Making "Sense" of Your Hearing Loss

Heather Whitestone
AR Group
12:00-1:00
Callier Center for Communication Disorders
AR ENROLLMENT
(Rev. 1/02)

**Audologist, please complete on day of hearing instrument fitting and return to hearing aid room.

Patient Name: __________________________

CCCD#: __________________________

Phone #: __________________________

DOB: __________________________

Date of fitting: __________________________

Ear(s) fit (circle): Right Left Both

Type of instrument (circle): BTE ITE ITC CIC

Previous instrument user (circle): Yes No

Preference for AR (circle): Group Phone

Beginning Date of class: Thursday, __________________________ (See calendar)

Audiologist: __________________________
February 2002

<table>
<thead>
<tr>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
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Unknown

1/16/02
Making "Sense" of Your Hearing Loss

**Week 1 - Hearing** "Hear today, gone tomorrow."
- Audiograms (Speech Sounds)
- Hearing aids
- Care and maintenance of hearing aid(s)
- Troubleshooting
- Equipment to use with hearing aids
- Local and national self-help organizations

**Week 2 - Taste** "I can't hear as fast as you talk."
- Reasons why hearing aids are not always enough
- Common complaints of hearing aid users
- Communication strategies for talkers and HOH listeners

**Week 3 - Sight** "I can hear better wearing my glasses."
- Speechreading
- Factors affecting communication
- Social/emotional impact of hearing loss

**Week 4 - Touch** "Reach out and touch someone."
- Americans with Disabilities Act
- Assistive listening devices
Making "Sense" of your Hearing Loss

Ground Rules

1. Facilitate communication for all persons in the group, i.e. face the group, and speak clearly.

2. Only one person talks at a time.

3. No bluffing or faking understanding if you don't understand someone.

4. Commitment to completing four classes.

5. AMPLIFICATION ALWAYS!!!
HEARING AID RECORD

<table>
<thead>
<tr>
<th>Ear Fit</th>
<th>Right</th>
<th>Left</th>
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<tbody>
<tr>
<td>Type of Aid</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Manufacturer</td>
<td></td>
<td></td>
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<tr>
<td>Model Number</td>
<td></td>
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<tr>
<td>Serial Number</td>
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<td></td>
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<tr>
<td>Date Purchased</td>
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</table>

REPAIR RECORD

<table>
<thead>
<tr>
<th>Date</th>
<th>Problem</th>
<th>Solution</th>
<th>Cost/Warranty</th>
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</table>
An agreement between the University of Texas at Dallas, Callier Center for Communication Disorders and

Patient Name Printed
CCCD # Date

I. DESCRIPTION OF NEW HEARING AIDS DISPENSED:

HEARING AID FOR THE RIGHT EAR HEARING AID FOR THE LEFT EAR
MANUFACTURER ___________________________ MANUFACTURER ___________________________
MODEL ___________________________ MODEL ___________________________
SERIAL # ___________________________ SERIAL # ___________________________
REMOTE CONTROL SERIAL # ___________________________ BATTERY SIZE ___________________________

II. FITTING AND TRIAL AGREEMENT

I understand that I have a 30 day trial period ending on ____________, and that if I return the hearing aid(s) above by the end of the trial period, I will receive a refund of the purchase price. The exact amount of a refund I might receive is specified below. Charges for services and for hardware that cannot be returned will not be refunded.

U.T. Dallas agrees to repair the hearing aid(s) listed above for problems resulting from the normal use of the hearing aid(s) for TWO (2) YEARS from the date of this agreement.

The following statements are applicable if initialed by the audiologist:

_________ The manufacturer will replace each hearing aid one time if damaged beyond repair or lost during the first year following the date of this agreement.

_________ The manufacturer of the above hearing aid(s) requires a deductible payment of $_______ for each hearing aid replaced under this coverage.

If a hearing aid is returned during the trial period for refund, U.T. Dallas agrees to refund the specified amount by check or by issuing a credit to the credit card that was used for the original payment. If a hearing aid is exchanged for an alternate product within the trial period, payments previously made for the purchase of the original product will be applied toward the cost of the new product. An additional amount owed or a refund may result from the exchange of hearing aids.

