

**How to Improve
your Quality of
Care to Benefit
Your Patients
MORE!**

A close-up photograph of a hand turning a silver dial. The dial has a black center with the words 'QUALITY LEVEL' in white, bold, sans-serif capital letters. The dial is set against a dark background with blue light accents. The hand is positioned on the left side of the dial, with the thumb and index finger visible, turning it clockwise.

**QUALITY
LEVEL**

The Good Old Days



HEARING AID CENTER



HEARING AIDS AVAILABLE HERE
Free Hearing Test
BY A LICENSED PROFESSIONAL
LATEST TECHNOLOGY CUSTOM FIT DIGITAL HEARING AIDS
COSTCO

Reception area with a white counter and a black computer monitor. A white door is visible in the background.

Service area featuring a white counter with a black hearing aid fitting machine, a white door, and a display rack containing various hearing aid products and brochures.

TruHearing®

DrC
DrCliffAuD



EPIC
HEARING HEALTHCARE



UnitedHealthcare®

amplifon

OTC



SONY

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VALID
THRU 06/27

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DEBIT

VISA

IN U.S.

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FREE
Hearing Test




and soil conservation.

The biggest expansion of affordable health care in a decade:

Reduces prescription drug costs. 

Strengthens the Affordable Care Act and reduces premiums for 9 Million Americans. 

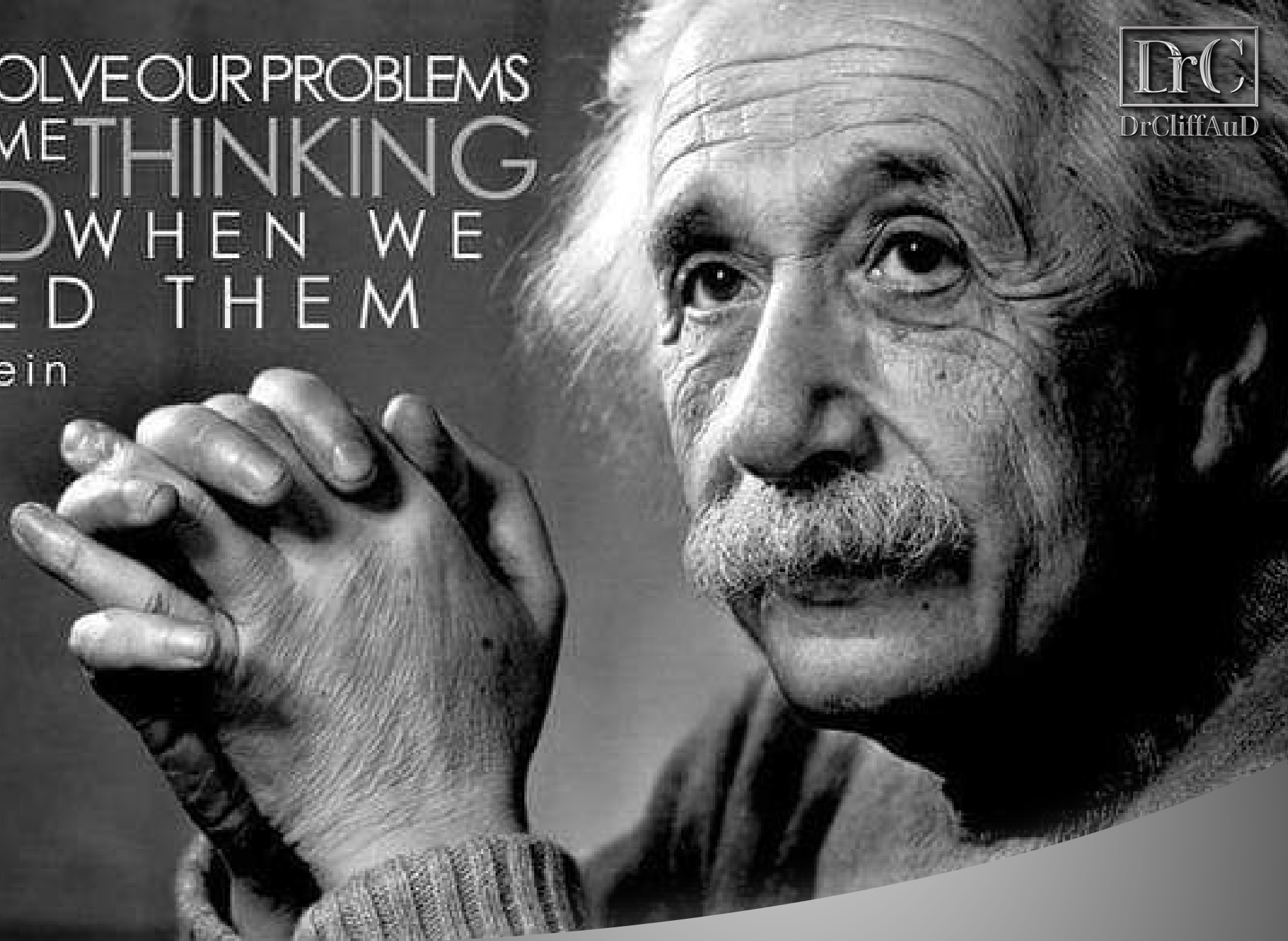
Closes the Medicaid Coverage Gap, Leading 4 Million Uninsured People to Gain Coverage. 

Expands Medicare to cover hearing benefits. 

The most significant effort to bring down costs and strengthen the middle class in generati

WE CANNOT SOLVE OUR PROBLEMS
WITH THE SAME THINKING
WE USED WHEN WE
CREATED THEM

-Albert Einstein



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Fred Joyal

FOUNDER OF 1-800-DENTIST®
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THE PUMPKIN PLAN



MIKE MICHALOWICZ

AUTHOR OF THE TOILET PAPER ENTREPRENEUR





Quality is never an accident; it is always the result of high intention, sincere effort, intelligent direction and skillful execution; it represents the wise choice of many alternatives.

(William A. Foster)



Doctor Cliff, AuD

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Sharing inside information about hearing care and hearing aids to help make you a better i... >

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BEST

PRACTICE

solutions

customers

technique

skills

organizational

improvement

satisfaction

good

quality

results

analysis

business

consistency

standard

development

optimal

management

quality

success

Guidelines for the Audiologic Management of Adult Hearing Impairment

Task Force Members

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Harvey Abrams
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Angela Loavenbruck
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Helena Solodar
Robert Sweetow

1. INTRODUCTION

This document was prepared by the American Academy of Audiology Task Force for Guidelines for the Audiologic Management of Adult Hearing Impairment. The specific goal of this document is to provide a set of statements, recommendations, and strategies for best practice in the provision of a comprehensive treatment plan for the audiologic management of adults with hearing loss. Specific statements and recommendations were made by initially reviewing the existing scientific evidence published in peer-reviewed and non-peer-reviewed journals. When direct evidence (i.e., evidence directly relating clinical procedures to the principal health outcomes) was not available, both indirect evidence, which involves examining two or more bodies of evidence to relate the clinical procedures to the principal health outcomes,¹ and consensus practice were considered in making recommendations. This guideline addresses the technical aspects of hearing aid selection, fitting, verification, and validation, but within the context of a comprehensive treatment plan. This guideline does not address treatment with cochlear implants.

In the process of making specific statements, recommendations, and strategies, careful consideration was given to the elements of care that optimize patient outcomes. The primary effects of hearing loss are addressed by the World Health Organization's International Classification of Functioning, Disability, and Health's (WHO-ICF) classification b230 which relates to hearing function, specifically, the function of sensing the presence of sound and discriminating the location, pitch, loudness, and quality of sound.

Best Practices

- 1. Assessment & Goal Setting**
- 2. Technical Aspects of Treatment**
- 3. Orientation, Follow-up, & Counseling**
- 4. Assessing Outcomes**

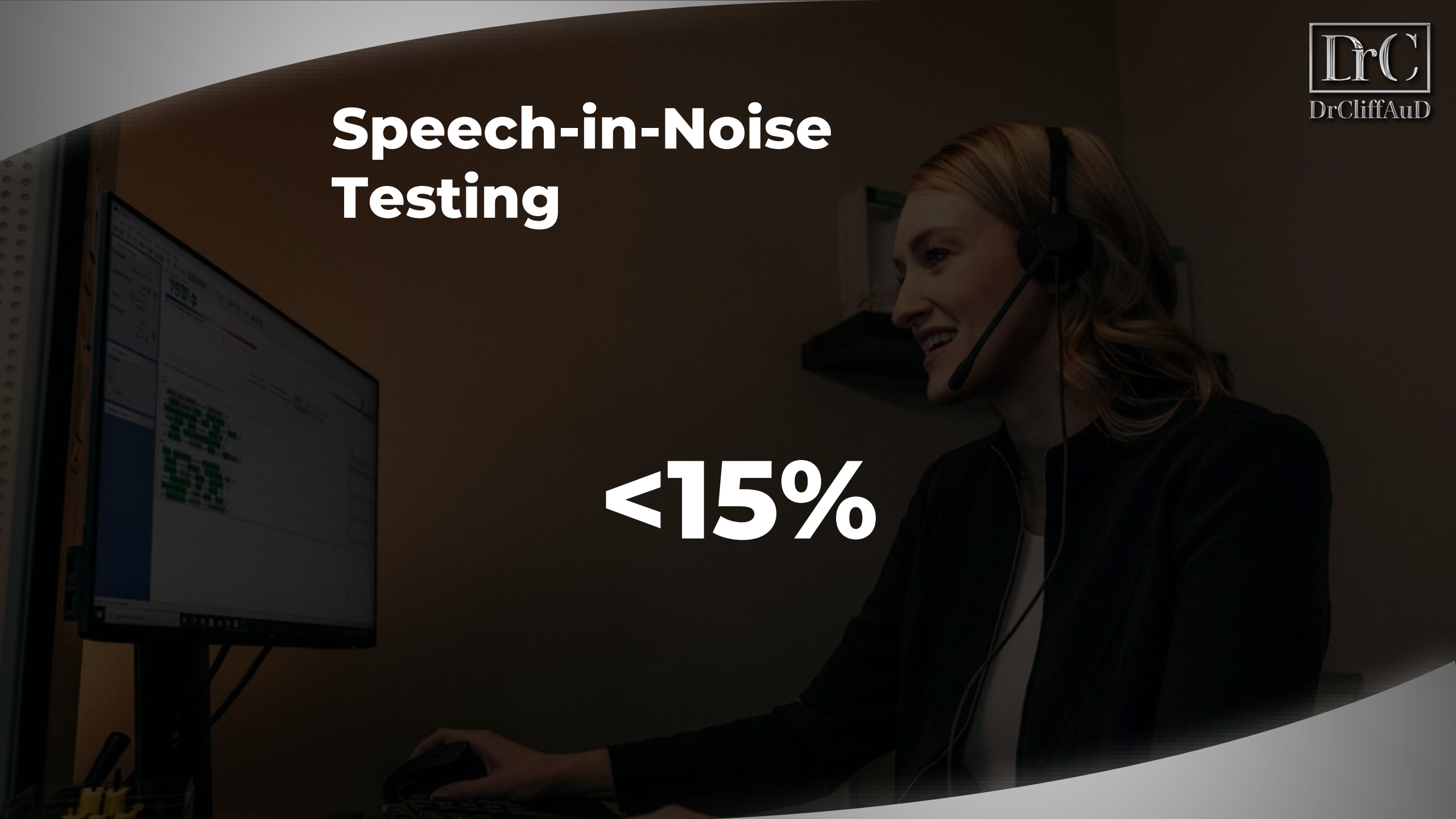
substantive undoubted
palpability positive recognizable
indisputable palpable
touchable manifest detectable essential unmistakable
physical distinctly conformation material
appreciable conspicuous sensible
concrete
visible clear-cut clear solid tactile obvious
real hard measurable
intelligible apparent actual certainty accuracy
striking definite well-documented discernible verifiable
identifiable corporeal marked perceptible
observable distinct corporeal marked
well-defined meaningful evident practical
positivistic noticeable
tangibility substantial

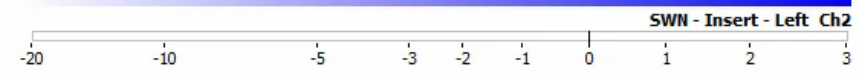
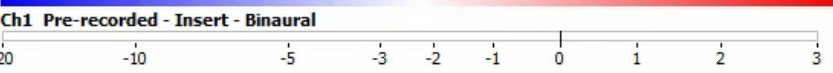
Friends are honest with
each other. Even if the
truth hurts.

Sarah Dessen

Speech-in-Noise Testing

<15%





Practice
 Omni
 High Frequency Emphasis
 Standard
 Directional
 High Frequency Emphasis Low Pass

 Continuous Playback

Tested lists are shown below. Click Play to start a new test.

List 1

a **WHITE SILK JACKET** goes with **ANY SHOES** (25)
 the **CHILD CRAWLED INTO** the **DENSE GRASS** (20)
FOOTPRINTS SHOWED the **PATH** he **TOOK** up the **BEACH** (15)
 a **VENT NEAR** the **EDGE** brought in **FRESH AIR** (10)
 it is a **BAND** of **STEEL THREE INCHES WIDE** (5)
 the **WEIGHT** of the **PACKAGE** was **SEEN** on the **HIGH SCALE** (0)

List 2

TEAR a **THIN SHEET** from the **YELLOW PAD** (25)
 a **CRUISE** in warm **WATERS** in a **SLEEK YACHT** is **FUN** (20)
 a **STREAK** of **COLOR** ran **DOWN** the **LEFT EDGE** (15)
 it was **DONE BEFORE** the **BOY** could **SEE IT** (10)
CROUCH BEFORE you **JUMP** or **MISS** the **MARK** (5)
 the **SQUARE PEG** will **SETTLE** in the **ROUND HOLE** (0)

Results

Test	Ear	Type	SNR Loss	Lists	Cate
1	Bin	Standard	2 dB	2	AC
May hear better than normals hear in noise.					
2					
3					
4					
5					
6					
7					
8					

SNR-50

SUBJECT	AGE	UNAIDED SNR-50 70 dB	P1 AIDED SNR-50	P2 AIDED SNR-50
1	63	+6 dB	+3 dB	+1 dB
2	75	CNT	+9 dB	+6 dB
3	23	+5 dB	+4 dB	+1 dB
4	36	+6 dB	+4 dB	+1 dB
5	47	+4 dB	+3 dB	+3 dB
6	56	+7 dB	+4 dB	+3 dB
7	32	+8 dB	+3 dB	+3 dB
8	59	+7 dB	+3 dB	+1 dB

TABLE 2. Subjects SNR-50s unaided and aided (P1 and P2). The unaided SNR-50 was 6 dB (on average for seven participants). When P1 was applied, the average SNR-50 improved by 4 dB (on average for eight participants). When P2 was applied, an additional 2-dB improvement in SNR-50 was obtained (on average for eight participants). When comparing unaided to P1 and P2, the improvement in SNR-50s ranged from 2- to 6-dB improvement.

ACT

ACTTM Score dB nCL	Contrast Loss	Predicted aided speech in noise performance	Fitting Advice
-4 to 4	Normal	Normal Range	Adaptive features set to minimum level – help preserve natural sound in all environments.
4 to 7	Mild	Mildly Poorer than Normal	Adaptive features set to slightly higher than minimum level – help preserve natural sound and improve speech understanding in the noisiest environments
7 to 10	Moderate	Moderately Poorer than Normal	Adaptive features set to slightly lower than the maximum level – help balance speech understanding while maintaining natural sound in moderately noisy environments
10 to 16	Severe	Severely Poorer than Normal	Adaptive features set to maximum level – help prioritize speech understanding in even the least noisy environments. Also consider streaming devices and communication training.

ElectroAcoustic Analysis (EAA)

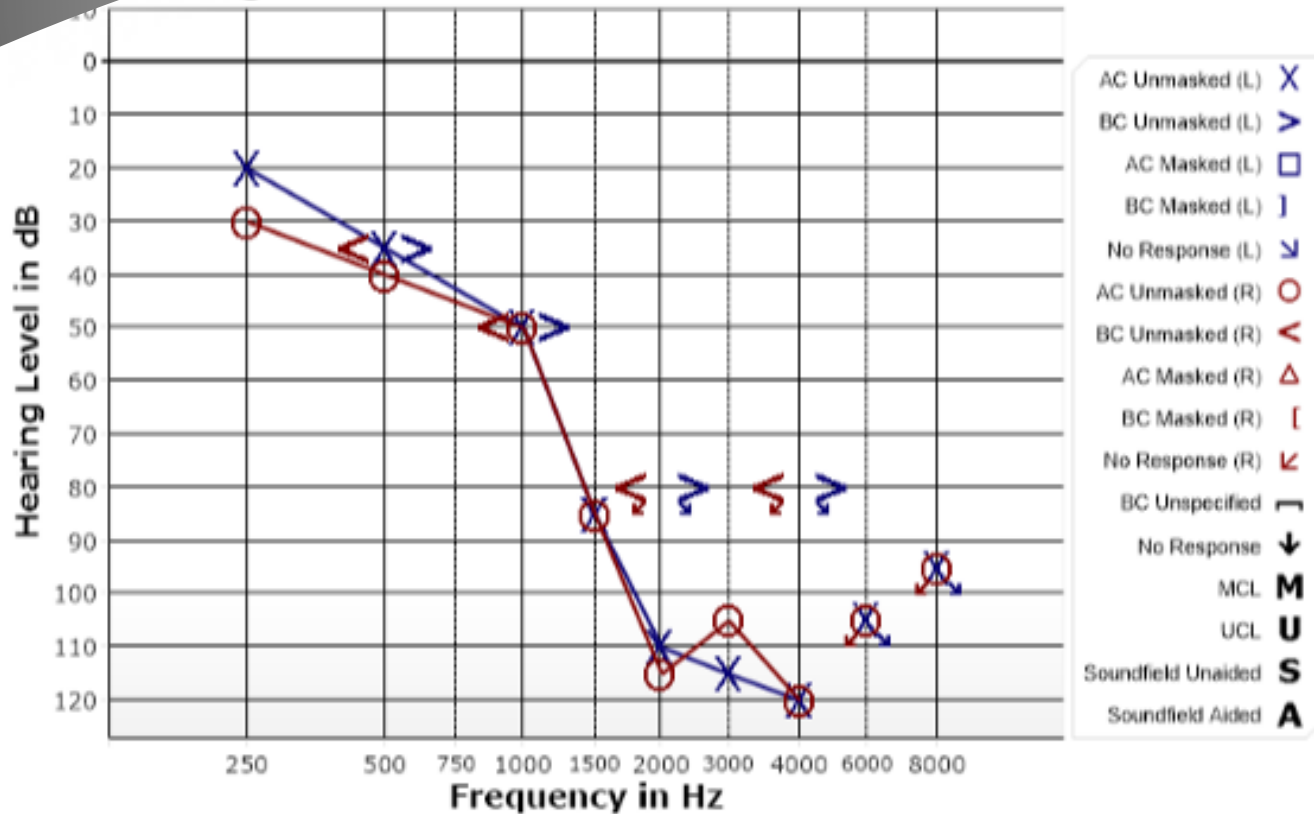


<5%

Do I need to do EAAs?



