Date of evaluation: April 7, 2020

**BACKGROUND**

XX XX, age 69, was seen for an audiological assessment. Ms. XX‘s main concern/complaint was increasing difficulty hearing in her family. She reported increasing difficulty over the past 2 years. Mrs. XX’s history was negative for (*Insert appropriate history.).* Her last hearing evaluation was approximately seven years ago at Swedish Hospital. Those results are not available today, but she recalls some degree of hearing loss was indicated for both ears.

**TEST RESULTS**

Otoscopy revealed clear ear canals and normal landmarks bilaterally. Pure tone air and bone conduction testing revealed a mild hearing loss at 250Hz sloping to a moderate loss from 500Hz through 3000Hz and further sloping to a severe loss from 4000Hz-8000Hz bilaterally. The loss is sensorineural in nature. Speech recognition thresholds were in good agreement with the pure tone averages for both ears. The maximum word recognition score obtained (via recorded NU-6 word lists) in the right ear at 65dBHL was 100 % and in the left ear at 75dBHL was 88%. Quick Speech-In-Noise Test (QSIN) results demonstrated a signal to noise ratio (SNR) loss of -9 for both ears. Tympanometry demonstrated normal middle ear pressure, ear canal volume and admittance for both ears. Acoustic reflex thresholds were present in the ipsi and contralateral conditions at 1000Hz bilaterally. Otoacoustic emissions (OAE) were absent bilaterally.

**INTERPRETATION AND RECOMMENDATIONS**

Today’s evaluation revealed a mild sloping to severe sensorineural hearing loss bilaterally with good reliability of results. Understanding of single words in quiet was excellent for both ears, however, QuickSIN results demonstrated moderate difficulty understanding sentences in background noise for both ears. Middle ear function was within normal limits and acoustic reflexes thresholds were present at reduced levels in comparison to pure tone thresholds consistent with the degree and type of hearing loss. Likewise, OAEs were understandably absent*.* Test results are consistent with a significant hearing impairment through the speech range and explain Ms XX’s communication complaints. The following recommendations were made:

* Ms. XX is a candidate for binaural amplification. She has scheduled a consultation appointment on April 11, 2015.
* A hearing test every 2 years to monitor for changes in hearing, sooner if needed.

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