III. CHARGES

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
<th>Refundable amount</th>
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<tbody>
<tr>
<td>Hearing Aid for the right ear</td>
<td>$_______</td>
<td>$_________</td>
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<tr>
<td>Hearing Aid for the left ear</td>
<td>$_______</td>
<td>$_________</td>
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<tr>
<td>Earmold charges</td>
<td>$_______</td>
<td>$_________</td>
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<tr>
<td>Hearing aid fitting fee</td>
<td>$_______</td>
<td>$_________</td>
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<tr>
<td>Other charges</td>
<td>$_______</td>
<td>$_________</td>
</tr>
<tr>
<td>Total Charges</td>
<td>$_______</td>
<td>$_________</td>
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</table>

User or Guardian's signature ___________________________ Date ____________

Audiologist’s signature ___________________________ License # ___________________________ Date ____________
HEARING AID TRIAL PERIOD AND WARRANTY POLICY

It is state law that any person purchasing a hearing aid(s) in the state of Texas receive a 30 day trial period; during which time the user may wear the hearing aid, without obligation to keep it, to determine whether or not it is of benefit to the user.

It is the policy of the Callier Center that the user pay for the hearing aid(s) at the time of the hearing aid fitting. The user will then try the hearing aid(s) for a period of 30 days, following which the individual will return to this Center for a hearing aid check. If at any time during the trial period, or at the end of the trial period, the user is unhappy with the hearing aid(s), for whatever reason, the user may return the hearing aid(s) and be reimbursed the cost of the hearing aid, minus a $200.00 evaluation/appointment fee, or the device may be exchanged for one from another manufacturer for another thirty day trial period.

All hearing aids purchased from this Center carry a two year warranty to cover repairs of problems resulting from normal use. In addition, some hearing aids may be replaced one time during the first year in case of loss or damage depending upon the policies of the hearing aid manufacturer. Extended warranties may be purchased at the time of the hearing aid purchase or before the original warranty expires, depending upon the policies of the hearing aid manufacturer.

It is strongly recommended that hearing aid insurance is purchased on hearing aids to be worn by children.
A NOTE ABOUT REPLACING LOST OR DAMAGED HEARING AIDS

- **IF** your hearing aid is still covered by its manufacturer’s warranty for **loss & damage** BEYOND repair:
The Callier Center will not charge for services related to the replacement when the hearing aid is covered by the manufacturer’s **loss and damage** Policy. If the hearing aid to be replaced is a “behind-the-ear” style, **earmolds ARE NOT** covered by the manufacturer’s **loss and damage** Policy.

- **AFTER** your hearing aid is no longer covered for **loss & damage** by the manufacturer, there are companies that specialize in providing hearing aid insurance (See Below). HOWEVER, privately purchased hearing aid insurance **MAY NOT** cover fees necessary to replace a Lost or Damaged Hearing Aid, there may be charges for certain Callier Center Services (e.g.: audiological evaluation, making earmold impressions, refitting hearing aid).

<table>
<thead>
<tr>
<th></th>
<th><strong>Ear Service Corp (ESCO)</strong> 800.992.3726</th>
<th><strong>Midwest Hearing Ind.</strong> 800.821.5471</th>
<th><strong>Professional Benefit Services (A Division of Starkey)</strong> 800.733.2596</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Application Deadline?</strong></td>
<td>Within 30 days of dispenser inspection</td>
<td>Within 90 days of hearing aid purchase</td>
<td>Anytime after dispenser inspects hearing aid as satisfactory</td>
</tr>
<tr>
<td><strong>Covered if unintentionally lost or damaged?</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
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<tr>
<td><strong>Effective upon:</strong></td>
<td>Application postmark date</td>
<td>Receipt of Application</td>
<td>Receipt of Application</td>
</tr>
<tr>
<td><strong>Deductible for lost/damaged hearing aid?</strong></td>
<td>No</td>
<td>No</td>
<td>No</td>
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<tr>
<td><strong>Coverage for normal wear and tear?</strong></td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td><strong>Coverage continues after lost hearing aid replaced?</strong></td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td><strong>Coverage continues after damaged hearing aid repaired?</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Hearing aid replaced with?</strong></td>
<td>Identical Model</td>
<td>Identical Model</td>
<td>Equivalent (Starkey) Model</td>
</tr>
<tr>
<td><strong>Cancel upon demand?</strong></td>
<td>Yes: Pro-rata</td>
<td>Yes: Pro-rata</td>
<td>Yes: Pro-rata</td>
</tr>
</tbody>
</table>

- **REMEMBER** – the privately purchased hearing aid insurance is a contractual agreement between you and the insurer. Be aware of all charges before entering into a contract. Be sure to check the contract to determine how much, if any, professional fees are covered. The method of replacement and exact coverage is also specified in each insurer’s contract.

