Standard Audiological Assessment

This standard covers the procedures to be used to assess and monitor a client’s hearing status and specifically test the status of the peripheral auditory system, which comprises the outer, middle and inner ear.

Expected Outcomes
• Standard audiological assessment is conducted to quantify and qualify, by site of lesion, peripheral hearing loss on the basis of behavioral or objective responses to acoustic stimuli.
• Assessment may result in recommendations for further audiological assessment, rehabilitative assessment, medical/educational referral, hearing aid/sensory aid assessment, hearing rehabilitation and counselling, speech or language assessment, or tinnitus assessment and rehabilitation.
• Clients/patients with identified hearing loss receive follow-up services to monitor audiological status and to enable appropriate management decisions.

Clinical Indications
• Individuals of all ages are assessed when a hearing loss or auditory processing disorder is suspected.
• Standard audiological assessment is prompted by referral, self-referral or referral from a screening programme.
• When standard audiological assessment cannot be completed, where possible, objective procedures should be employed, including auditory evoked potentials.

Clinical Process
• A case history is obtained, otoscopic evaluation performed and if necessary cerumen management is carried out by an appropriately trained professional prior to any audiological testing.
• The case history should include the impact of the hearing loss on the clients daily life (See history taking, counselling and rehabilitation standards)
• The assessment should invoke the ‘cross-check principle’ to check the consistency of results and aid in the interpretation of the results in relation to the case history.

Assessment may include:
• Air-conduction and bone-conduction pure tone threshold measures (with appropriate masking) carried out using calibrated stimuli delivered through transducers such as headphones, insert phones or loudspeakers. Age appropriate audiometric threshold seeking procedures must be used.
• Age appropriate speech perception testing with appropriate masking.
• Tympanometry and acoustic reflexes.
• Auditory evoked potentials (when traditional audiometric techniques cannot be employed or results are unreliable).
• Otoacoustic emissions.
• Recently documented and validated measurement procedures.

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Setting/Equipment Specifications
• The audiometric test equipment, technique and calibration of equipment and rooms must comply with ISO and IEC technical and procedural standards for the procedure used. Where no standards exist, manufacturers’ specifications can be consulted. Refer to NZAS Calibration Standard for further detail.
• Speech testing stimuli should be appropriate for New Zealand accents and lexicon when such information is available.

Documentation
Documentation addresses identifying information, pertinent background information, interpretation of test results and the type and severity of the hearing loss and associated conditions or disabilities and specific recommendations. Recommendations should address the need for further assessment, follow-up or referral.

Related References
- IEC 61027:1991 Instruments for the measurement of aural acoustic
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- impedance/admittance.
- ANSI S3.1 - 1991 American National Standard Maximum Permissible Ambient Noise Levels for Audiometric Test Rooms

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