

## ADULT AUDIOMETRIC DISABILITY EVALUATION AND REPORT GUIDELINES

In instances when audiometry testing is requested, quantitative findings should be determined by an audiometer which meets the standards of the American National Standards Institute (ANSI) for air and bone conducted stimuli. Standardization must be noted in the report.

Testing must be conducted in a soundproof booth or room and through the use of earphones or inserts. **Each ear must be tested separately. Hearing aids should NOT be worn during testing.** Information regarding method used must accompany results (i.e. manual, automatic, or computerized).

### (1) Tympanometry.

- (a) Perform prior to audiometry to ensure there are no conditions that would prevent valid audiometric testing (i.e. fluid in the ear, ear infection, or obstruction of the ear canal)
- (b) Report any other factors that can affect the interpretation of the test results (i.e. DDDS claimant's level of cooperativeness)
- (c) Specify the reason if testing cannot be performed

### (2) Otologic Examination (if requested).

- (a) Must be performed immediately before audiometric testing takes place
- (b) Describe pinna, external auditory canals, and tympanic membranes

### (3) Audiometry.

- (a) Pure Tone Air and Bone Conduction: Provide testing results at **500, 1000 and 2000 Hz**. Audiogram results must accompany the report. If no amplification is used, provide reason for not using amplification.
- (b) Speech Reception Threshold: If not within 10 dB of average pure tone air conduction hearing threshold, the reason for discrepancy must be explained
- (c) Speech Discrimination: This test must be performed in quiet using a standardized list of phonetically balanced monosyllabic words at a sound level of 35 to 40 dB above a previously determined speech discrimination in the absence of any visual cues (i.e. no lip reading).
  - (A) If the DDDS claimant cannot be tested at 35 to 40 dB above his/her SRT, report the DDDS claimant's word recognition testing score at the highest comfortable level of amplification and indicate the level at which the testing was performed.
  - (B) If a DDDS claimant is not fluent in English, a word list should be used for the language in which the person is most fluent.
  - (C) The person conducting the test should also be fluent in the language used for the test.
  - (D) Testing methodology may vary with use of earphone amplification or sound field (booth) amplification.
  - (E) Speech detection using visual cues is not appropriate for exams.

### (4) Cochlear Implants. For DDDS claimants with cochlear implants, word recognition testing can be performed with any version of the Hearing in Noise Test (HINT). Testing must be conducted in quiet in a sound field. The cochlear implant must be functioning properly and adjusted to the DDDS claimant's normal settings. The sentences should be presented at 60 dB HL (Hearing Level) and without any visual cues.

### (5) Ability to Communicate. Clinical information describing the DDDS claimant's ability to communicate with the evaluator is an excellent resource and should be used to assess the

validity of audiometric testing.

- (6) **Development of Speech.** Indicate if the DDDS claimant can hear normal conversational voice, and comment on speech to include audibility, sustainability, and understandability.
- (7) **Aids.** The ability to effectively wear a hearing aid must be noted.
- (8) **Diagnosis/Impression.**
  - (a) Provide a diagnosis based on interpretation of the examination results that takes into account, and correlates with, the history and examination findings
  - (b) Do not give diagnoses based solely on the DDDS claimant's subjective complaints
  - (c) Based on the objective examination findings, provide an opinion of the DDDS claimant's ability to do work related activities despite his/her impairment(s)
- (9) **Report Signature.** The report is required to be reviewed and signed by the individual who performed the audiometric evaluation.
  - (a) A rubber stamp signature is not acceptable

### **CHILD AUDIOMETRIC DISABILITY EVALUATION AND REPORT GUIDELINES**

In instances when audiometry testing is requested, quantitative findings should be determined by an audiometer which meets the standards of the American National Standards Institute (ANSI) for air and bone conducted stimuli. Standardization must be noted in the report.

Testing must be conducted in a soundproof booth or room and through the use of earphones or inserts. **Each ear must be tested separately. Hearing aids should NOT be worn during testing.** Information regarding method used must accompany results (i.e. manual, automatic, or computerized).