Audiogram



PTA (.5, 1, 2kHz)	
Right	Left
68.33	65

Neg: No significant reflex decay **Pos:** Significant reflex decay **Abs:** Absent **Pres:** Present **WNL:** Within Normal Limits **Red:** Reduced
NR: No Response **CNS:** Could Not Seal **CNT/DNT:** Could/Did Not Test **WR:** Word Recognition **SF:** Soundfield **EP:** Earphones

WORD RECOGNITION						
	dBHL	%	Mask	dBHL	%	Mask
Right	75	40	45			
Left	75	44	45			
Binaural	75	56				

SPEECH AUDIOMETRY				
	SAT	SRT	Mask	MCL
Right		65		
Left		65		



OTOSuite
File Edit View Measurement Tools Reports Help

Standard Tests FreeStyle
Measurements (ANSI S3.22-2009),
Coupler type: 2cc

Legend	Description	Value	Unit
<input checked="" type="checkbox"/>	OSPL 90 Max	118.7	dB SPL
<input checked="" type="checkbox"/>	OSPL 90 HFA	116.1	dB SPL
<input checked="" type="checkbox"/>	OSPL 90 500 Hz	115.9	dB SPL
<input checked="" type="checkbox"/>	OSPL 90 1600 Hz	114.8	dB SPL
<input checked="" type="checkbox"/>	FOG 50 HFA Gain	56.6	dB Gain
<input checked="" type="checkbox"/>	FOG 50 1600 Hz Gain	55.4	dB Gain
<input checked="" type="checkbox"/>	FOG 50 Max Gain	62.5	dB Gain
<input type="checkbox"/>	RTS 60 Min Frequency (F1)	-	Hz
<input type="checkbox"/>	RTS 60 Max Frequency (F2)	-	Hz
<input type="checkbox"/>	RTG 60 HFA Gain	-	dB Gain
<input checked="" type="checkbox"/>	THD 500 Hz	1.9	%
<input checked="" type="checkbox"/>	THD 800 Hz	1.2	%
<input checked="" type="checkbox"/>	THD 1600 Hz	0.9	%
<input checked="" type="checkbox"/>	Equivalent Input Noise	23.4	dB SPL
<input type="checkbox"/>	Battery Consumption	-	mA
<input type="checkbox"/>	Attack Time 2000 Hz	-	ms
<input type="checkbox"/>	Release Time 2000 Hz	-	ms
<input type="checkbox"/>	I/O 2000 Hz Knee Point	-	dB SPL
<input type="checkbox"/>	Telecoil (at 31.6 mA/m) HFA	-	dB SPL
<input type="checkbox"/>	Telecoil (at 31.6 mA/m) ETLS	-	dB
<input type="checkbox"/>	Telecoil (at 1 mA/m) MASL	-	dB SPL
<input type="checkbox"/>	Directionality Average (0 s)	-	dB

Frequency Response

1.8k Hz, 114 dB

dB SPL I/O at 2000 Hz

dB SPL Directionality Test

Directionality Adaptation:
0 seconds
Battery Pill: Not present
HI Type: None
HI Serial Number: None

Ready - No User Test loaded

OTOSuite
File Edit View Measurement Tools Reports Help

Standard Tests FreeStyle
Measurements (ANSI S3.22-2009),
Coupler type: 2cc

Legend	Description	Value	Unit
<input checked="" type="checkbox"/>	OSPL 90 Max	116.4	dB SPL
<input checked="" type="checkbox"/>	OSPL 90 HFA	113.1	dB SPL
<input checked="" type="checkbox"/>	OSPL 90 500 Hz	113.5	dB SPL
<input checked="" type="checkbox"/>	OSPL 90 1600 Hz	111.3	dB SPL
<input checked="" type="checkbox"/>	FOG 50 HFA Gain	48.3	dB Gain
<input checked="" type="checkbox"/>	FOG 50 1600 Hz Gain	47.8	dB Gain
<input checked="" type="checkbox"/>	FOG 50 Max Gain	53.9	dB Gain
<input type="checkbox"/>	RTS 60 Min Frequency (F1)	-	Hz
<input type="checkbox"/>	RTS 60 Max Frequency (F2)	-	Hz
<input type="checkbox"/>	RTG 60 HFA Gain	-	dB Gain
<input checked="" type="checkbox"/>	THD 500 Hz	0.8	%
<input checked="" type="checkbox"/>	THD 800 Hz	0.5	%
<input checked="" type="checkbox"/>	THD 1600 Hz	0.6	%
<input checked="" type="checkbox"/>	Equivalent Input Noise	21.5	dB SPL
<input type="checkbox"/>	Battery Consumption	-	mA
<input type="checkbox"/>	Attack Time 2000 Hz	-	ms
<input type="checkbox"/>	Release Time 2000 Hz	-	ms
<input type="checkbox"/>	I/O 2000 Hz Knee Point	-	dB SPL
<input type="checkbox"/>	Telecoil (at 31.6 mA/m) HFA	-	dB SPL
<input type="checkbox"/>	Telecoil (at 31.6 mA/m) ETLS	-	dB
<input type="checkbox"/>	Telecoil (at 1 mA/m) MASL	-	dB SPL
<input type="checkbox"/>	Directionality Average (0 s)	-	dB

Frequency Response

2.5k Hz, 72 dB

dB SPL I/O at 2000 Hz

dB SPL Directionality Test

Directionality Adaptation:
0 seconds
Battery Pill: Not present
HI Type: None
HI Serial Number: None

Ready - No User Test loaded



OTOSuite

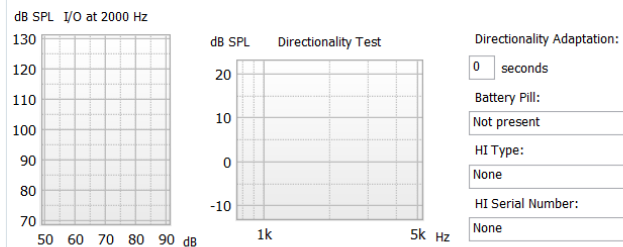
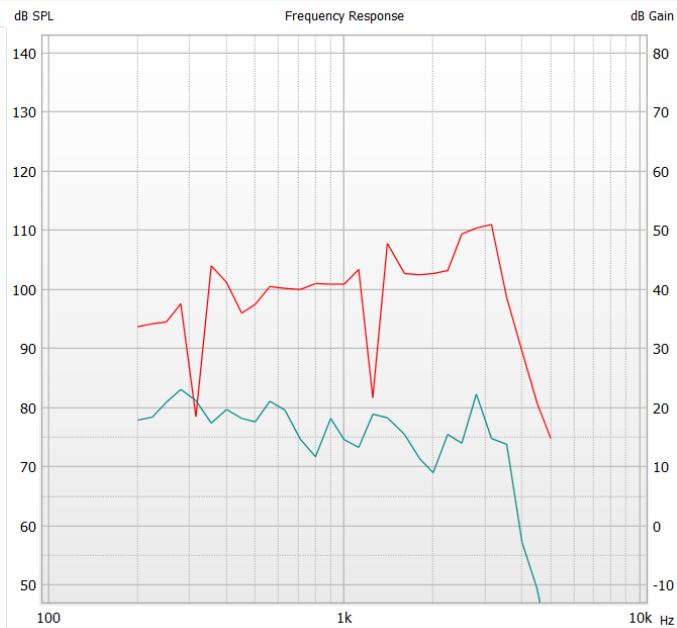
File Edit View Measurement Tools Reports Help



Standard Tests FreeStyle

Measurements (ANSI S3.22-2009),
Coupler type: 2cc

Legend	Description	Value	Unit
<input checked="" type="checkbox"/>	OSPL 90 Max	111.0	dB SPL
<input checked="" type="checkbox"/>	OSPL 90 HFA	104.3	dB SPL
<input checked="" type="checkbox"/>	OSPL 90 500 Hz	97.5	dB SPL
<input checked="" type="checkbox"/>	OSPL 90 1600 Hz	102.7	dB SPL
<input checked="" type="checkbox"/>	FOG 50 HFA Gain	14.7	dB Gain
<input checked="" type="checkbox"/>	FOG 50 1600 Hz Gain	15.5	dB Gain
<input checked="" type="checkbox"/>	FOG 50 Max Gain	23.1	dB Gain
<input type="checkbox"/>	RTS 60 Min Frequency (F1)	-	Hz
<input type="checkbox"/>	RTS 60 Max Frequency (F2)	-	Hz
<input type="checkbox"/>	RTG 60 HFA Gain	-	dB Gain
<input checked="" type="checkbox"/>	THD 500 Hz	-	%
<input checked="" type="checkbox"/>	THD 800 Hz	-	%
<input checked="" type="checkbox"/>	THD 1600 Hz	-	%
<input checked="" type="checkbox"/>	Equivalent Input Noise	-	dB SPL
<input type="checkbox"/>	Battery Consumption	-	mA
<input type="checkbox"/>	Attack Time 2000 Hz	-	ms
<input type="checkbox"/>	Release Time 2000 Hz	-	ms
<input type="checkbox"/>	I/O 2000 Hz Knee Point	-	dB SPL
<input type="checkbox"/>	Telecoil (at 31.6 mA/m) HFA	-	dB SPL
<input type="checkbox"/>	Telecoil (at 31.6 mA/m) ETLS	-	dB
<input type="checkbox"/>	Telecoil (at 1 mA/m) MASL	-	dB SPL
<input type="checkbox"/>	Directionality Average (0 s)	-	dB



OTOSuite

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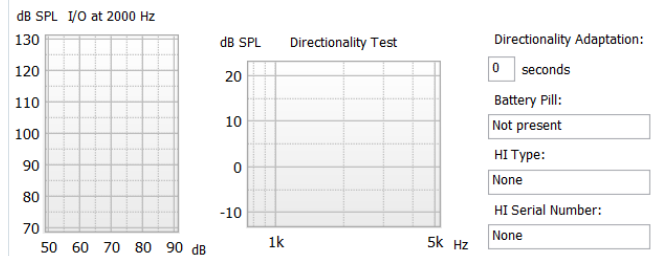
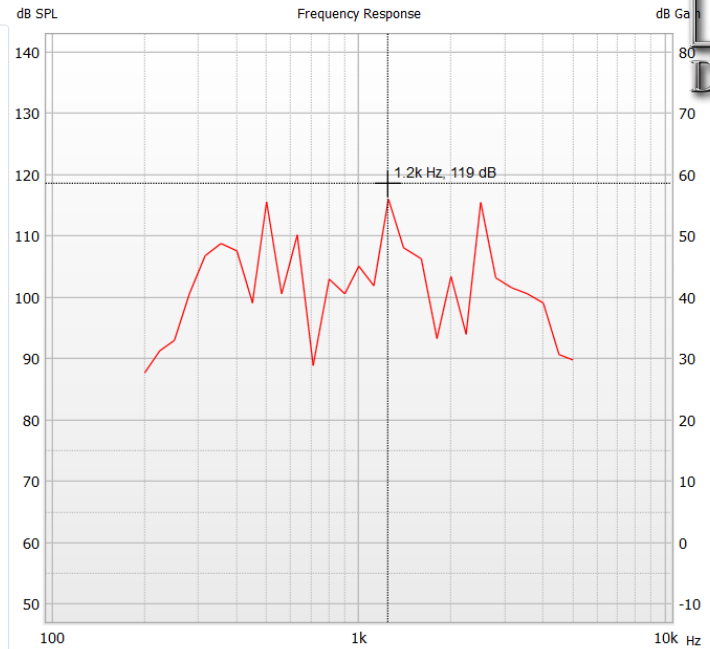


Standard Tests FreeStyle

Measurements (ANSI S3.22-2009),
Coupler type: 2cc

Legend	Description	Value	Unit
<input checked="" type="checkbox"/>	OSPL 90 Max	116.0	dB SPL
<input checked="" type="checkbox"/>	OSPL 90 HFA	109.0	dB SPL
<input checked="" type="checkbox"/>	OSPL 90 500 Hz	115.6	dB SPL
<input checked="" type="checkbox"/>	OSPL 90 1600 Hz	106.3	dB SPL
<input checked="" type="checkbox"/>	FOG 50 HFA Gain	-	dB Gain
<input checked="" type="checkbox"/>	FOG 50 1600 Hz Gain	-	dB Gain
<input checked="" type="checkbox"/>	FOG 50 Max Gain	-	dB Gain
<input type="checkbox"/>	RTS 60 Min Frequency (F1)	-	Hz
<input type="checkbox"/>	RTS 60 Max Frequency (F2)	-	Hz
<input type="checkbox"/>	RTG 60 HFA Gain	-	dB Gain
<input checked="" type="checkbox"/>	THD 500 Hz	-	%
<input checked="" type="checkbox"/>	THD 800 Hz	-	%
<input checked="" type="checkbox"/>	THD 1600 Hz	-	%
<input checked="" type="checkbox"/>	Equivalent Input Noise	-	dB SPL
<input type="checkbox"/>	Battery Consumption	-	mA
<input type="checkbox"/>	Attack Time 2000 Hz	-	ms
<input type="checkbox"/>	Release Time 2000 Hz	-	ms
<input type="checkbox"/>	I/O 2000 Hz Knee Point	-	dB SPL
<input type="checkbox"/>	Telecoil (at 31.6 mA/m) HFA	-	dB SPL
<input type="checkbox"/>	Telecoil (at 31.6 mA/m) ETLS	-	dB
<input type="checkbox"/>	Telecoil (at 1 mA/m) MASL	-	dB SPL
<input type="checkbox"/>	Directionality Average (0 s)	-	dB

Ready - No User Test loaded



Ready - No User Test loaded



Output

Gain

Distortion

Noise

Battery Drain

Directional Mics

Telecoil

OSPL90 Max +3dB

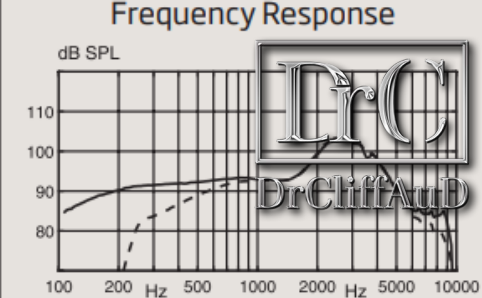
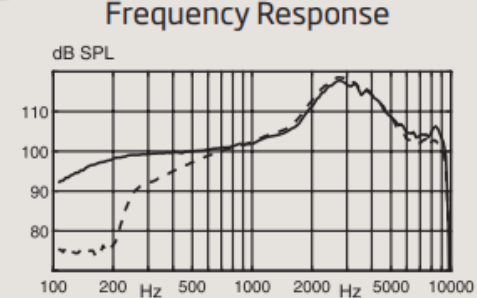
OSPL90 HFA +/- 4dB

FOG HFA +/-5dB

THD +3%

EIN +3dB

— Acoustic input: 60 dB SPL
- - - Magnetic input: 31.6 mA/m



OSPL90	Peak (dB SPL)	127	117
	1600 Hz (dB SPL)	121	113
	HFA-OSPL90 (dB SPL)	122	114
Full-on Gain ¹	Peak (dB)	66	55
	1600 Hz (dB)	53	45
	HFA-FOG (dB)	56	48
Reference test gain (dB)		46	37
Frequency range (Hz)		100-9500	100-8900
Telecoil output	1 mA/m field (1600 Hz) (dB SPL)	84	
	10 mA/m field (1600 Hz) (dB SPL)	104	
	HFA-SPLITS L/R (dB SPL)		96/96
Total harmonic distortion (Input 70 dB SPL)	500 Hz (%)	<2	<2
	800 Hz (%)	<4	<2
	1600 Hz (%)	<5	<2
Equivalent input noise level	Omni (dB SPL)	21	17
	Dir (dB SPL)	29	27
Battery consumption ²	Typical (mA)	2.4	2.4
	Quiescent (mA)	2.2	2.2
Battery life, artificial measurement, hours ³		75	
Expected battery life, hours (battery size 312 - IEC PR41) ⁴			

