

International Conference and Expo on **Audiology and Hearing Devices**

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Connecting to communicate: Using telepractice to provide auditory-verbal therapy & adult aural rehabilitation

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Hearing loss in children has been described as the most common health condition in newborns, affecting 1-3 per 1000 births. Because of newborn hearing screening, early diagnosis and fitting of hearing technology, and enrollment in intervention, many children with hearing loss are achieving language outcomes that rival their hearing peers by the time they reach kindergarten or first grade. That is, these outcomes are possible if parents have access to services that are timely, consistent, and are provided by well-trained practitioners who are knowledgeable about childhood hearing loss and communication development. Similarly, adults with significant hearing loss also need aural rehabilitation services. For adults who receive cochlear implants, consistent aural rehabilitation that will enable them to understand the speech signal that these devices provide is now a necessity for the attainment of optimal communication performance. Unfortunately, many parents and caregivers who have young children with hearing loss and adults with hearing technology may not have access to highly qualified speech-language pathologists who can provide appropriate services. Fortunately, telepractice models are now being used throughout the United States and around the world to provide parents and other patients with access to much needed services that are not available in their local communities. At The University of Akron, a model of telepractice has been developed to provide family-centered early intervention services to children with hearing loss and their parents/caregivers as well as aural rehabilitation services to adults who have received cochlear implants. This presentation will focus on how this model was developed, the clinical protocols that are used, and the communication outcomes of the patients who have been served.

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Additional factors to consider and modifications/manipulations for satisfactory hearing aid fittings

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Providing appropriate amplification to patients is more than just providing audibility. Many other factors must be taken into account when selecting options and fitting strategies. Most audiologists and clinicians understand the complexity the patient needs and perspective play into the selection of appropriate amplification. However, once the choices of style/manufacturer/etc. have been made, most audiologists use the same fitting strategy for every patient. The purpose of this presentation will be to discuss what other factors should be taken into account when fitting patients. Additionally, suggestions for changes which can/should be made in the hearing aid software to appropriately fit the young, aging and cognitively impaired patient. Current research findings will be discussed about fitting options for patients who are underperforming or who present with cognitive decline.

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