#### **(1) Tympanometry.**

- (a) Perform prior to audiometry to ensure there are no conditions that would prevent valid audiometric testing (i.e. fluid in the ear, ear infection, or obstruction of the ear canal)
- (b) Report any other factors that can affect the interpretation of the test results (i.e. DDDS claimant's level of cooperativeness)
- (c) Specify the reason if testing cannot be performed

#### **(2) Otologic Examination** (if requested).

- (a) Must be performed immediately before audiometric testing takes place
- (b) Describe appearance of external ears (pinnae and external ear canals)
- (c) Evaluate tympanic membranes and assess any middle ear abnormalities

#### **(3) Audiometry.**

- (a) Birth to Age 6 Months: Indicate air conduction thresholds determined by auditory brainstem response (ABR) testing. Provide testing results at **500, 1000, 2000** and **4000 Hz**.
- (b) Age 6 Months to Age 5 Years: Indicate air conduction thresholds determined by visual reinforcement audiometry (VRA). Provide testing results at **500, 1000, 2000** and **4000 Hz**.

Results of ABR can be used if behavioral assessment cannot be completed or if test results are incomplete or unreliable.

- (c) **Age 5 Years to Age 18 Years:** Indicate pure tone and speech audiometry. Include:
  - i. **Pure Tone Air and Bone Conduction:** Provide testing results at **500, 1000, 2000** and **4000 Hz**. Audiogram results must accompany the report. If no amplification is used, provide reason for not using amplification.
  - ii. **Speech Reception Threshold (SRT):** If not within 10 dB of average pure tone air conduction hearing threshold, the reason for discrepancy must be explained.
  - iii. **Speech Discrimination:** This test must be performed in quiet using a standardized list of phonetically balanced monosyllabic words at a sound level of 35 to 40 dB above a previously determined speech reception threshold (SRT). The SRT is necessary to determine speech discrimination in the absence of any visual cues (i.e. no lip reading).
    - (A) If the DDDS claimant cannot be tested at 35 to 40 dB above his/her SRT, report the DDDS claimant's word recognition testing score at the highest comfortable level of amplification and indicate the level at which the testing was performed
    - (B) If a DDDS claimant is not fluent in English, a word list should be used for the language in which the person is most fluent
    - (C) The person conducting the test should also be fluent in the language used for the test
    - (D) Testing methodology may vary with use of earphone amplification or sound field (booth) amplification
    - (E) Speech detection using visual cues is not appropriate for exams
- (4) **Cochlear Implants.** For DDDS claimants from age 5 to age 18 years with cochlear implant(s), word recognition testing can be performed with any version of the Hearing in Noise Test (HINT). Testing must be conducted in quiet in a sound field. The cochlear implant must be functioning properly and adjusted to the DDDS claimant's normal settings. The sentences should be presented at 60 dB HL (Hearing Level) and without any visual cues.
- (5) **Ability to Communicate.** Clinical information describing the DDDS claimant's ability to communicate with the evaluator is an excellent resource and should be used to assess the validity of audiometric testing.
- (6) **Development of Speech.** Indicate if the DDDS claimant can hear normal conversational voice, and comment on speech to include audibility, sustainability, and understandability.
- (7) **Aids.** The ability to effectively wear a hearing aid must be noted.
- (8) **Diagnosis/Impression.**
  - (a) Provide a diagnosis based on interpretation of the examination results that take into account, and correlates with, the history and examination findings
  - (b) Do not give diagnoses based solely on the DDDS claimant's subjective complaints
  - (c) Based on the objective examination findings, provide an opinion of the DDDS claimant's (or child's) limitations in abilities/activities which result from the impairment(s) examined
- (9) **Report Signature.** The report is required to be reviewed and signed by the individual who performed the audiometric evaluation.
  - (a) A rubber stamp signature is not acceptable
  - (b) It is not acceptable to indicate "not proofed" or "dictated, but not read" on the report