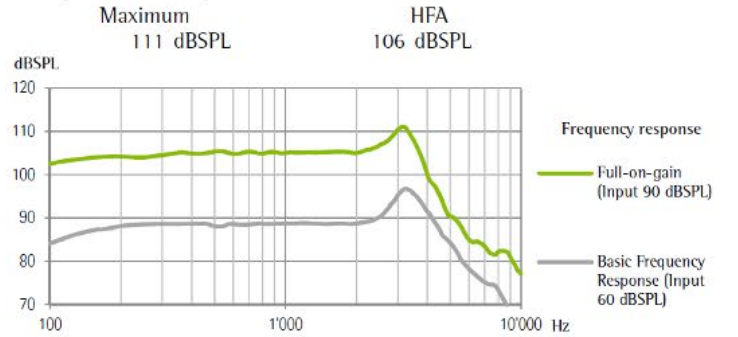


S Receiver

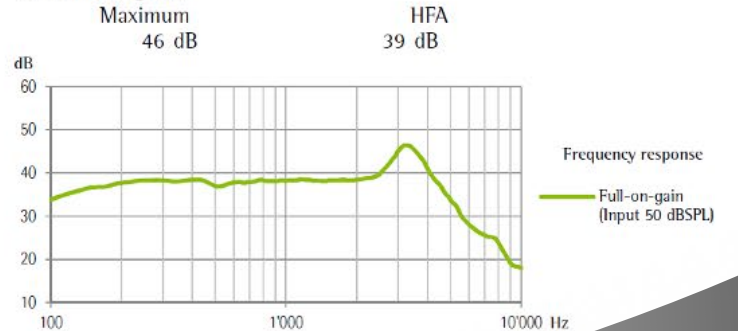
2 cm³ coupler data

ANSI / ASA S3.22-2014
IEC 60118-0 : 2015

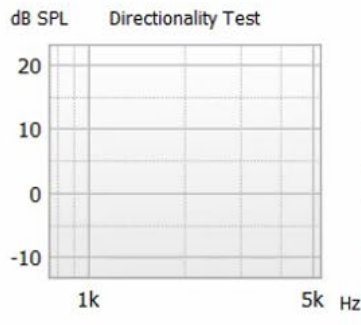
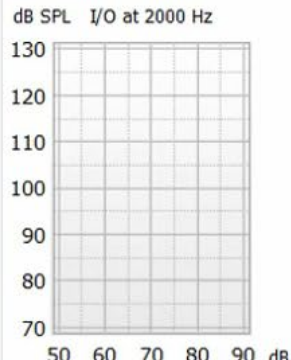
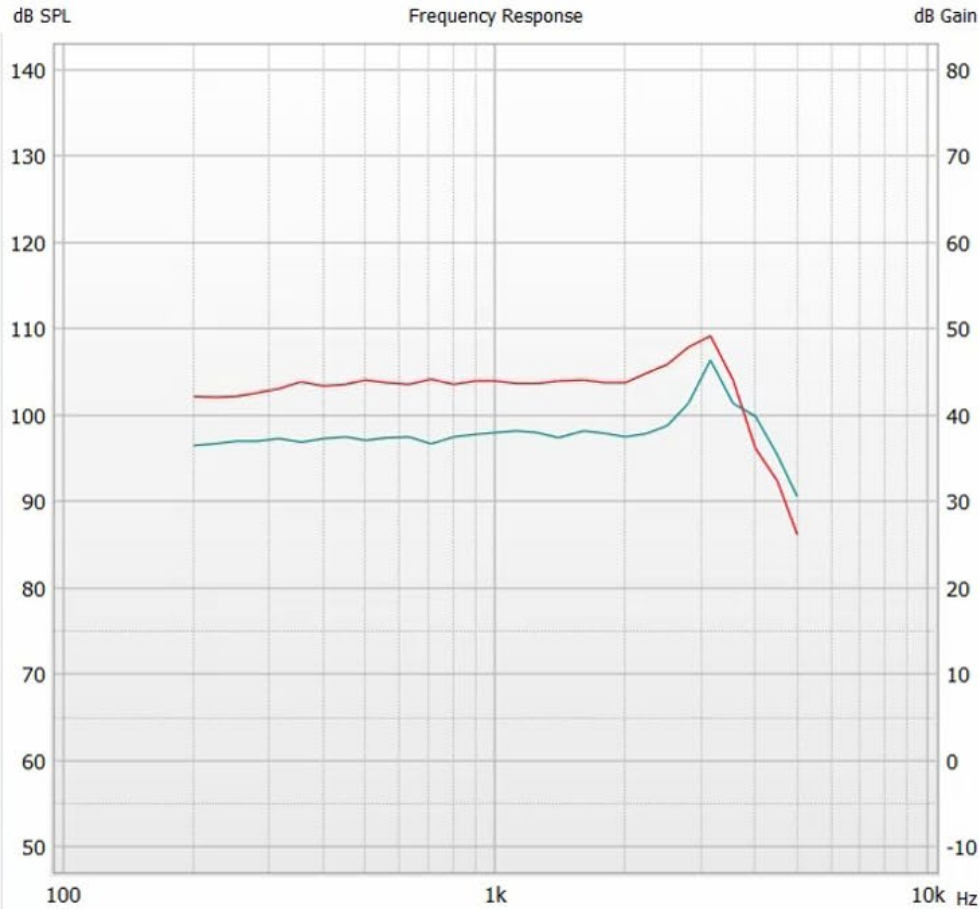
Output sound pressure level



Acoustic gain



Frequency range	<100 Hz - >8000 Hz
Total harmonic distortion	500 Hz
Expected operating time	
Equivalent input noise	



Directionality Adaptation:
 seconds

Detected Battery Pill:

HI Type:

HI Serial Number:

Description	Value	Unit
OSPL 90 Max	109.2	dB SPL
OSPL 90 HFA	104.7	dB SPL
OSPL 90 500 Hz	104.1	dB SPL
OSPL 90 1600 Hz	104.1	dB SPL
FOG 50 HFA Gain	38.3	dB Gain
FOG 50 1600 Hz Gain	38.2	dB Gain
FOG 50 Max Gain	46.4	dB Gain
RTS 60 Min Frequency (F1)	-	Hz
RTS 60 Max Frequency (F2)	-	Hz
RTG 60 HFA Gain	-	dB Gain
THD 500 Hz	0.4	%
THD 800 Hz	0.6	%
THD 1600 Hz	1.7	%
Equivalent Input Noise	19.2	dB SPL
Battery Consumption	-	mA
Attack Time 2000 Hz	-	ms
Release Time 2000 Hz	-	ms
I/O 2000 Hz Knee Point	-	dB SPL
Telecoil (at 31.6 mA/m) HFA	-	dB SPL
Telecoil (at 31.6 mA/m) ETLS	-	dB
Telecoil (at 1 mA/m) MASL	-	dB SPL
Directionality Average (0 s)	-	dB

~30-35%

**Real Ear
Measurement**

Randomized Controlled Trial > J Am Acad Audiol. 2018 Sep;29(8):706-721.

doi: 10.3766/jaaa.17005.

Differences in Word and Phoneme Recognition in Quiet, Sentence Recognition in Noise, and Subjective Outcomes between Manufacturer First-Fit and Hearing Aids Programmed to NAL-NL2 Using Real-Ear Measures

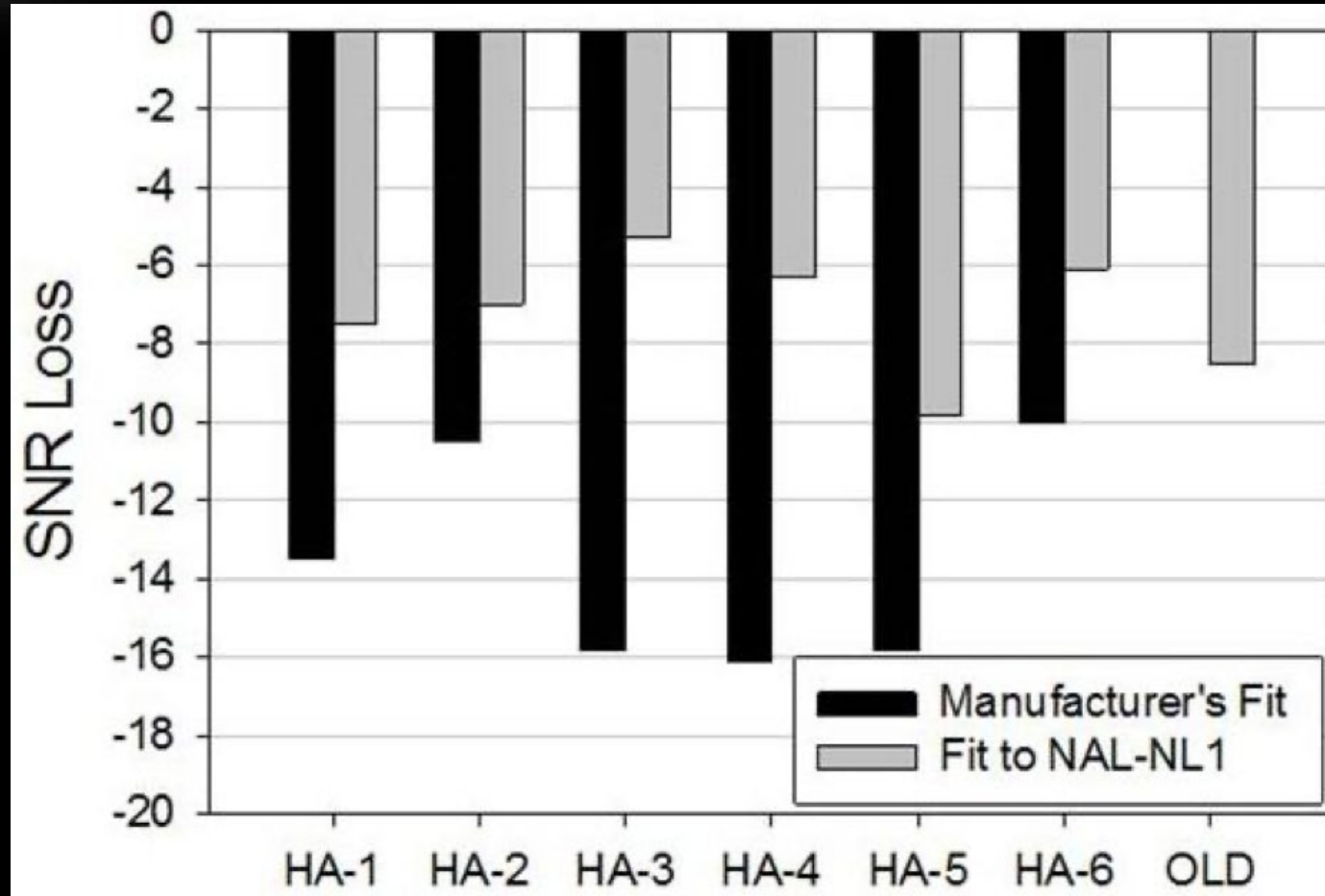
Michael Valente ¹, Kristi Oeding ¹, Alison Brockmeyer ¹, Steven Smith ¹, Dorina Kallogjeri ¹

Affiliations + expand

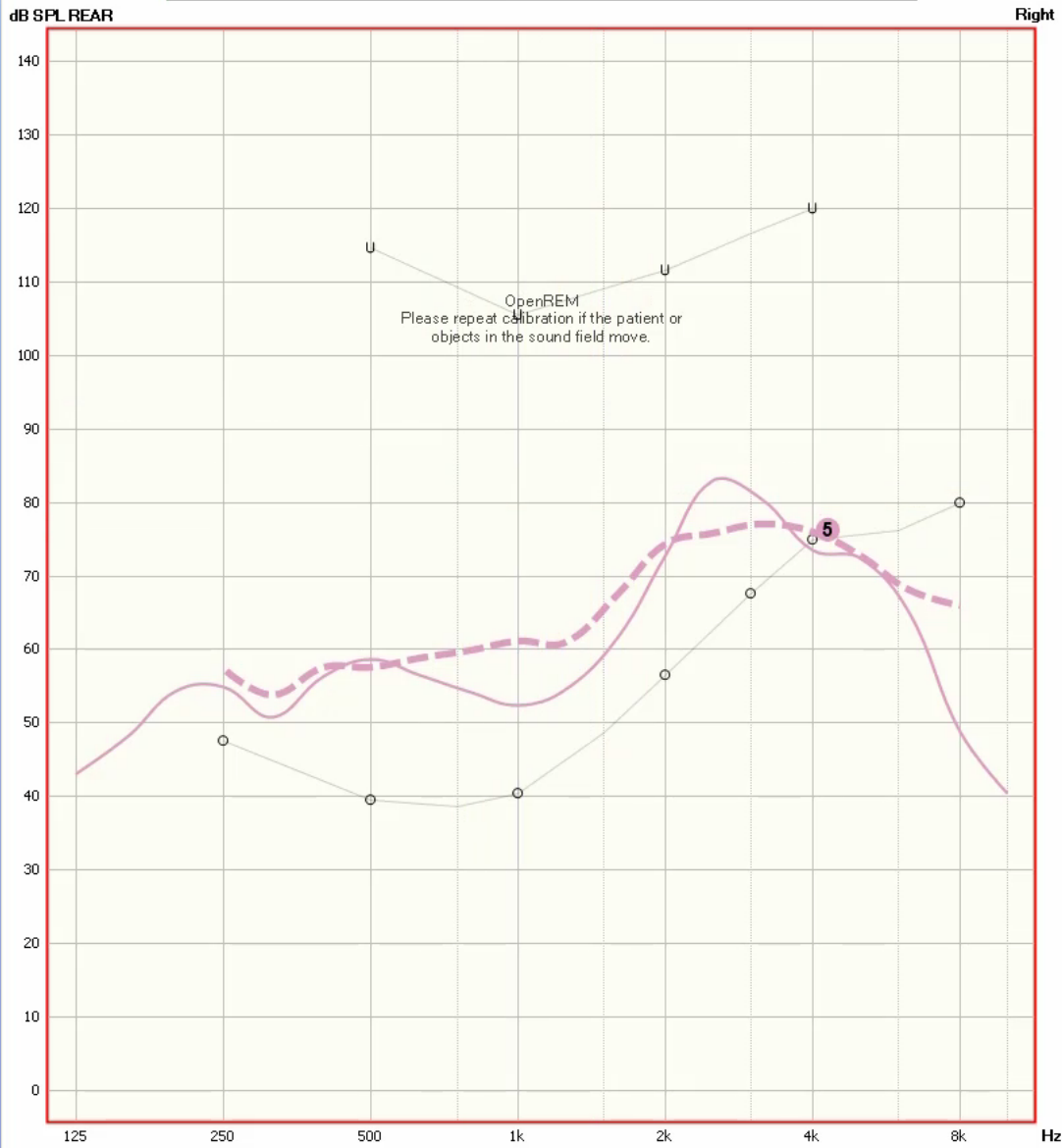
PMID: 30222541 DOI: [10.3766/jaaa.17005](https://doi.org/10.3766/jaaa.17005)

***79% Preference for REM fit**

***Better Performance with REM fit**



***Better Performance in Noise**
Leavitt & Flexor (2012)



Calibration

Real Ear

Sequence

1 Average

2 Loud

3 Soft

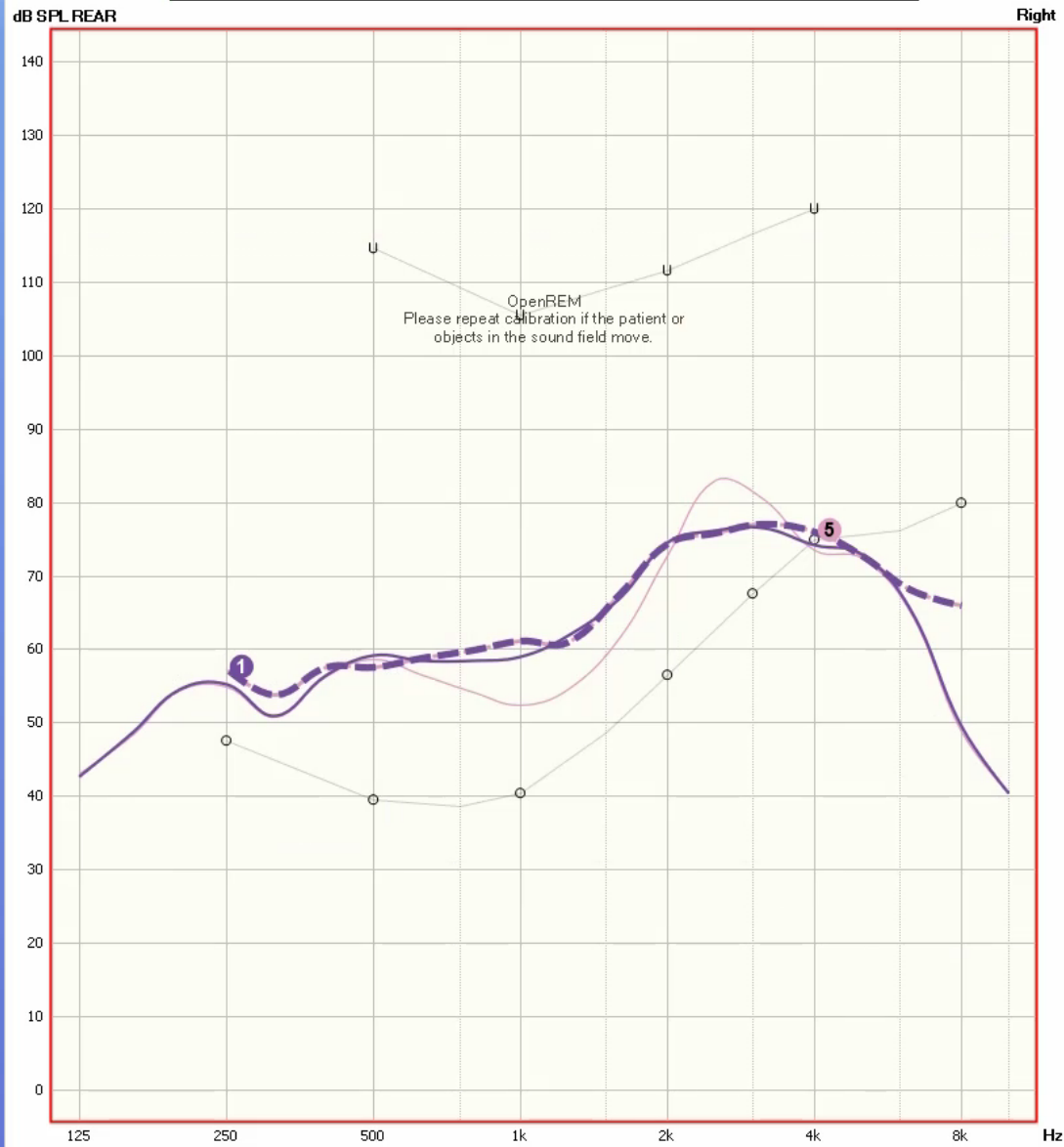
4 MPO

5 Pre-Adjustment

Show Signal Spectrum

Legend Overlays Tube Calibration

5	<input checked="" type="checkbox"/>	SII: 63%	NAL
---	-------------------------------------	----------	-----



Calibration

Real Ear

Sequence

1 Average

2 Loud

3 Soft

4 MPO

5 Pre-Adjustment

Show Signal Spectrum

Legend Overlays Tube Calibration

1	<input checked="" type="checkbox"/>	SII: 67%	NAL NL2 - 65 (82) dB - ISTS Signal
5	<input checked="" type="checkbox"/>	SII: 63%	

