



Rancho Los Amigos National Rehabilitation Center

Communication Disorders Department - Audiology

Policy and Procedure

SUBJECT: HEARING AID ASSESSMENT

Policy No.: 413
Supersedes: September 1990
Revision Date: February 2022
Page: 1 of 3

PURPOSE

To outline the procedures necessary to provide a hearing aid assessment.

POLICY

A hearing aid assessment is conducted to determine whether a patient is a candidate for amplification or whether the patient's current amplification system is effective. Assessment results in follow-up and/or referral for hearing aid fitting/orientation. Individuals of all ages with hearing loss may receive a hearing aid assessment as a result of audiologic assessment and/or referral from a physician.

Hearing Aid Assessment is conducted according to the Fundamental Components of Preferred Practice Patterns

PROCEDURES

Assessment:

1. The hearing aid assessment will be performed after the patient has had a pediatric, basic and/or comprehensive audiologic assessment (see Communication Disorders Department Policy- Basic Audiologic Assessment, Pediatric Audiologic Assessment and Comprehensive Audiologic Assessment).
2. The hearing aid assessment may include but is not limited to:
 - a. Developmentally appropriate behavioral testing (e.g. frequency-specific measures of functional gain in sound field using warbled pure-tones)
 - b. Most comfortable loudness (MCL) and uncomfortable loudness (UCL) level measures to include thresholds of discomfort using freq specific stimuli (ASHA, 1998).
 - c. Speech audiometry
 - d. Real-ear measurements
 - e. Electroacoustic evaluations of hearing aids
 - f. Determination of ear mold characteristics, hearing aid configuration, and internal control specifications
 - g. Discussion of benefits and limitations of hearing aids given the patients/clients Audiologic assessment, Psychosocial, and communication needs.

3. Hearing aid(s) are recommended on the basis of the patient's audiologic and communicative needs and on the results of all or part of the above test battery.
4. A patient will be considered for procurement of a hearing aid after:
 - a. The patient has received medical clearance from an ENT physician or the patient's primary care physician,
 - b. When the patient has been considered a candidate for hearing aid use by the audiologist.
5. The patient will be referred to a vendor of the patient/family's choice that is as close to place of residence as possible with the recommendation of the hearing aid make, model, and frequency response for procurement.
6. If the audiologist cannot procure the hearing aid through existing channels at this hospital, the patient may be referred to other appropriate agencies.
7. Patients and/or families are informed about cost, warranty, and how to obtain any needed repair or modification of the hearing aid(s).
8. Assessment uses measurable acoustic stimuli (e.g., pure tones, broadband noise).
9. Specifications for electroacoustic equipment and environmental ambient noise meet ANSI standards, where applicable.
10. Instrumentation and test environments are available for sound field testing, electroacoustic evaluation of hearing aids, and real-ear measurements.
11. Patients with identified hearing loss:
 - a. Receive follow-up services to monitor audiologic status and to insure appropriate treatment.
 - b. Appropriate referrals may include but are not limited to:
 1. Referrals to outside vendors for ear molds and/or hearing aids or assistive devices.
 2. Referrals to other disciplines such as ENT, Speech-Language Pathology, Neurology.
 3. Referrals to funding agencies such as California Children's Services (CCS).
12. For documentation of the hearing aid assessment see Communication Disorders Department Policy- Content of the Audiology Note. Setting/Equipment Specifications pg.57

SUBJECT: HEARING AID ASSESSMENT
RANCHO LOS AMIGOS NATIONAL REHABILITATION
CENTER

Policy No.: 413
Supersedes: September 1990
Page: 3 of 3

Source: Preferred Practice Patterns for the Professions of Speech-Language Pathology and Audiology, ASHA • Supplement No. 11, March 1993.

American Speech and Hearing Association, Committee on Audiometric Evaluation (1978a). Guidelines for manual pure tone threshold audiometry. ASHA, 20, 297-301.

American National Standards Institute (1977), Criteria for permissible ambient noise during audiometric testing. ANSI S3.1 -1977. New York: American National Standards.

American National Standards Institute (1989). American national standard specification for audiometers. ANSI S3.6 -1989. New York: American National Standards Institute.

ASHA.org Preferred Practice Patterns, Audiology