(Some homeowner’s insurance policies may cover hearing aid loss or damage)
ASSISTIVE DEVICES CENTER
The University of Texas at Dallas
Callier Center for Communication Disorders

What is the Assistive Devices Center?
The purpose of the Assistive Devices Center is to promote communication access for people with a hearing impairment in all areas of life. Staff members meet with those who have hearing impairments, their families, employers, and others in the community to determine communicative needs and to demonstrate the help available from a varied stock of assistive devices and systems maintained in the center. These devices may be used alone or to supplement the use of personal hearing aids in special situations. Assistive devices are found today in homes, classrooms, offices, theaters, places of worship, hotels, banks, and airports. Assistive technology for people with hearing impairments includes the examples listed below.

Assistive Listening Devices and Systems
Personalized listening systems enable people with hearing impairments to minimize the effects of distance, reverberation, and background noise when listening to television, a companion in the car, a speaker at a meeting, or an actor in a play. Some devices are available to help professionals, such as counselors and health care providers, talk with those who have impaired hearing but are unaided. Assistive listening systems may be hardwired or use electromagnetic induction, FM radio signals, or infrared light to transmit sound.

Telecommunication Devices and Systems
Options for increasing the signal coming from the telephone receiver vary from portable devices to special telephones with built-in amplification. Text telephones (TTYS) enable typed conversations to be transmitted over telephone lines. Personal computers may incorporate hardware and software modifications to enhance communication in the workplace or home. Closed captioning is available for many televised programs and for films on videocassettes.

Signaling and Alerting Devices and Systems
There are assistive devices which convert audible signals in the environment into visual or vibrotactile signals. They may be used to alert an individual with a hearing impairment to the doorbell or a knock at the door, to the sound of an alarm clock, smoke detector, telephone, or baby crying. Portable paging systems may summon a person with a hearing impairment within a range of 100 feet; alphanumeric pagers provide communication over greater distances.

If you would like more information about communication access, you may schedule an appointment with the Assistive Devices Center by calling (214) 905-3037.
This book is a guide to hearing loss, its impact on daily living, and the vast array of help that is available.

This book is written for those who want to communicate more effectively with adults who have hearing loss. It contains many suggestions for daily communication and interpersonal skills.

Here is a practical guide for adults with hearing loss and their families.

This book, by an author whose hearing loss is due to Meniere's Disease, emphasizes practical communication strategies and resources. It also explains how one hears and the causes of hearing loss.

The author, who has a significant hearing loss, writes about her experiences so others may benefit from useful information, resources and hints.

This text is part of Barron's Keys to Retirement Planning series. It provides information on many topics such as living alone with a hearing loss, going to the hospital, legal rights, etc.

This resource guide features a question and answer format to provide information about hearing loss, hearing aids, assistive devices, and organizations providing help for individuals with hearing loss.

A. G. Bell Association
Publication Sales Department
3417 Volta Place, N.W.
Washington, DC 20007-2778

202-337-8767 (Voice/TTY)
202-337-8270 (FAX)

Gallaudet University Press
800 Florida Avenue, N.E.
Washington, DC 20002-3695

800-451-1073 (Voice/TTY)
202-651-5489 (FAX)

Harris Communications, Inc.
15159 Technology Drive
Eden Prairie, MN 55344
800-825-6758 (Voice)
800-825-9187 (TTY)
612-906-1099 (FAX)