Real Ear

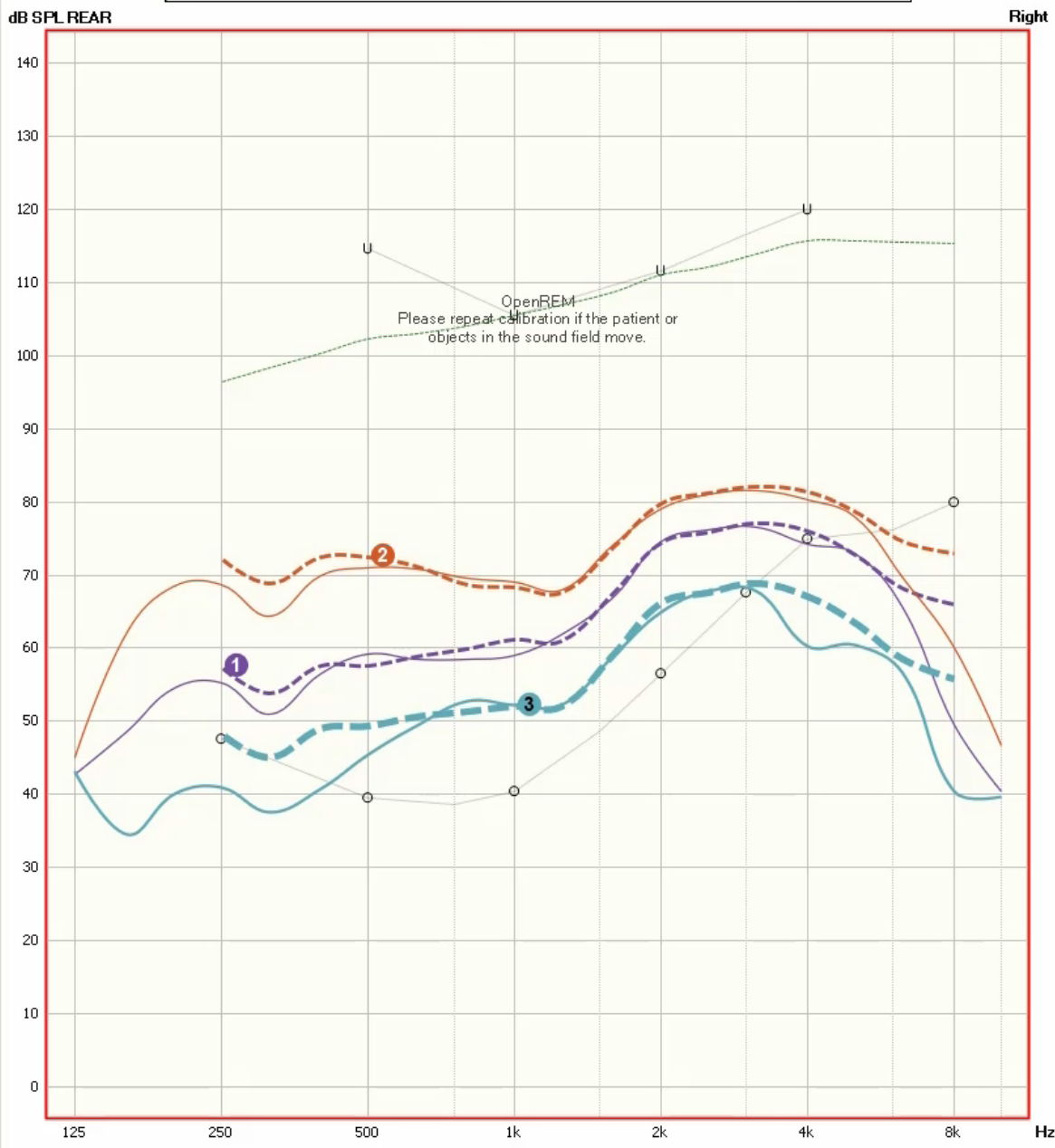
Sequence

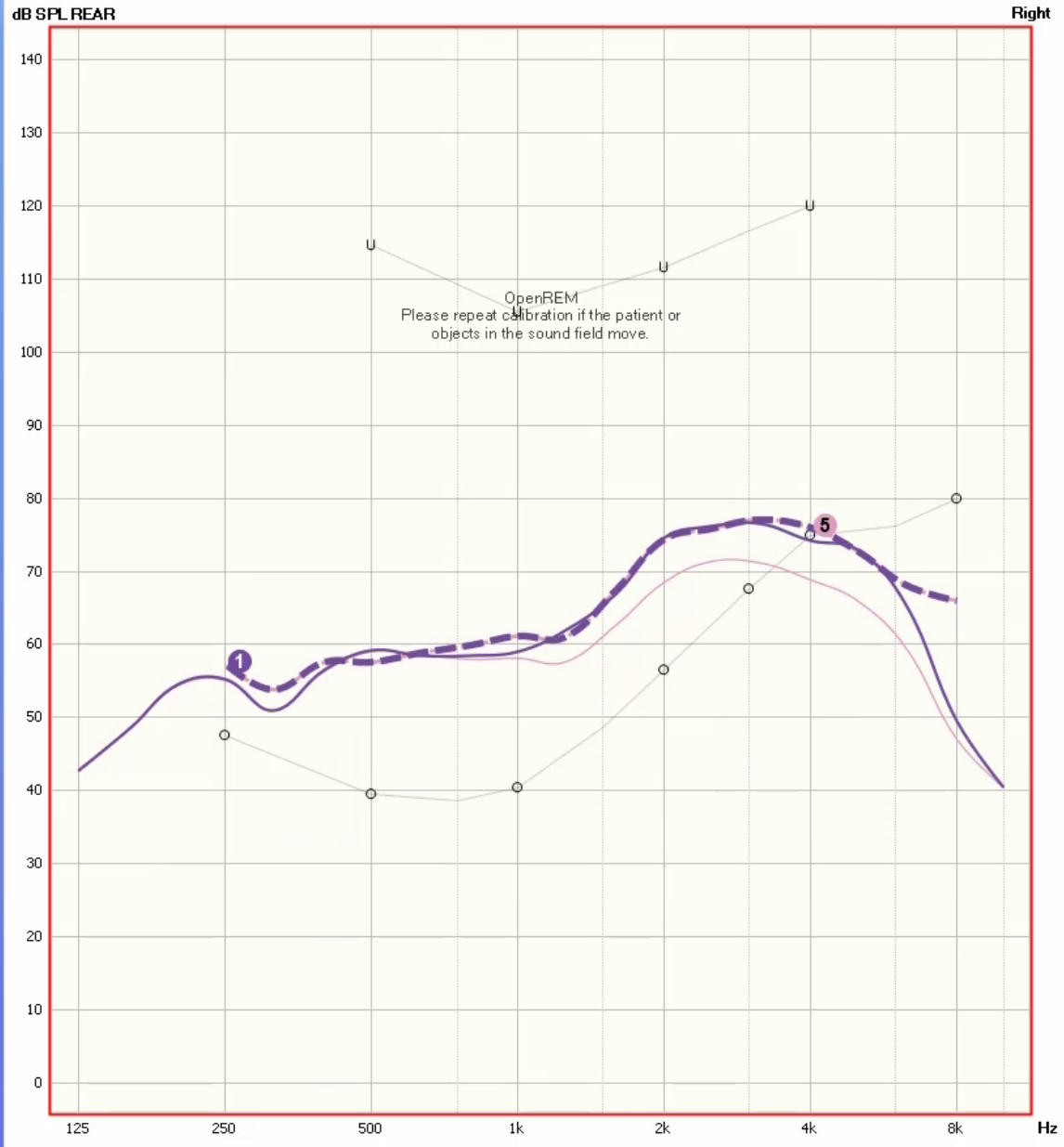
1 Average
 2 Loud
 3 Soft
 4 MPO
 5 Pre-Adjustment

MPO Signal

85 dB 00:03 s

Show Signal Spectrum





Real Ear

Sequence

1 Average

2 Loud

3 Soft

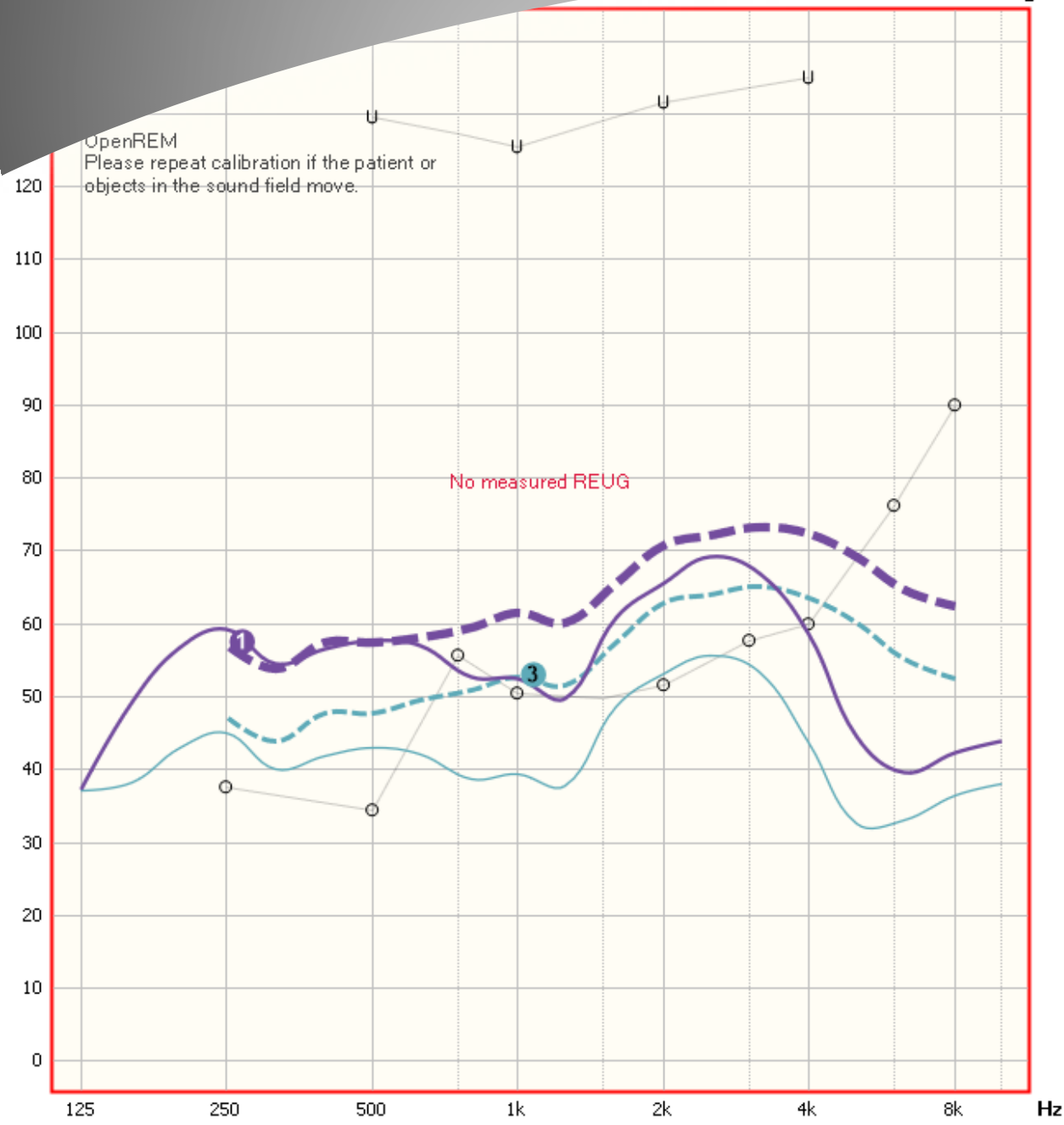
4 MPO

5 User Preference

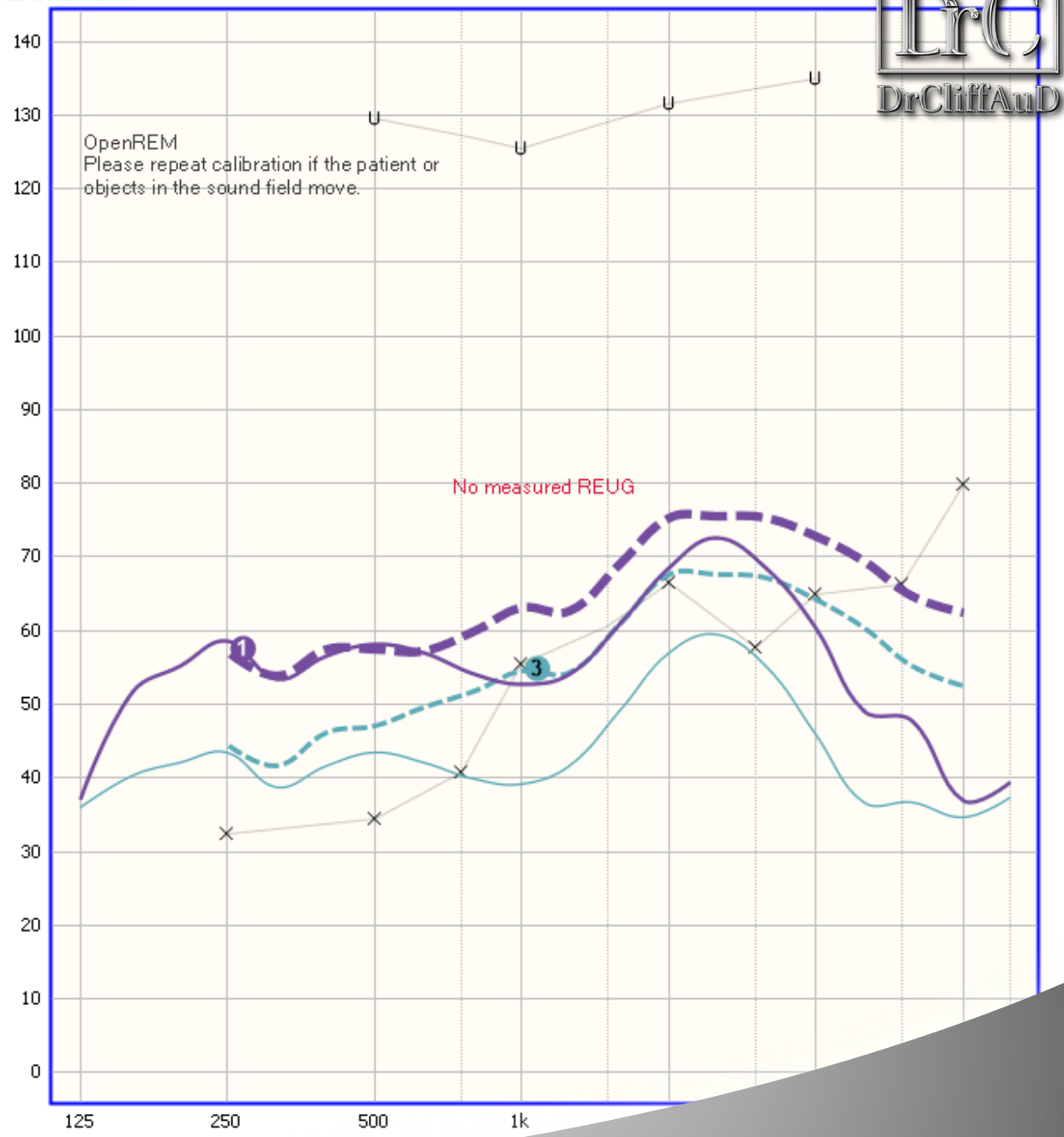
Show Signal Spectrum

Legend	Overlays	Tube Calibration
1 <input checked="" type="checkbox"/>	SII: 67%	NAL NL2 - 65 (82) dB - ISTS Signal
2 <input type="checkbox"/>	SII: 78%	NAL NL2 - 80 (88) dB - ISTS Signal
3 <input type="checkbox"/>	SII: 39%	NAL NL2 - 50 (73) dB - ISTS Signal
4 <input type="checkbox"/>	SII: -	NAL NL2 - 0 (0) dB - ISTS Signal
5 <input checked="" type="checkbox"/>	SII: -	NAL NL2 - 0 (0) dB - ISTS Signal

Right



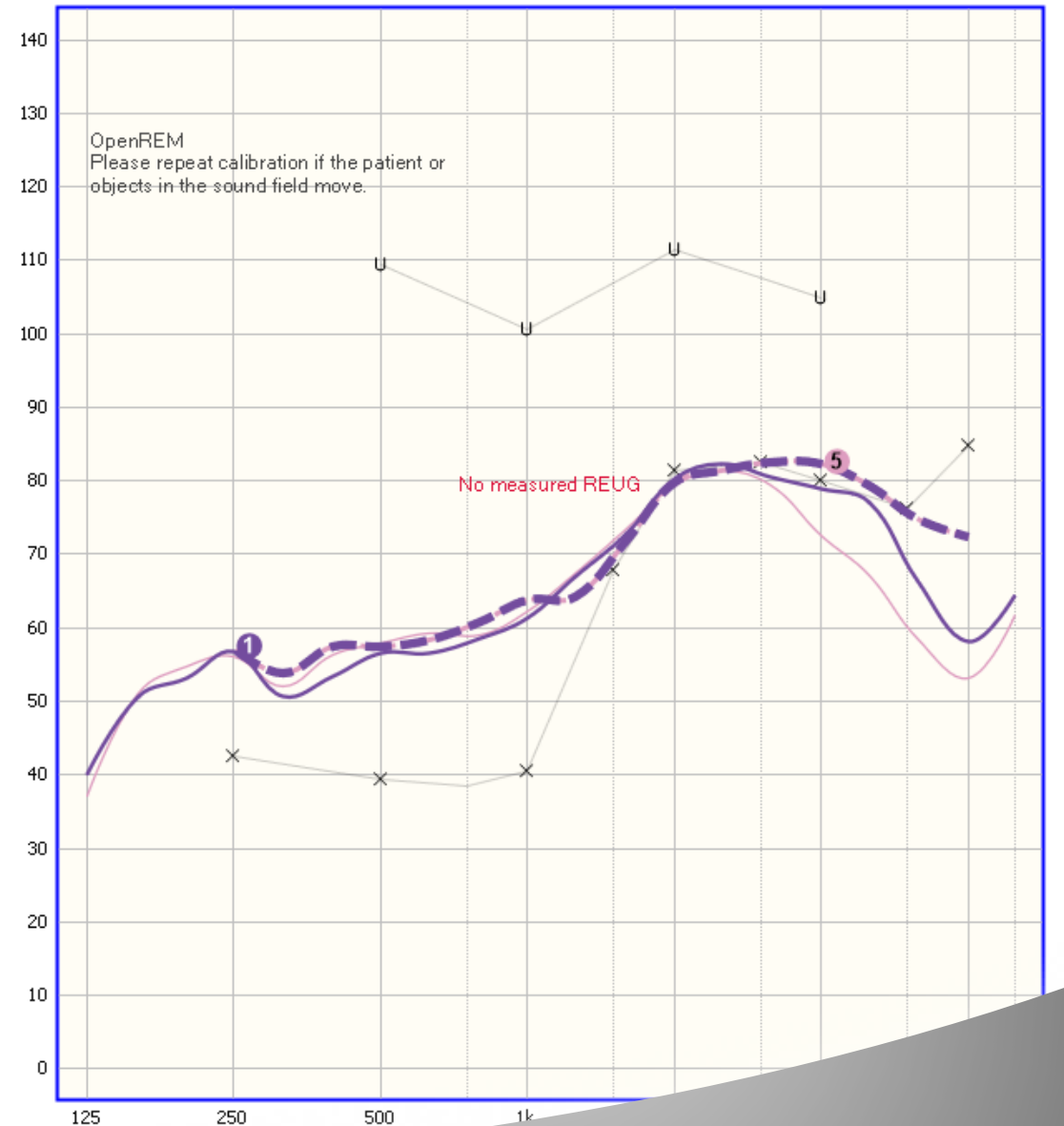
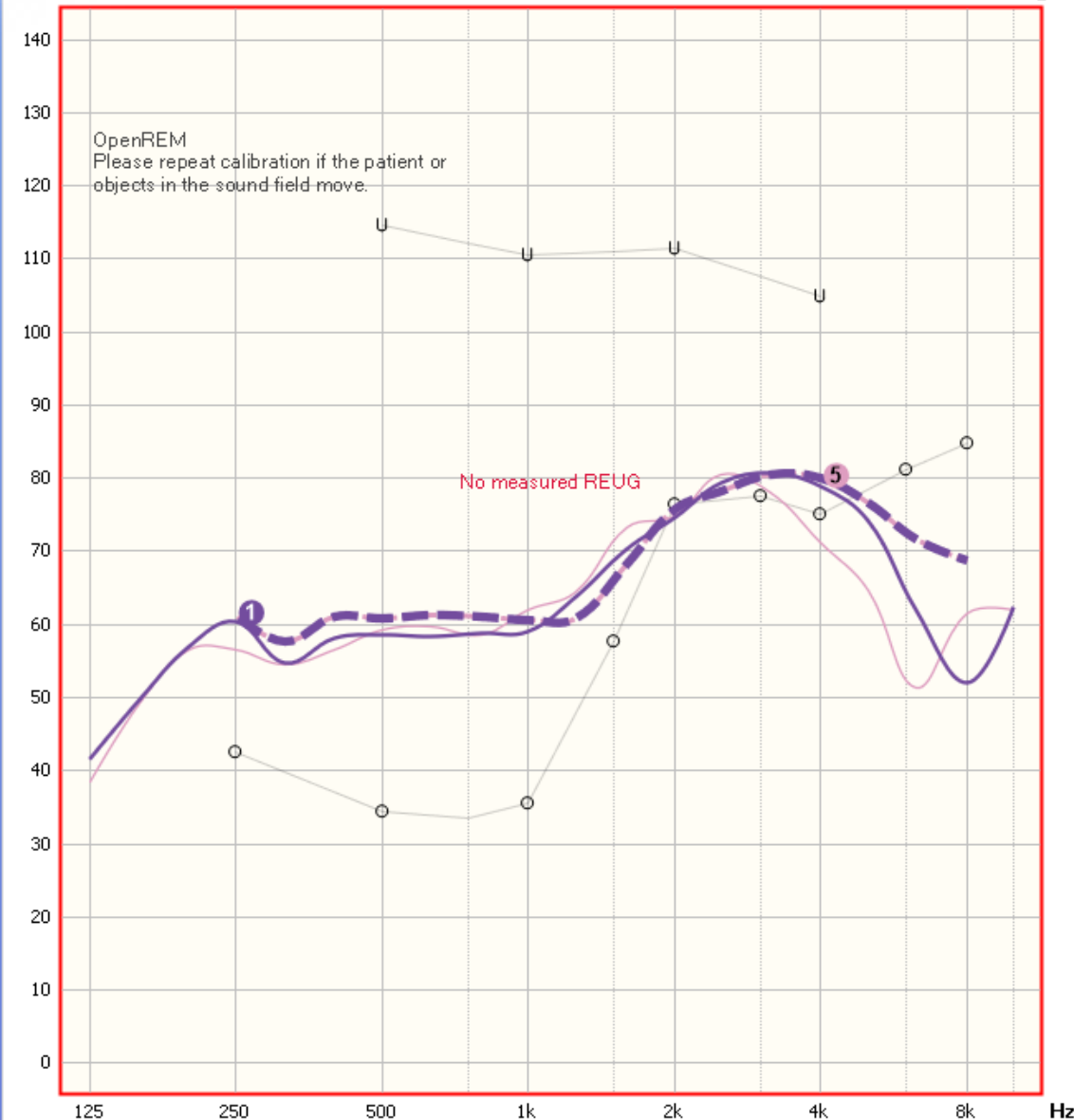
dB SPL REAR





