

Centre for Hearing and Balance Disorders

The A2 Clinic – A Clinic for Adults with a Hearing Loss and a Learning Disability: Key-worker / Carer Information

This information is for the carer/key worker and should be completed by them and brought in for the appointment

8 Points to Hearing Loss

The following points are useful in helping to decide if a patient has a hearing problem. Please can you answer the following on behalf of the patient:

1. Do they take notice of sudden, prolonged sounds (e.g. fire bell, tannoy)
2. Do they respond to the sound of your voice when they cannot see you?
3. Do they look up to the sound of their own name or familiar voices?
4. Do they show pleasure to music?
5. Do they speak in an excessively loud voice?
6. Do they seem to be inconsistent when they hear?
7. Do they show distress to loud sounds?
8. Do they like the TV or radio on louder than 'normal'?



Patient Information

Medical details

Has the patient been seen by the Ear Nose and Throat Department YES/NO

Has the patient ever had any history of? – Please tick all that apply

	Yes	No	Unknown
Wax			
Discharge			
Pain			
Perforated ear drums			
Poking/slapping ear or side of head			
Operation to ear(s)			

Has the patient ever had a hearing test before? YES/NO

Do they already wear a hearing aid? YES/NO

Do you know the cause of the learning disability? For example: Downs Syndrome

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Are there any visual problems? YES/NO

Communication

Does the patient respond to spoken language? YES/NO

Patient Information

How does the patient communicate? – Please tick all that apply

- Verbally
- Press a button
- Put an object in a box
- None of the above

Does the patient vocalise? YES/NO

Behaviour

Is the patient able to sit still for at least 5 minutes? YES/NO

Is the patient able to perform simple tasks if instructed? YES/NO

How would they be able to indicate when they hear a presented sound?

- Verbally
- Press a button
- Put an object in a box
- None of the above

Would the patient object to their face being touched? YES/NO

Other Information

What are the patient's main interests?

.....
.....
.....

Patient Information

Are they involved with:

	Yes	No
College		
Day Centre		
Job		
Other (please state)		

Desensitisation

For those patients who do not like to be touched it would be very useful if you could spend a little time preparing them for their visit so they are a little more aware of what to expect and so help reduce the anxiety for them. This will enable us to perform an effective hearing assessment. To help prepare the patient you might try the following:

- Stroking their ears and cheeks so they are used to people being near their ears. This will make it a bit easier for us to have a look in their ears and take a mould if necessary.
- Getting them used to having things over their ears because ideally we would like to get headphones on the patient to give us a more specific idea of the hearing thresholds in each ear.
- One of the methods we use to assess hearing is through games. We ask the patient to wait for a sound and then place an object into a bowl. It would be useful for them to practice this with you by perhaps saying 'go' and then letting them do an activity of their choice. This will get them used to waiting and responding to a stimulus.

We appreciate that it may not be possible to use the headphones or get the patient to respond to a sound particularly if they have mobility, co-ordination or visual problems. We do have other subjective methods of assessing hearing thresholds but the conditioning method provides more useful information on hearing thresholds. If this fails there are more objective tests to ascertain if there is a hearing loss or not.

Patient Information

Wax Management

Generally earwax is a good thing because it helps to keep the ears clean, lubricated and healthy. In most people it is soft and will work its own way out of the ear. It is important that ears are clear of wax before a hearing assessment. If the ear is blocked it may reduce hearing levels, prevent us from seeing the ear drum and identifying any ear infection. It is also important that the ears are **checked regularly** for wax about every 6 months particularly in those at risk of wax build up.

People particularly at risk of wax build up are:

- People who have narrow ear canals;
- People who wear a hearing aid;
- People with Downs Syndrome.

Ears can be checked by:

- Visiting the Doctor (or practice nurse) at the local surgery;
- If the audiologist comes out to the Day Centre they can check for wax;
- If a hearing aid is worn the ears can be checked at Hearing Services.

If the ear is blocked, using warm olive oil or drops can soften the wax. **But** if there is a history of perforated eardrums or a history of ear surgery please ask for advice first.

Do not try and clear the wax with cotton buds or any other instrument. The wax will just be pushed further down the ear canal; there is then a risk of damaging the eardrum.

Please look through the other leaflet sent out 'Your Hearing Appointment Explained' with the patient so they have some idea of what will happen when they come to visit us. If you have lost it or have not received one please ask staff or contact the Health Information Centre.

Patient Information

Further Information

Email: Audiology.Correspondence@uhcw.nhs.uk

Open: Monday to Thursday: 8am - 5pm

Friday: 8am - 4.15pm

The Centre is located in clinic 8 on the ground floor in the hospital's outpatients department.

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact us on 024 7696 6444 and we will do our best to meet your needs.

The Trust operates a smoke free policy

Document History

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