Whereas, audiologists are professionals with Master’s and/or Doctoral degrees in audiology who are uniquely educated and trained in the evaluation, assessment, diagnosis, management, treatment and prevention of hearing and balance problems, and specifically educated and trained in providing diagnostic hearing evaluations for the purposes of fitting and dispensing hearing aids, and

Whereas, audiologists are regulated by state licensure in all fifty states and the District of Columbia to conduct hearing evaluations for the purposes of fitting and dispensing hearing aids, and

Whereas, the American Academy of Audiology is vigilant in its efforts to advocate for audiological practices that are safe, effective, and valid, and

Whereas, telemedicine/telehealth practices have been developed, are in use, and provide a method of maintaining audiological practices to patients in underserved areas, and

Whereas, a complete hearing evaluation involves the measurement of not only frequency-specific stimuli, but also physiological functions of the ear and auditory functions involving reception, recognition, processing and interpretation of speech, and

Whereas, the American National Standards Institute (ANSI) has determined that “Audiometric tests shall be conducted in a room where ambient noise levels conform to all requirements of the American National Standard Maximum Permissible Ambient Noise Levels for Audiometric Test Rooms;” and

Whereas, the ANSI has also determined that “Audiometric tests shall be conducted with audiometers that meet the specifications of and are maintained and used in accordance with the American National Standard Specifications for Audiometers, ANSI S3.6” and

Whereas, the importance of adhering to ANSI requirements is demonstrated by requirements of government agencies and representative organizations, and as a result require that diagnostic hearing evaluations are to be done in environments meeting these standards by a licensed audiologist, and

Whereas, thorough hearing evaluations are one part of the criteria needed to make decisions about candidacy for treatment of a hearing loss with other candidacy considerations including physical, cognitive, social, emotional, medical, and lifestyle attributes, and
Whereas, it is necessary to perform an otoscopic examination of the ear as part of a comprehensive evaluation to check for cerumen impactions, drainage, foreign bodies, and debris in the ear canal as these conditions can result in creating inaccuracies in the assessment of hearing tests and may indicate treatable causes of hearing loss, and

Whereas, any rehabilitative efforts towards the remediation of hearing problems will rely on the accuracy of testing, and

Whereas, the United States Food and Drug Administration (FDA) has listed criteria “red flags” that indicate conditions that require medical evaluation prior to the fitting and dispensing of hearing aids, and these conditions cannot be evaluated without a thorough case history, a physical examination of the ear, and an appropriately performed diagnostic hearing evaluation, and

Whereas, untreated hearing loss (as well as inadequately treated hearing loss) can exacerbate depression, isolation, and other emotional issues in adults and in particular elderly adults, and

Whereas, a hearing test via a website or telephone system, without the benefit of direct supervision or recognition of the standards previously described, is by its nature inadequate for the purpose of evaluating or treating hearing loss.

RESOLVED, that a hearing evaluation for the purpose of fitting hearing aids and other assistive listening devices should be offered in controlled conditions to meet existing standards, and

RESOLVED, that a test provided via the Internet without the appropriate supervision by an audiologist is not adequate for the purposes of the fitting or dispensing of a hearing aid.

References:


National Government Services, Inc. Local Coverage Determination for Audiologic and Vestibular Function Testing (L27390).