Right dB SPL REAR

Left dB SPL REAR






~35%


Validation

Sounds Good To Me...

Needs established

November 19, 2020 






Date: Outcome assessed

December 28, 2020 

Specific Needs:

- Television 
- Restaurant 
- Carol inside the house 
- Streaming in the Shop 
- Safeway grocery store. 

Priority:

- 
- 
- 
- 
- 

Degree of change "Because of the new hearing instrument, I now hear..."					Final Ability "I can hear satisfactorily..."				
Worse	No difference	Slightly better	Better	Much Better	10 % (Hardly ever)	25 % (Occasionally)	50 % (Half the Time)	75 % (Most of Time)	95 % (Almost Always)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Notes:

Administrator

Hearing Instrument:

Phonak Virto P90s



Completed

January 29, 2024 15

Date: Outcome assessed

15

Specific Needs:

- Television >>
- Telephone >>
- Speaking to Cathy >>
- Hearing in Noisy Restaurant >>
- Streaming from Phone >>

Priority:

- 1 ▾
- 2 ▾
- 3 ▾
- 4 ▾
- 5 ▾

Degree of change					Final Ability				
Because of the new hearing instrument, I now hear...					I can hear satisfactorily...				
Worse	No difference	Slightly better	Better	Much Better	10 % (Hardly ever)	25 % (Occasionally)	50 % (Half the Time)	75 % (Most of Time)	95 % (Almost Always)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Notes:

Notes text area with scroll arrows

Analysis Setup

Type of Test

- Unaided / Aided
 Hearing Aid 1 / 2

Conditions to Test

- Unaided
 Aided

Example and Instructions

- A** Always (99%)
- B** Almost Always (87%)
- C** Generally (75%)
- D** Half-the-time (50%)
- E** Occasionally (25%)
- F** Seldom (12%)
- G** Never (1%)

Date of Birth:

Professional:

Assessment date 1:

Assessment date 2:

	Without Hearing Aid	With Hearing Aid
--	---------------------	------------------

1. When I am in a crowded grocery store, talking with the cashier, I can follow the conversation.	A B C D E F G	A B C D E F G
2. I miss a lot of information when I'm listening to a lecture.	A B C D E F G	A B C D E F G
3. Unexpected sounds, like a smoke detector or alarm bell are uncomfortable.	A B C D E F G	A B C D E F G
4. I have difficulty hearing a conversation when I'm with one of my family at home.	A B C D E F G	A B C D E F G
5. I have trouble understanding the dialog in a movie or at the theater.	A B C D E F G	A B C D E F G
6. When I am listening to the news on the car radio, and family members are talking, I have trouble hearing the news.	A B C D E F G	A B C D E F G
7. When I'm at the dinner table with several people, and am trying to have a conversation with one person, understanding speech is difficult.	A B C D E F G	A B C D E F G
8. Traffic noises are too loud.	A B C D E F G	A B C D E F G
9. When I am talking with someone across a large empty room, I understand the words.	A B C D E F G	A B C D E F G
10. When I am in a small office, interviewing or answering questions, I have difficulty following the conversation.	A B C D E F G	A B C D E F G
11. When I am in a theater watching a movie or play, and the people around me are whispering and rustling paper wrappers, I can still make out the dialogue.	A B C D E F G	A B C D E F G
12. When I am having a quiet conversation with a friend, I have difficulty understanding.	A B C D E F G	A B C D E F G
13. The sounds of running water, such as a toilet or shower, are uncomfortably loud.	A B C D E F G	A B C D E F G
14. When a speaker is addressing a small group, and everyone is listening quietly, I have to strain to understand.	A B C D E F G	A B C D E F G
15. When I'm in a quiet conversation with my doctor in an examination room, it is hard to follow the conversation.	A B C D E F G	A B C D E F G
16. I can understand conversations even when several people are talking.	A B C D E F G	A B C D E F G

EC – Ease of Communication

RV – Reverberation

BN – Background Noise

AV - Aversiveness

Questionnaire **Results**

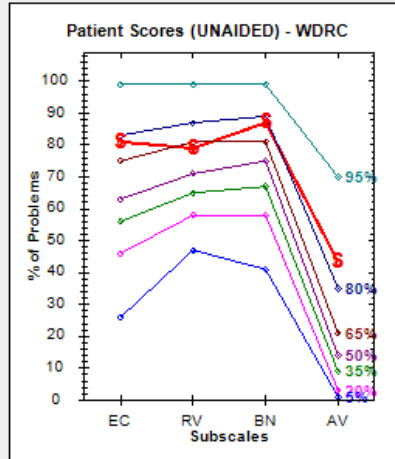
Name: [Redacted]
 Date of Birth: September 16, 1946
 Professional: cliff@appliedhearingaz.com
 Assessment date 1: March 15, 2021
 Assessment date 2: April 24, 2021

Type of Test

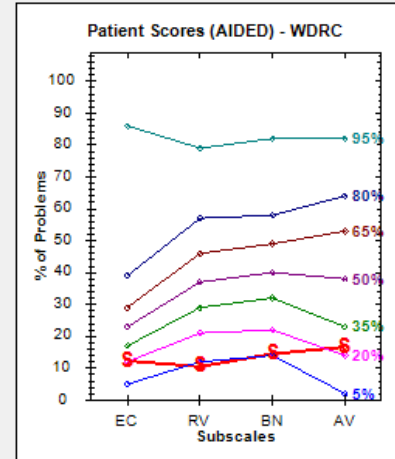
- Unaided / Aided
- Hearing Aid 1 / 2

Norms

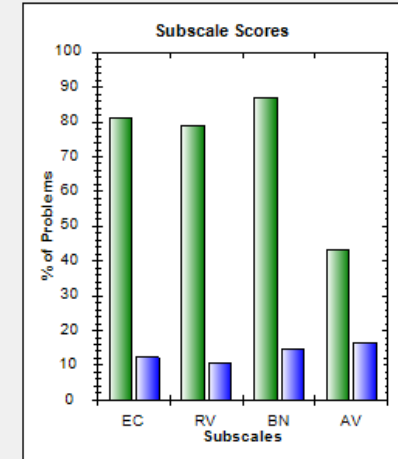
- WDRC (2005)
- Linear (1995)
- Elderly
- Young



Compared to unaided regular wearers of WDRC hearing aids:



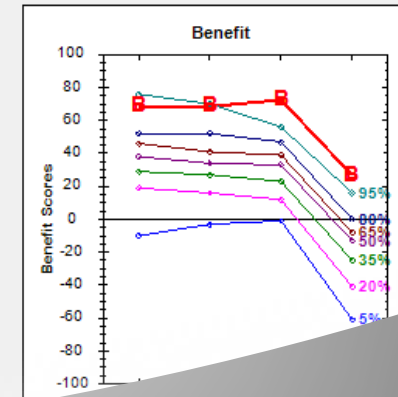
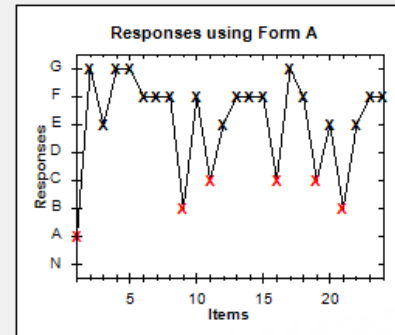
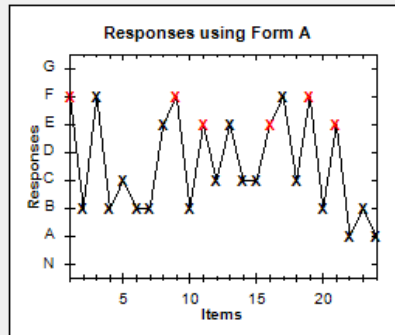
Compared to aided regular wearers of WDRC hearing aids:



Subscale	% Reporting Fewer Problems	% Reporting More Problems
EC	76.3	23.8
RV	62.0	38.0
BN	76.3	23.8
AV	83.6	16.4

Subscale	% Reporting Fewer Problems	% Reporting More Problems
EC	21.0	79.0
RV	< 5	> 95
BN	5.9	94.1
AV	24.4	75.6

	GBL	EC	RV	BN	AV
# of Items		6/6	6/6	6/6	6/6
U	82.3	81.0	79.0	87.0	43.3
A	12.4	12.3	10.5	14.5	16.7
B	69.9	68.7	68.5	72.5	26.7

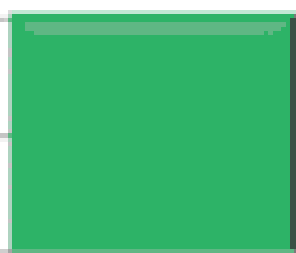


Average Patient Visits

Patient visits = $3.57 - \text{REM} \cdot 0.75 - \text{validate} \cdot 1.02 + V + V \cdot 0.6$

3.4
3.2
3
2.8
2.6
2.4
2.2
2

Verification & validation Validation only Verification only Neither verification nor validation



Best Practice



Standard S2.1[2021]

Adopted May 2, 2021

The profession of audiology is committed to providing auditory and vestibular care through ethical and evidence-based clinical practices that lead to optimal patient outcomes. Standard of practice documents outline basic services that audiologists are expected to include in the provision of quality healthcare. They reflect the values and priorities of the profession, providing direction for professional practice and a framework for the evaluation of practice. Standards of practice are prepared by subject matter experts, based on available evidence, peer-reviewed and subject to periodic updating.

HEARING AID FITTING STANDARD FOR ADULT & GERIATRIC PATIENTS

1. The hearing aid selection and fitting process is based on a comprehensive, valid audiological assessment. Each step of the selection and fitting process and the rationale is documented, where appropriate.^{1, 2, 3}

HEARING AID FITTING STANDARD FOR ADULT & GERIATRIC PATIENTS

1. The hearing aid selection and fitting process is based on a comprehensive, valid audiological assessment. Each step of the selection and fitting process and the rationale is documented, where appropriate.^{1, 2, 3}
2. Patient communication is conducted in a clear, empathetic manner consistent with the patient's communication mode, comprehension, and their health literacy level. Patient-centered and family-centered care is provided. The patient is encouraged to include communication partners (e.g., family members, significant others, companions) throughout the selection, fitting, and follow-up process.^{4, 5, 6, 7, 8}
3. A needs assessment is conducted in determining candidacy and in making individualized amplification recommendations. A needs assessment includes audiologic, physical, communication, listening, self-assessment, and other pertinent factors affecting patient outcomes.^{9, 10}
4. Pre-fitting testing includes assessment of speech recognition in noise, unless clinically inappropriate, and frequency-specific loudness discomfort levels. Other validated measures of auditory and non-auditory abilities are considered, as appropriate for the individual patient.^{11, 12, 13, 14, 15, 16, 17, 18, 19}
5. Fitting of bilateral hearing aids is the recommended protocol if the patient is a candidate for hearing aids in both ears and it is supported by the needs assessment.^{20, 21, 22}

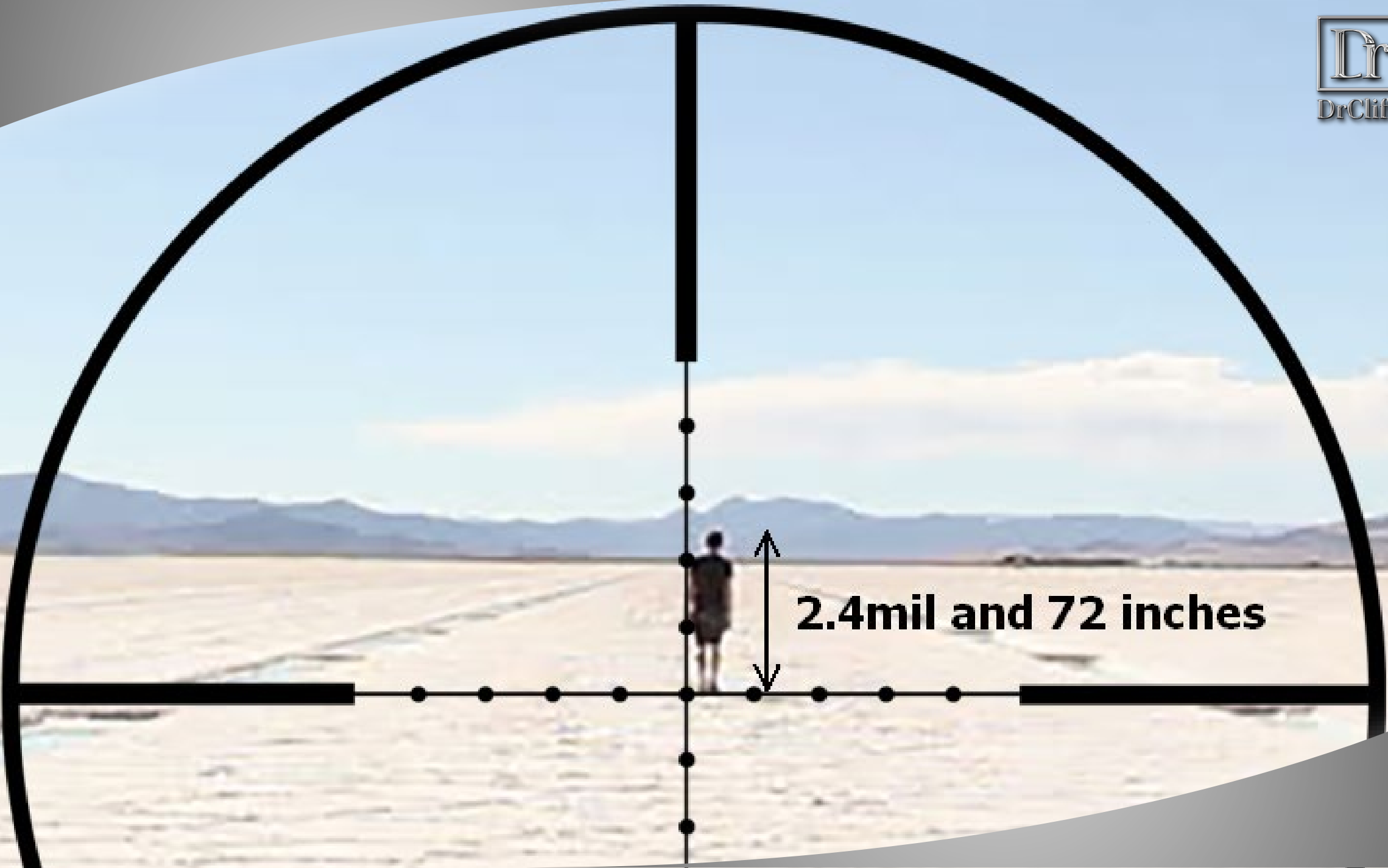
- The hearing aid style and the ear coupling are chosen to be appropriate for the degree and configuration of the hearing loss. Style and coupling should reflect any physical limitations of the patient. Patient input regarding acceptable styles is taken into account.^{23, 24, 25, 26, 27, 28, 29, 30, 31, 32}
7. The recommended hearing aids include signal processing and features that support the patient's listening needs. They have the appropriate gain and output, including reserve gain, to meet frequency-specific fitting targets as defined by a validated prescriptive method.^{23, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43}
 8. Assistive technology and accessories are considered to facilitate accessibility to other devices and to satisfy the patient's listening and communication needs.^{23, 44, 45, 46, 47, 48}
 9. An assessment of initial product quality is completed, using standard electroacoustic measures to verify either manufacturer or published specifications.^{34, 49}
 10. Hearing aids are fitted so that various input levels of speech result in verified ear canal output that meets the frequency-specific targets provided by a validated prescriptive method. The frequency-specific maximum power output is adjusted to optimize the patient's residual dynamic range and ensure that the output does not exceed the patient's loudness discomfort levels.^{50, 51, 52, 53, 54, 55, 56, 57}
 11. Following individualized verification of hearing aid gain and output, if the fitting is not acceptable to the patient, minor deviations in gain and output may be necessary.^{58, 59}
 12. Orientation is device- and patient-centered and includes use, care, and maintenance of the hearing aid(s) and accessories.^{60, 61, 62, 63}

...so that various input levels of speech result in verified ear canal output that meets the frequency-specific targets provided by a validated prescriptive method. The frequency-specific maximum power output is adjusted to optimize the patient's residual dynamic range and ensure that the output does not exceed the patient's loudness discomfort levels.^{50, 51, 52, 53, 54, 55, 56, 57}

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13. Counseling is conducted to ensure appropriate adjustment to amplification and to address other concerns regarding communication. Additional rehabilitative audiology is recommended if deemed appropriate.^{64, 65, 66, 67, 68, 69}
14. Hearing aid outcome measures are conducted. These may include validated self-assessment or communication inventories and aided speech recognition assessment.^{70, 71}
15. Short- and long-term follow-up is conducted to ensure that post-fitting needs are addressed. This includes updated audiological assessment, hearing aid adjustments and routine maintenance as needed to ensure the devices are functioning properly and appropriately for the patient.^{23, 33, 72, 73, 74, 75}







2.4mil and 72 inches



**How to add even
MORE
perceived value...**

Segmentation



Targeting



Marketing

Approaching



Positioning



Stock Images



Low Price

Your hearing helps you
keep being you.

