

Prevention

An ear tag cannot usually be prevented. It develops while the ear is forming before birth, and there is no established action during pregnancy that prevents it.

If an ear tag is part of an inherited syndrome, genetic counselling may help a family understand the condition and the chance of it occurring in another pregnancy. This does not apply to most isolated tags.

Avoiding repeated pulling or friction can reduce irritation. Home removal should be avoided because it can cause preventable injury.

Living with it and what to expect

An ear tag generally remains harmless throughout life. It may appear larger as a child's face and ears grow, but it does not normally spread into nearby skin or become cancerous.

Children with an isolated ear tag can usually take part in normal activities without restrictions.

Bathing, swimming, travel, sports, and routine ear care do not need to change. If a helmet, hearing device, or other equipment rubs the area, adjusting its fit may help.

Some families choose removal during infancy or childhood, while others wait until the person can participate in the decision. Some never remove it. Timing is usually based on irritation, appearance, the required procedure, and local surgical practice rather than medical urgency.

If the tag remains in place, routine monitoring is not usually needed. Mention it during an ordinary health visit if concerns arise about hearing, speech development, or other physical differences.

Feelings about appearance may change with age. Professional removal remains an option later, although the technique and type of anaesthesia may differ with age and tag size.

When to get medical help

Arrange a routine appointment if an ear tag has not been assessed before, if you are considering removal, or if it repeatedly catches, bleeds, or becomes sore. Review is also appropriate if there are concerns about hearing, speech development, ear shape, or other differences present from birth.

Seek prompt medical advice if the skin becomes increasingly red, warm, swollen, painful, or starts producing pus. These may be signs of infection, particularly after injury or attempted home treatment.

Get urgent help if bleeding is heavy or does not stop after steady pressure with clean gauze. This is unusual unless the tag has been cut or torn.

The tag itself is not an emergency. Sudden hearing loss, severe ear pain, or discharge from the ear canal should still be assessed promptly, although these symptoms are unlikely to be caused by an uncomplicated ear tag.

Common questions

Is an ear tag dangerous?

An isolated ear tag is usually harmless. It does not normally damage the ear or become cancerous. A clinician may check for other congenital differences, but most people with a single tag do not have a wider medical problem.

Does an ear tag mean my baby has hearing loss?

No. Many babies with ear tags have normal hearing. Newborn hearing screening remains

important, and further testing may be needed if the screen is not passed or concerns about hearing or speech develop.

Does an ear tag mean there is a kidney problem?

Usually not. Kidney ultrasound is not generally needed for a healthy child whose only finding is an isolated ear tag. Imaging may be considered if there are other congenital differences, concerning examination findings, or a relevant family history.

Can I tie off an ear tag at home?

No. Some tags contain cartilage or have a wider blood supply than they appear to have. Home treatment can cause bleeding, infection, scarring, or a remaining lump. A healthcare professional should determine whether removal is suitable.

Will an ear tag fall off by itself?

Usually not. An untreated tag generally stays attached and grows in proportion with the person. A professionally placed clip or ligature may make a suitable small tag fall off, but this is a treatment rather than its natural course.

Will removal leave a scar?

Yes, some scarring is expected whenever skin is cut or injured. It is often small and becomes less noticeable with time, but the final appearance cannot be guaranteed. Scar risk depends on the tag, removal method, healing, and personal tendency to form raised scars.

Sources

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