FREE

Learn more

30-day Risk-

Free

Save up to...
Complimentary

Popular pages

Save up to \$1750 off the
Find a hearing center

Book a complimentary
appointment

Get a hearing test

Risk-free 30-day hearing
trial



Hi there, have
question? Text



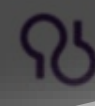
locations nationwide



30-day risk-free
hearing aid trial**



Complimentary
hearing assessment*



Proud to

Custom Images & Videos

Quality of Care

Upgrade to a better
hearing experience
Concierge

Hearing your
Absolute Best

Best Practices

Exceptional
Experience



FOS



Relationship

Why Call Us?

Hearing Difficulties?

What makes us different...





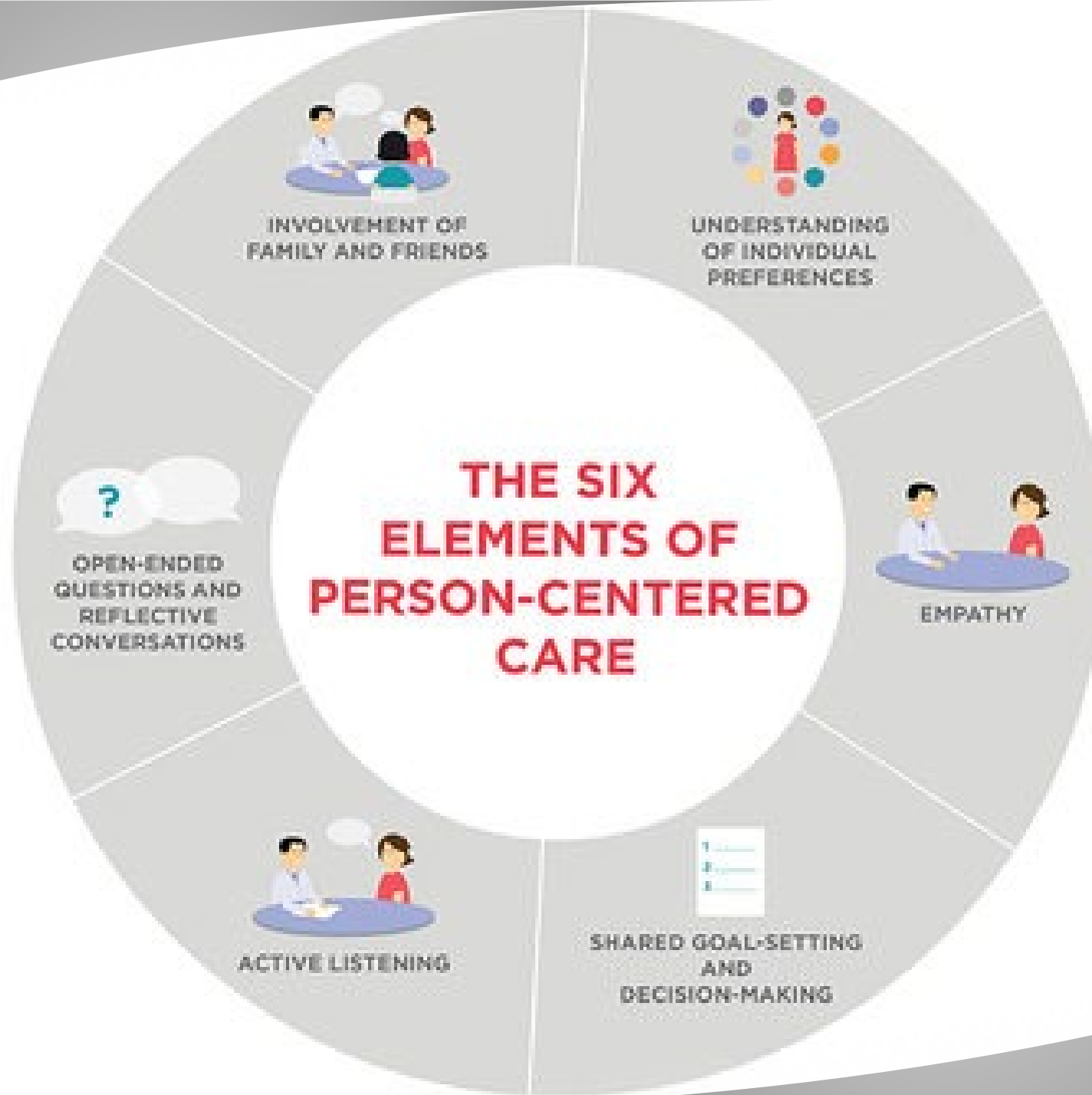






Consultation





DOMINANCE

Priorities: getting immediate results, taking action, challenging self and others

Motivated by: power and authority, competition, winning, success

Fears: loss of control, being taken advantage of, vulnerability

You will notice: self-confidence, directness, forcefulness, risk-taking

Limitations: lack of concern for others, impatience, insensitivity

Questioning
Logic-focused
Objective
Skeptical
Challenging

Priorities: ensuring accuracy, maintaining stability, challenging assumptions

Motivated by: opportunities to use expertise or gain knowledge, attention to quality

Fears: criticism, slipshod methods, being wrong

You will notice: precision, analysis, skepticism, reserve, quiet

Limitations: overly critical, tendency to overanalyze, isolates self

CONSCIENTIOUSNESS

Active
Fast-paced
Assertive
Dynamic
Bold

INFLUENCE

Priorities: expressing enthusiasm, taking action, encouraging collaboration

Motivated by: social recognition, group activities, friendly relationships

Fears: social rejection, disapproval, loss of influence, being ignored

You will notice: charm, enthusiasm, sociability, optimism, talkativeness

Limitations: impulsiveness, disorganization, lack of follow-through

Accepting
People-focused
Empathizing
Receptive
Agreeable

Priorities: giving support, maintaining stability, enjoying collaboration

Motivated by: stable environments, sincere appreciation, cooperation, opportunities to help

Fears: loss of stability, change, loss of harmony, offending others

You will notice: patience, team player, calm approach, good listener, humility

Limitations: overly accommodating, tendency to avoid change, indecisiveness

STEADINESS

Thoughtful
Moderate-paced
Calm
Methodical
Careful

D

i

C

S

DOMINANCE

Priorities: getting immediate results, taking action, challenging self and others

Motivated by: power and authority, competition, winning, success

Fears: loss of control, being taken advantage of, vulnerability

You will notice: self-confidence, directness, forcefulness, risk-taking

Limitations: lack of concern for others, impatience, insensitivity

Active
Fast-paced
Assertive
Dynamic
Bold

D

Questioning
Logic-focused
Objective
Skeptical
Challenging



“D”



(Fast-Task)

Less Emotion

Be Brief

Let Them Choose

Transparent Pricing

Less Visits (remote care)

Same Day Fitting

INFLUENCE

Priorities: expressing enthusiasm,
taking action, encouraging
collaboration

Motivated by: social recognition, group
activities, friendly relationships

Fears: social rejection, disapproval,
loss of influence, being ignored

You will notice: charm, enthusiasm,
sociability, optimism,
talkativeness

Limitations: impulsiveness,
disorganization, lack of
follow-through

Active
Fast-paced
Assertive
Dynamic
Bold

Accepting
People-focused
Empathizing
Receptive
Agreeable



“|”

Be Excited (Fast-Relationship)

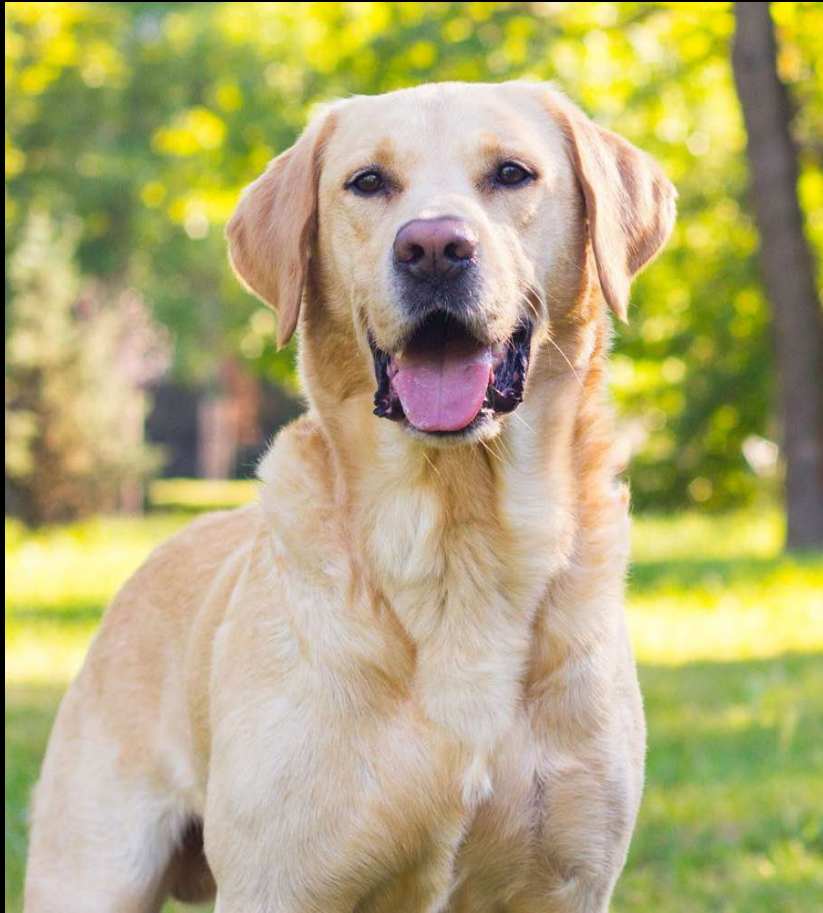
Social Norms

Keep them Social

Collaborative Treatment

Structure (so they don't have to)

Keep them on task



S

Accepting
People-focused
Empathizing
Receptive
Agreeable

Priorities: giving support,
maintaining stability,
enjoying collaboration

Motivated by: stable environments,
sincere appreciation, cooperation,
opportunities to help

Fears: loss of stability, change, loss of
harmony, offending others

Thoughtful
Moderate-paced
Calm
Methodical
Careful

You will notice: patience, team player, calm
approach, good listener, humility

Limitations: overly accommodating,
tendency to avoid change,
indecisiveness

STEADINESS

“S”

(Slow-Relationship)

Emotional

Don't like to be a Burden

Value Relationships

You Got their Back

Don't Like Change

Teamwork

Questioning
Logic-focused
Objective
Skeptical
Challenging

C

Priorities: ensuring accuracy,
maintaining stability,
challenging assumptions

Motivated by: opportunities to use
expertise or gain knowledge, attention
to quality

Fears: criticism, slipshod methods,
being wrong

You will notice: precision, analysis,
skepticism, reserve, quiet

Limitations: overly critical,
tendency to overanalyze,
isolates self

Thoughtful
Moderate-paced
Calm
Methodical
Careful

CONSCIENTIOUSNESS



“C”

(Slow-Task)

Analytical

Detail Oriented

Want an Expert

Over-Thinkers

Don't like Criticism

Desire Accuracy

Which Do You Communicate More In?



VISUAL

"I see what you mean."



KINESTHETIC

"It feels to me like..."



AUDITORY

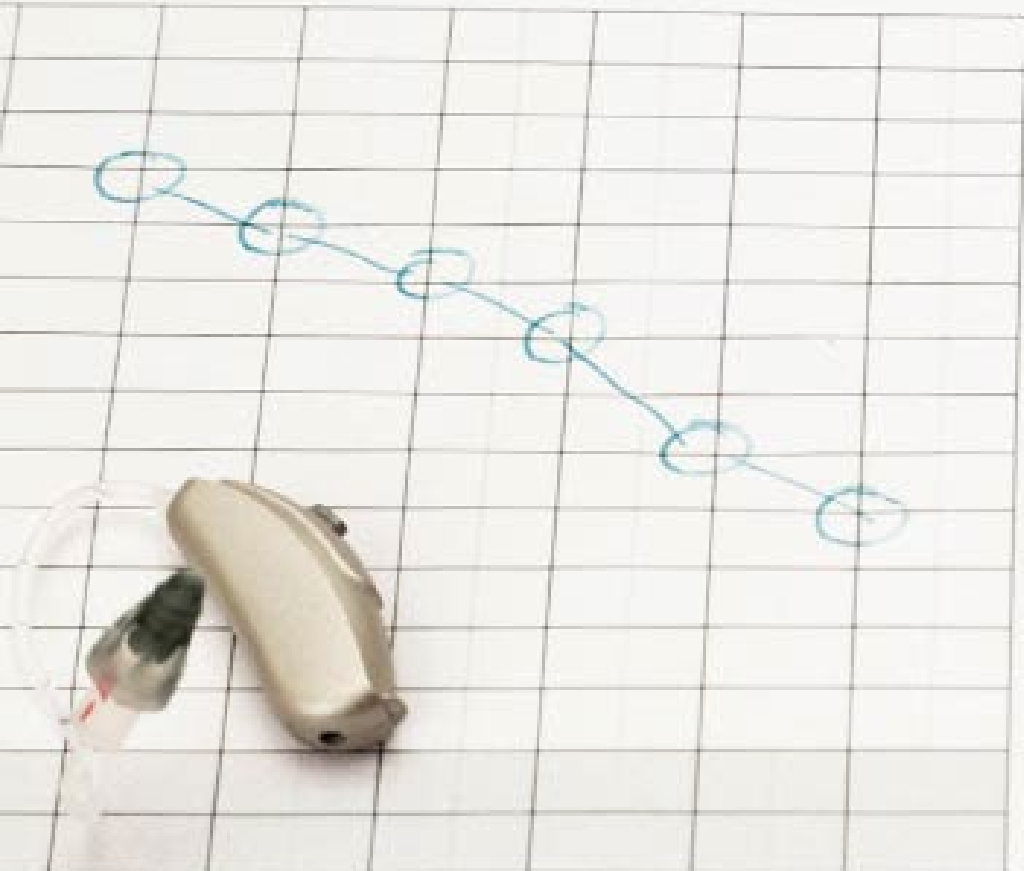
"I hear what you're saying."

Audiometric Results

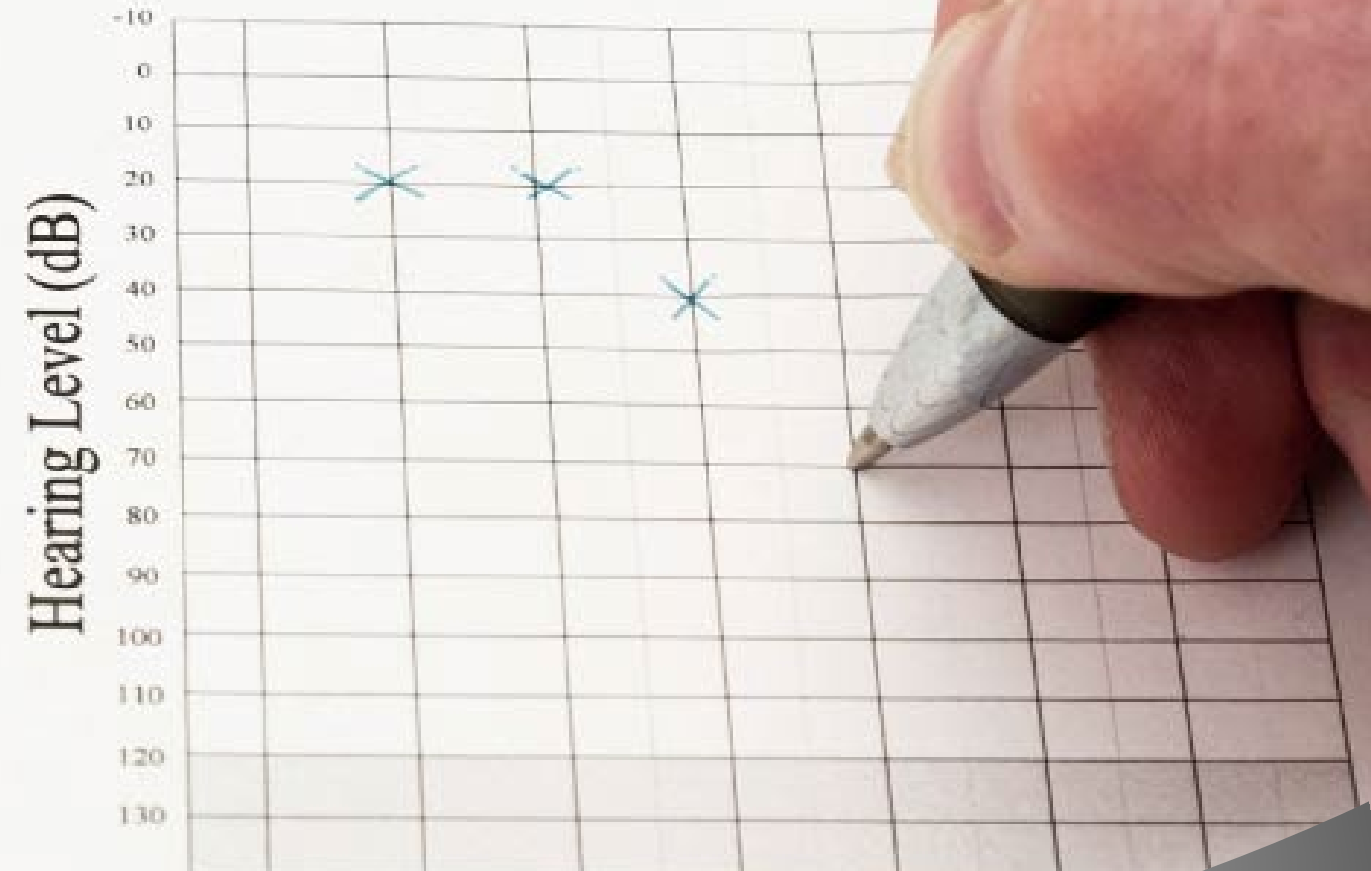


Pure Tone Audiogram

.....
Date of Birth Date of Test.....

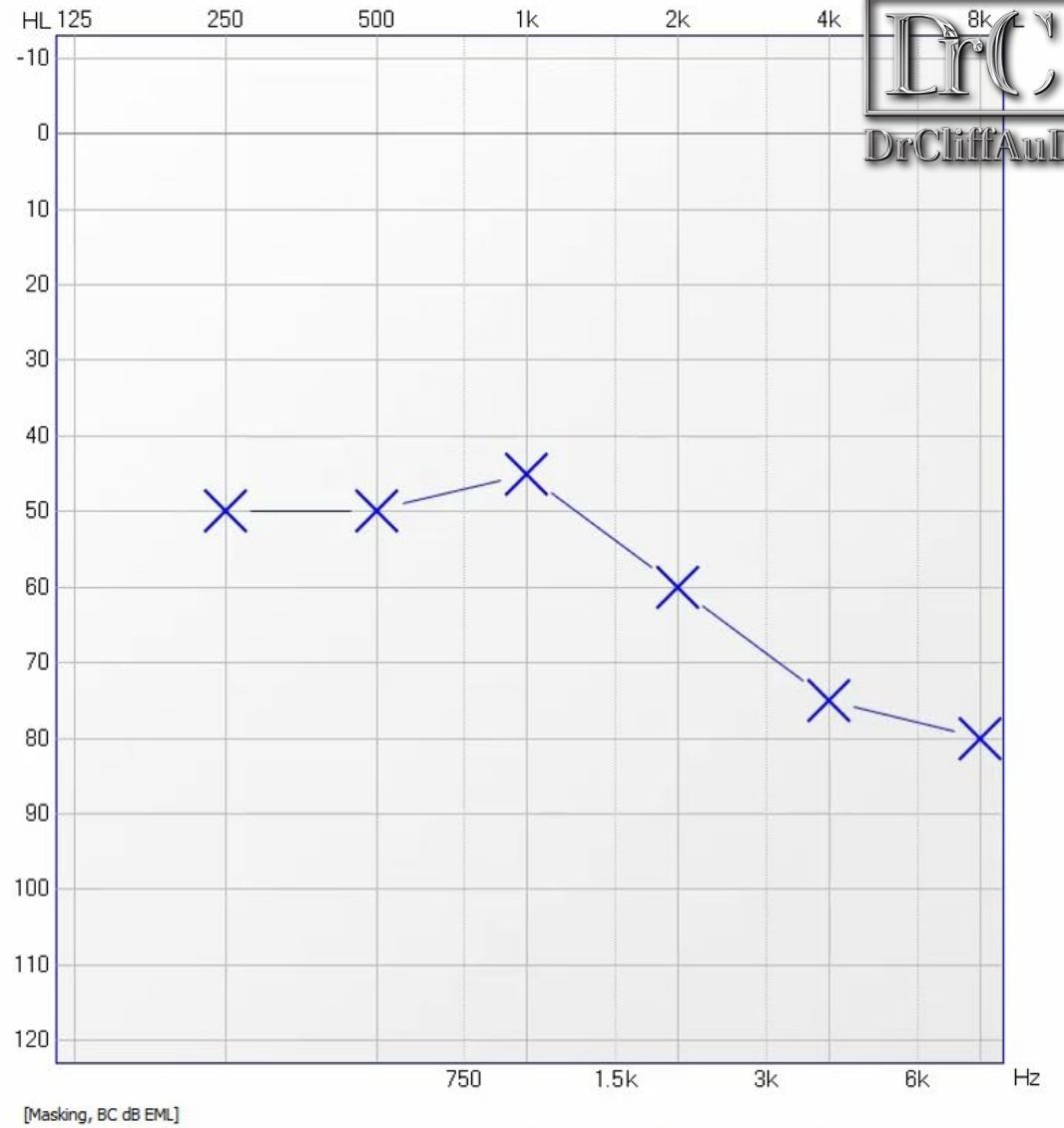


Frequency (Hz)



Hearing Level (dB)

Frequency (Hz)



Legend

L	R	Masked	L	R
X	O	□	M	M
>	<	△	U	U
S	S	×		
↓	↓	∅		

AC
BC
SF
NR

MCL
UCL

Overlays

Pictures

Severity

Unusable Area

Speech Banana

Speech Letters

Pure Tone data

	PTA - AC	PTA - BC	AI
Right	30 dB	28 dB	%
Left	52 dB	33 dB	%

Compare Audiograms

12/20/2019

12/20/2019

12/20/2019

12/20/2019

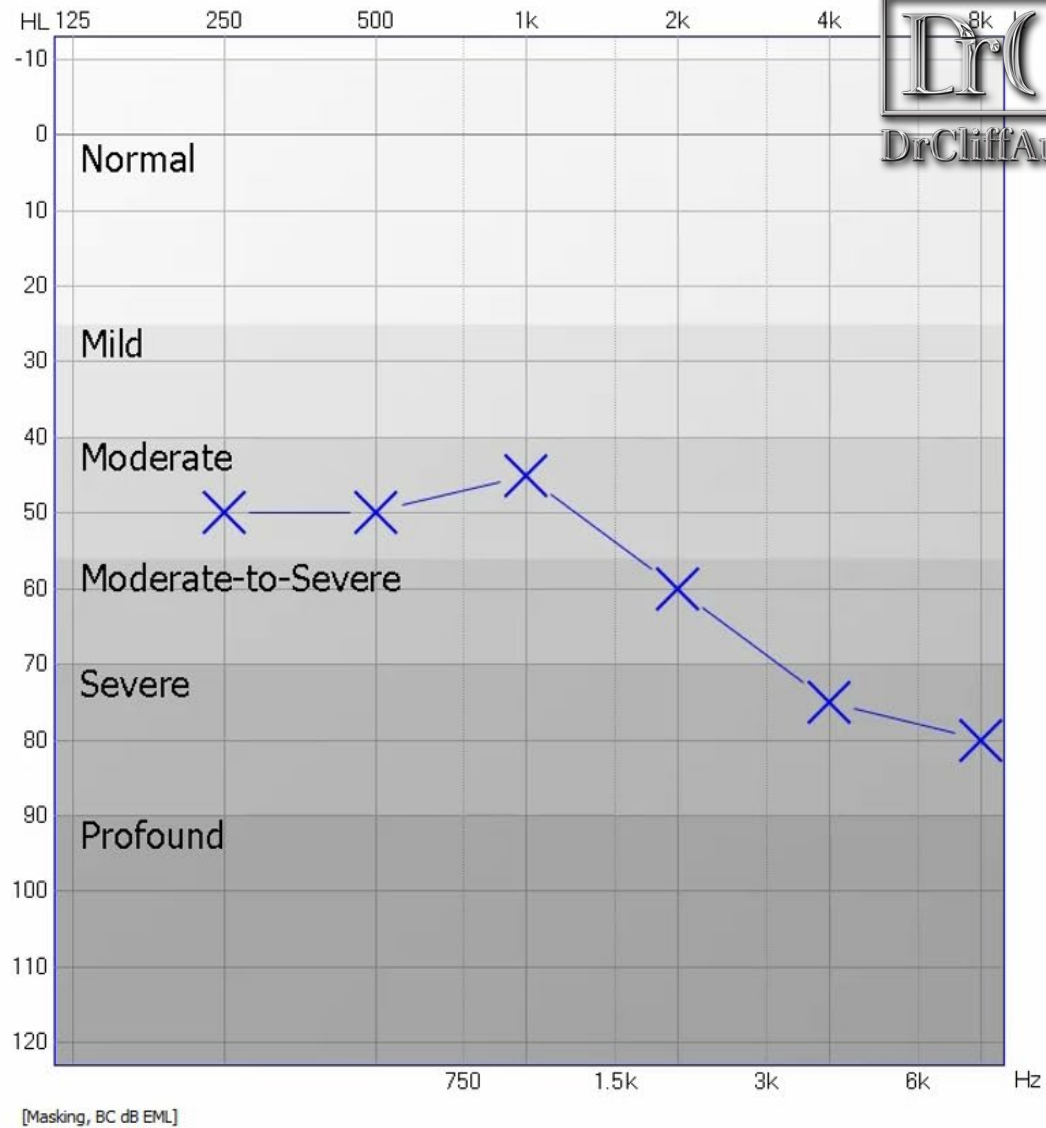
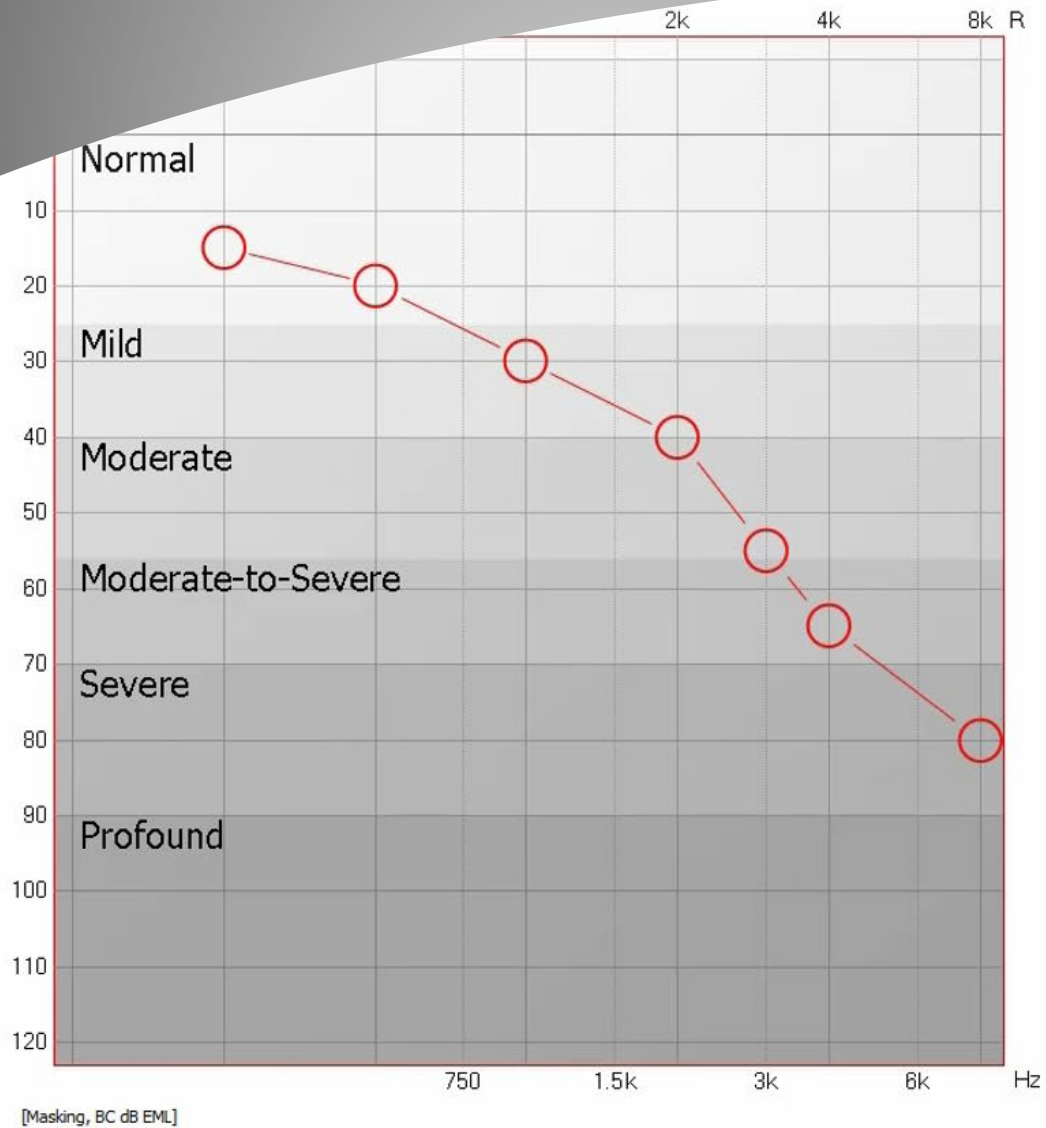
AC

All

Difference

Reliability

Stenger



Legend

L	R	Masked	L	R	MCL
X	O	AC	M	M	MCL
>	<	BC	U	U	UCL
S	S	SF			
↓	↓	NR			

Overlays

- Pictures
- Speech Banana
- Severity
- Unusable Area
- Speech Letters

Pure Tone data

	PTA - AC	PTA - BC	AI
Right	30 dB	28 dB	%
Left	52 dB	33 dB	%

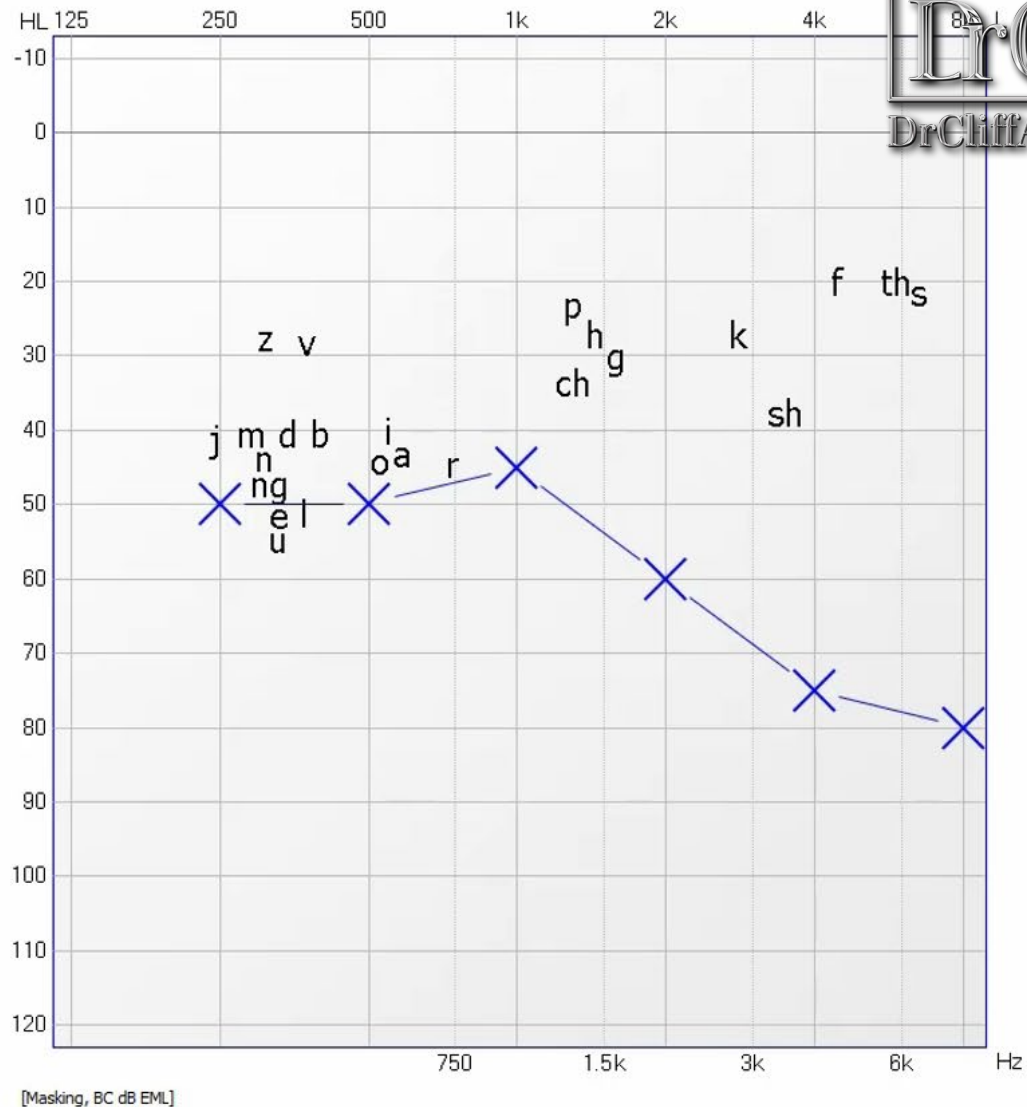
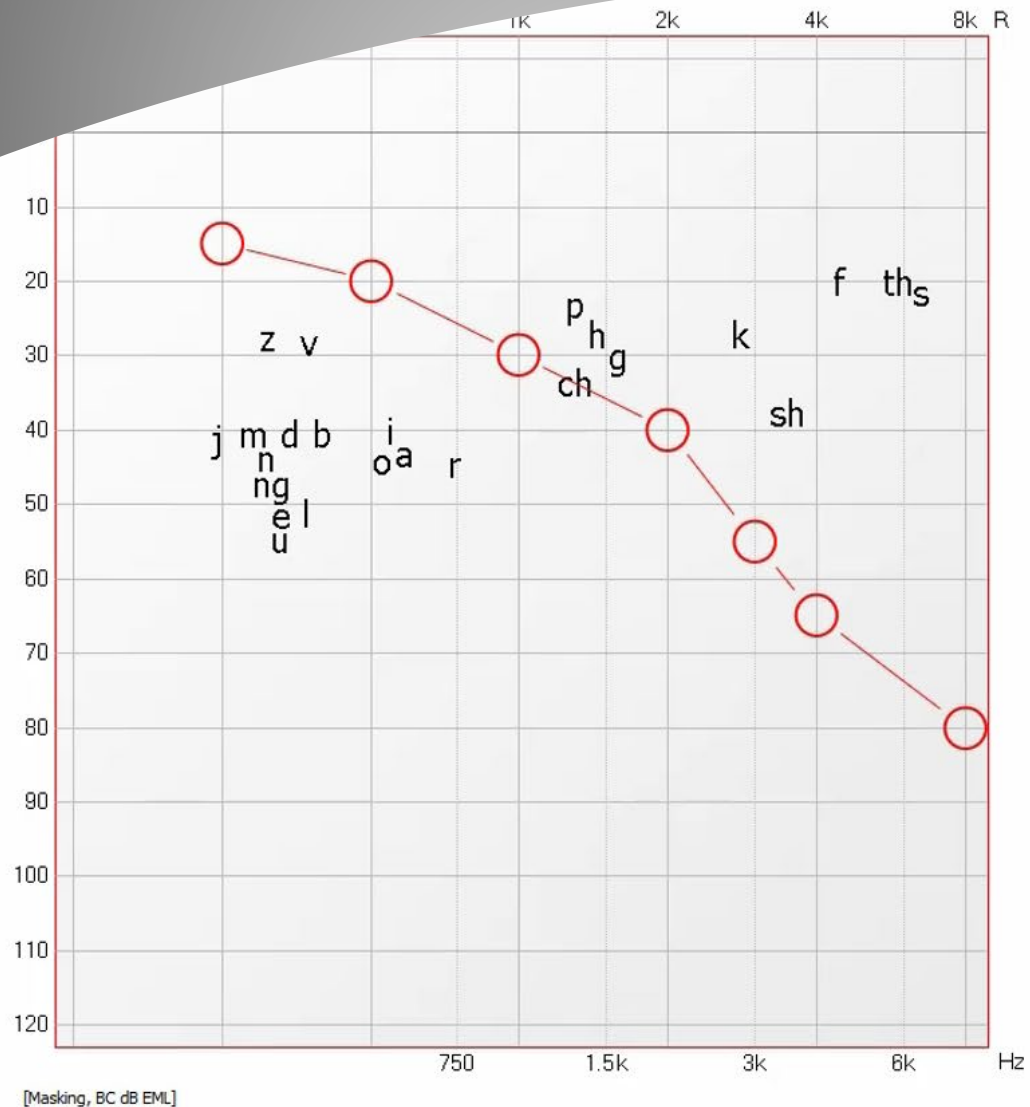
Compare Audiograms

- 12/20/2019
- 12/20/2019
- 12/20/2019
- 12/20/2019

AC: All: Difference:

Reliability

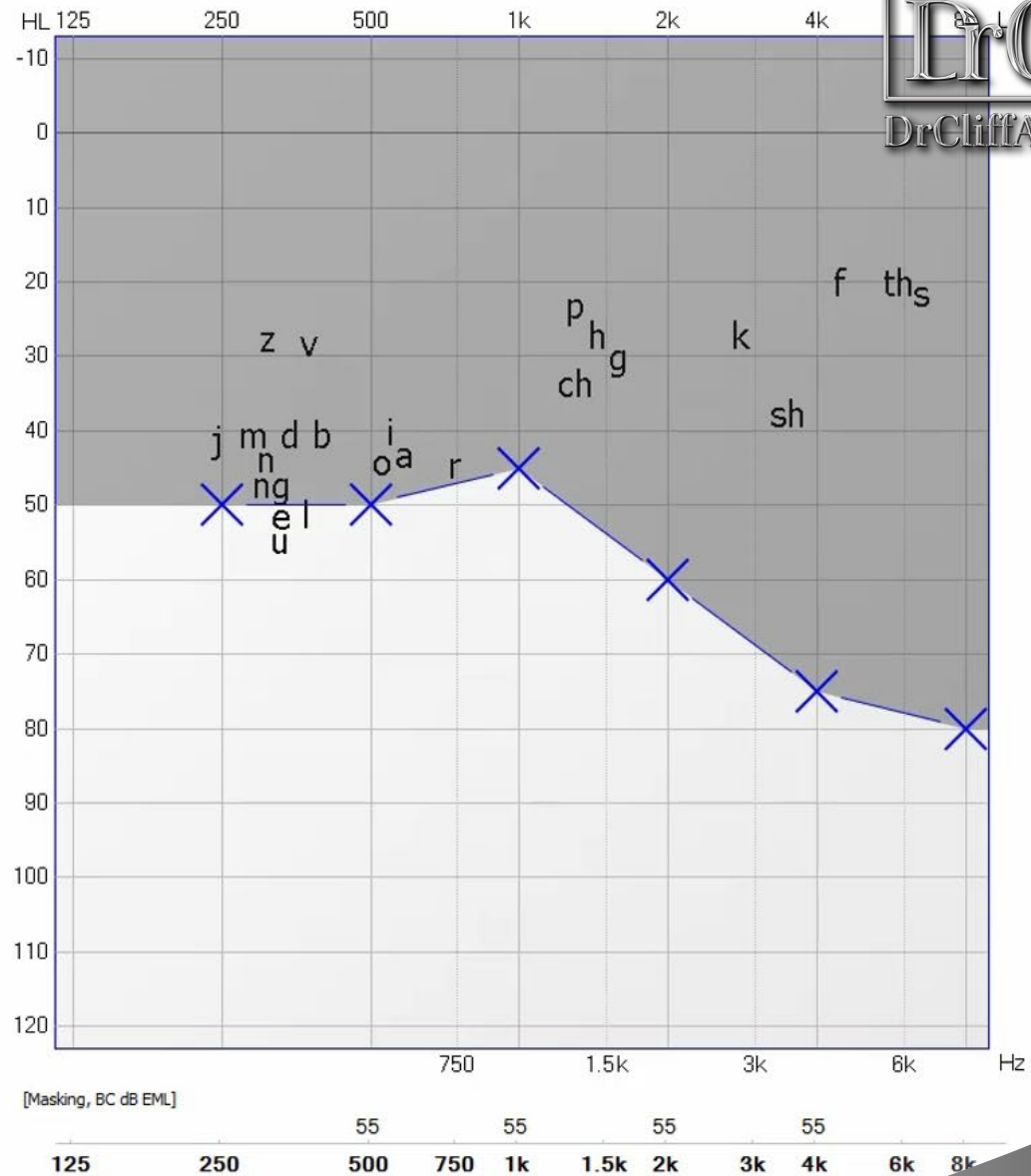
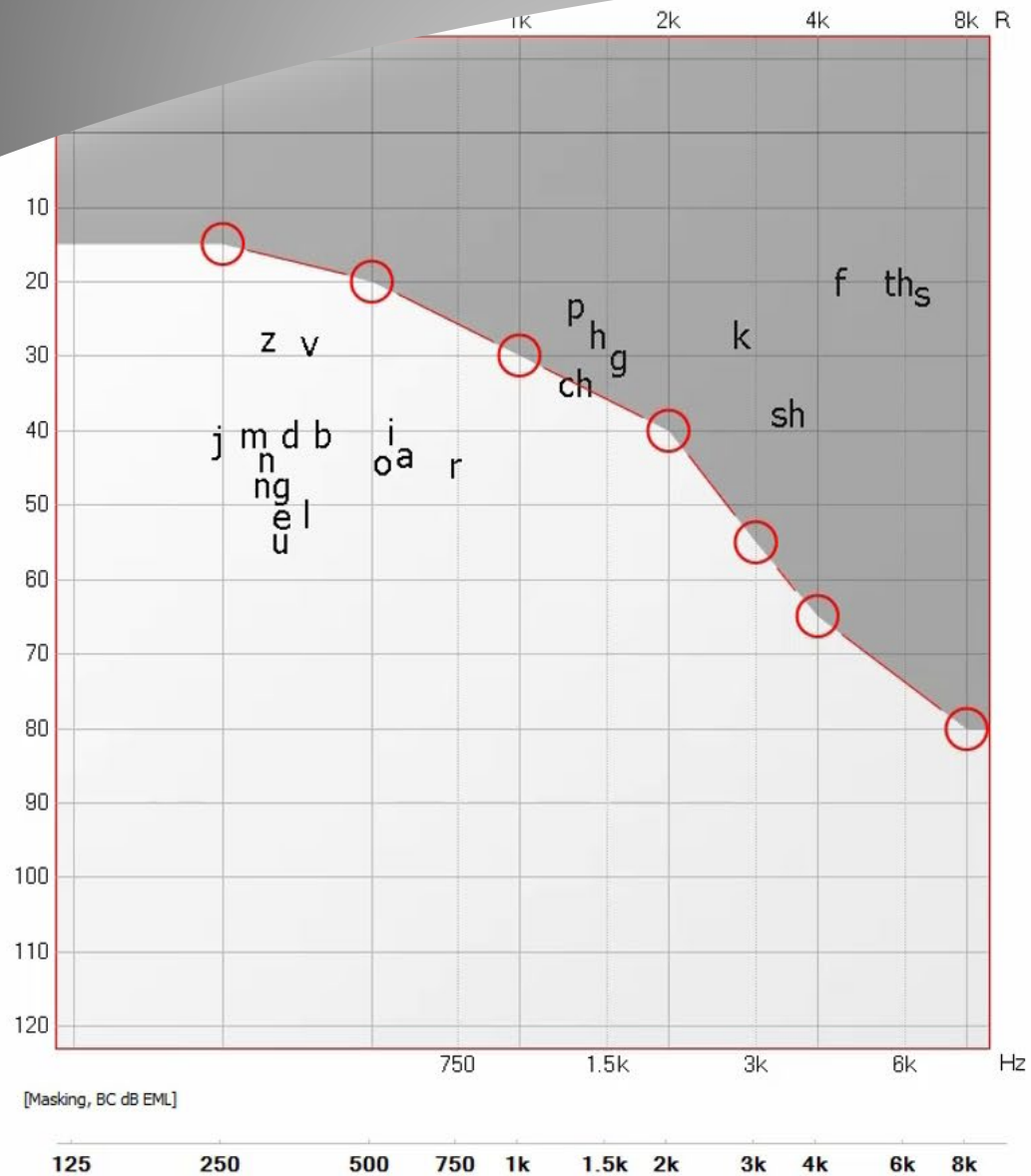
Stenger:



125 250 500 750 1k 1.5k 2k 3k 4k 6k 8k

125 250 500 750 1k 1.5k 2k 3k 4k 6k 8k

Legend L R X O AC > ^ < BC S S S SF ↘ ↓ k NR	Masked L R M M MCL U U UCL	Overlays <input type="checkbox"/> Pictures <input type="checkbox"/> Severity <input type="checkbox"/> Unusable Area <input type="checkbox"/> Speech Banana <input checked="" type="checkbox"/> Speech Letters	Pure Tone data <table border="1"> <thead> <tr> <th></th> <th>PTA - AC</th> <th>PTA - BC</th> <th>AI</th> </tr> </thead> <tbody> <tr> <td>Right</td> <td>30 dB</td> <td>28 dB</td> <td>%</td> </tr> <tr> <td>Left</td> <td>52 dB</td> <td>33 dB</td> <td>%</td> </tr> </tbody> </table>		PTA - AC	PTA - BC	AI	Right	30 dB	28 dB	%	Left	52 dB	33 dB	%	Compare Audiograms <input checked="" type="checkbox"/> 12/20/2019 <input type="checkbox"/> 12/20/2019 <input type="checkbox"/> 12/20/2019 <input type="checkbox"/> 12/20/2019 <input type="checkbox"/> 12/20/2019 AC All <input type="checkbox"/> Difference	Reliability <input type="checkbox"/> Reliability <input type="checkbox"/> Stenger
	PTA - AC	PTA - BC	AI														
Right	30 dB	28 dB	%														
Left	52 dB	33 dB	%														



Legend

L	R	Masked	L	R
x	o	□	M	M
>	<	□	U	U
S	S	✘		
↓	↓			

Overlays

<input type="checkbox"/> Pictures	<input type="checkbox"/> Speech Banana
<input type="checkbox"/> Severity	<input checked="" type="checkbox"/> Speech Letters
<input checked="" type="checkbox"/> Unusable Area	

Pure Tone data

	PTA - AC	PTA - BC	AI
Right	30 dB	28 dB	%
Left	52 dB	33 dB	%

Compare Audiograms

<input checked="" type="checkbox"/> 12/20/2019	AC
<input type="checkbox"/> 12/20/2019	All
<input type="checkbox"/> 12/20/2019	
<input type="checkbox"/> Difference	

Reliability

Stenger

Ch1 Pre-recorded - Insert - Left



#	Ear	Test	dB	%	SNR	📶	👂
1	R	SRT	30			AC	Spondee Word List Form A
2	L	SRT	50			AC	Spondee Word List Form A
3	R	MCL				AC	File
4	L	MCL				AC	File
5	R	WRS	80	96.0%		AC	NU-6 List 1A
6	L	WRS	90 [60]	52.0%		AC	NU-6 List 2A
7	B	WRS	Store			AC	NU-6 List 2A
8	R	UCL				AC	File
9	L	UCL				AC	File
10							

MIC
 Source A
 Source B

MASKING SWN

TRANSDUCER Insert
 Phone
 High Frequency
 Bone
 Speaker

Multiple

ROUTING Left
 Right
 Binaural

Test Options

dB Step SDT SRT MCL UCL WRS/SRS

Stim Lock Tracking

SNR 0 dB

Unaided Off

Hearing Aid Selection





Enjoy easier hearing in a variety of situations^{1,2,3} with Phonak SmartSpeech™ Technology in all levels of Lumity

SmartSpeech Technology

AutoSense OS 5.0

90 Premium

- ActiveVent™ Performance +*
- Dynamic Noise Cancellation
- Speech Enhancer
- SpeechSensor
- StereoZoom 2.0
- Motion Sensor Hearing
- UltraZoom
- Roger™ Technology
- Comfort in Echo
- Speech in Car
- Speech in Loud Noise
- Music
- Comfort in Noise
- Speech in Noise
- Calm Situation
- Streaming Speech
- Streaming Music
- Comfort in Echo (manual)
- Speech in Loud Noise (manual)
- Speech in 360° (manual)
- EchoBlock
- WindBlock
- SoundRelax
- DuoPhone
- Real Ear Sound
- SoundRecover2
- WhistleBlock
- Tinnitus Balance
- 20 Channels

70 Advanced

- ActiveVent Performance +*
- Dynamic Noise Cancellation
- StereoZoom 2.0
- Motion Sensor Hearing
- UltraZoom
- Roger Technology
- Comfort in EchoMusic
- Comfort in Noise
- Speech in Noise
- Calm Situation
- Streaming Speech
- Streaming Music
- Speech in Loud Noise (manual)
- Speech in 360° (manual)
- WindBlock
- SoundRelax
- DuoPhone
- Real Ear Sound
- SoundRecover2
- WhistleBlock
- Tinnitus Balance
- 20 Channels

50 Standard

- ActiveVent Performance +*
- Motion Sensor Hearing
- UltraZoom
- Roger Technology
- Comfort in Noise
- Speech in Noise
- Calm Situation
- Streaming Speech
- Streaming Music
- WindBlock
- DuoPhone
- Real Ear Sound
- SoundRecover2
- WhistleBlock
- Tinnitus Balance
- 16 Channels

30 Essential

- ActiveVent Performance +*
- UltraZoom
- Roger Technology
- Speech in Noise
- Calm Situation
- Streaming Speech
- Streaming Music
- WindBlock
- SoundRecover2
- WhistleBlock
- Tinnitus Balance



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Impact of Hearing Aid Technology on Outcomes in Daily Life I: the Patients' Perspective

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Abstract

Objectives—One of the challenges facing hearing care providers when recommending hearing aids is the choice of device technology level. Major manufacturers market families of hearing aids that are described as spanning the range from basic technology to premium technology. Premium technology hearing aids include acoustical processing capabilities (features) that are not found in basic technology instruments. These premium features are intended to yield improved hearing in daily life compared to basic-feature devices. However, independent research that establishes the incremental effectiveness of premium-feature devices compared to basic-feature devices is lacking. This research was designed to explore reported differences in hearing aid use and outcomes between basic and premium technology hearing aids.

A person wearing a blue lab coat is shown from the chest down, sitting at a table. They are holding a small hearing aid device in their right hand, examining it. On the table in front of them, several other hearing aid models are arranged in a row on a black surface. The models vary in size and shape, including some that are small and discreet, and others that are larger and more visible. The background is slightly blurred, showing what appears to be a wooden cabinet or wall.

High-Value Recommendation

Domes



Vs.



Earmolds

Ear Impressions



Hearing Aid Fitting



FREE TRIAL
30 DAY
FREE TRIAL



Follow-up Care



EVERYDAY HEALTHY HEARING SAVINGS

FREE

CLEAN & CHECK

Appointment for your hearing devices

Includes the following:

- A card of batteries
- Otoscopy
- Thorough cleaning of devices
- Listening Check

\$60
Value

Call our office to schedule a free clean and check of your current hearing devices with our Audiologists.
Must present this coupon at the time of the appointment.



Clean & Check Visits





Applied Hearing Solutions
 4045 E Union Hills Dr
 Suite D128
 Phoenix, AZ 85050
 Phone: 602-877-0000
 Fax: 623-900-7877
 AppliedHearingAZ.com



Invoice Statement

Invoice Date: 06/07/2021

Date	Code	Description	Qty	Cost
06/07/2021	V5299	Office Visit Retail Cost: [REDACTED] SP Member: [REDACTED]	1	\$0.00
06/07/2021	V5011	Hearing Aid Cleaning Retail Cost: [REDACTED] SP Member: [REDACTED]	2	\$0.00
06/07/2021	92593	Hearing Aid Check/Programming (binaural) - Basic Retail Cost: [REDACTED] SP Member: [REDACTED]	1	\$0.00
06/07/2021	69209	Cerumen Removal - Non-Impacted Retail Cost: [REDACTED] SP Member: [REDACTED]	2	\$0.00
06/07/2021		Redux Professional Hearing Aid Dehydration Retail Cost: [REDACTED] SP Member: [REDACTED]	1	\$0.00
06/07/2021	92595	EAA, Diagnostic Check (binaural) Retail Cost: [REDACTED] SP Member: [REDACTED]	1	\$0.00
06/07/2021	V5020	Conformity Measure/REAR/etc. Retail Cost: [REDACTED] SP Member: [REDACTED]	1	\$0.00
06/07/2021	V5267	Wax Traps (pack) Retail Cost: [REDACTED] SP Member: [REDACTED]	3	\$0.00
06/07/2021	V5267	Rayovac Pro Line Advanced 312 8 pack Retail Cost: [REDACTED] SP Member: [REDACTED]	8	\$0.00
			Cost	\$0.00
			Tax	\$0.00
			Total Cost	\$0.00
			Total Paid	\$0.00
			Balance Due	\$0.00

Competition always makes you
stronger and better. Competition
is feared only by the weak.

Mohammed bin Rashid Al Maktoum

**THE JOURNEY OF
A THOUSAND
MILES BEGINS WITH
ONE STEP.**

- LAO TZU

Thank You!