SHHH Publications
7910 Woodmont Avenue, Suite 1200
Bethesda, MD 20814

301-657-2248 (Voice)
301-657-2249 (TTY)
301-913-9413 (FAX)
<table>
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<tr>
<th>Company</th>
<th>Address 1</th>
<th>Address 2</th>
<th>Phone Numbers</th>
<th>Web Sites</th>
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<tr>
<td>ADCO Hearing Products, Inc.</td>
<td>5661 S. Curtice St.</td>
<td>Littleton CO 80210</td>
<td>800-726-0851 (voice/TTY) 303-794-3928 (voice/TTY) 303-794-3704 (FAX)</td>
<td><a href="http://www.ADCOhearing.com">www.ADCOhearing.com</a> (Internet)</td>
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<tr>
<td>General Technologies</td>
<td>7415 Winding Way</td>
<td>Fair Oaks CA 95628-6701</td>
<td>800-328-6684 (voice/TTY) 916-962-9225 (voice/TTY) 916-961-9823 (FAX)</td>
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<tr>
<td>HARC Mercantile, Ltd.</td>
<td>1111 West Centre Avenue</td>
<td>P.O. Box 3055 Kalamazoo MI 49003-3055</td>
<td>800-445-9968 (voice) 800-413-5245 (TTY) 800-413-5248 (FAX) 616-324-1615 (voice)</td>
<td><a href="http://www.harcmercantile.com">www.harcmercantile.com</a> (Internet)</td>
</tr>
<tr>
<td>Harris Communications</td>
<td>15159 Technology Drive</td>
<td>Eden Prairie MN 55344</td>
<td>800-825-6758 (voice) 800-825-9187 (TTY) 612-906-1099 (FAX) 800-211-4360 (VCO)</td>
<td><a href="http://www.harriscomm.com">www.harriscomm.com</a> (Internet)</td>
</tr>
<tr>
<td>Hear More</td>
<td>P.O. Box 3413</td>
<td>Farmingdale NY 11735</td>
<td>516-752-0738 (voice/TTY) 516-752-0689 (FAX) 800-881-4327 (voice/TTY - orders only)</td>
<td><a href="http://www.hearmore.com">www.hearmore.com</a> (Internet)</td>
</tr>
<tr>
<td>LS&amp;S Group, Inc.</td>
<td>P.O. Box 673</td>
<td>Northbrook IL 60065</td>
<td>800-468-4789 (voice) 800-317-8533 (TTY) 847-498-1482 (FAX)</td>
<td><a href="http://www.LSSGroup.com">www.LSSGroup.com</a> (Internet)</td>
</tr>
<tr>
<td>Silent Call Corporation</td>
<td>P.O. Box 868</td>
<td>Clarkston MI 48347-0868</td>
<td>800-572-5227 (voice) 810-673-0221 (voice) 810-673-6069</td>
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WCI
2716 Ocean Park Blvd.
Santa Monica CA 90405
310-452-8613 (voice)
310-452-5460 (TTY)
310-450-9918 (FAX)
800-233-9130 (voice/TTY)
www.weitbrechtcom.com (Internet)

SHARE RESOURCES: AREA VENDORS SPECIALIZING IN ASSISTIVE DEVICES
(Catalogs are also available from these vendors.)

Abe’s TDD/Device Sales & Service
P.O. Box 2948
Grapevine TX 76099-2948
817-481-7520 (TTY) DFW Area Metro Number
817-488-1789 (FAX)
800-735-2988 (Voice, Relay Texas)

Chaney TDD Sales & Service
4305 Mill Run Road
Dallas TX 75244
972-503-1818 (Voice)
972-503-9300 (TTY)
972-503-1820 (FAX)

Compu-TTY
3408 Indale Road
Fort Worth TX 76116
800-366-9950 (Voice)
817-738-2485 (Voice)
817-738-8993 (TTY)
817-738-1970 (FAX)

Local Radio Shack stores
See catalog
SHARE PROGRAM RESOURCES: ORGANIZATIONS

Self Help for Hard of Hearing People, Inc. (SHHH)
7910 Woodmont Avenue, Suite 1200
Bethesda, MD 20814

301-657-2248 (Voice)
301-657-2249 (TTY)
301-913-9413 (FAX)
E-mail: national@shhh.org
Internet: http://www.shhh.org/

SHHH, Dallas Chapter
P.O. Box 25307
Dallas, TX 75225-1307
(Questions: 972-680-8623)

Daytime meetings:
4th Friday, 9:30 a.m.
Richardson Senior Center
820 West Arapaho
Richardson, TX 75080

Evening meetings:
3rd Thursday, 7:00 p.m.
Baylor Hospital - Richardson, Medical Plaza Entrance
Campbell Road at Canyon Creek
Richardson, TX 75080

SHHH, Ft. Worth Chapter
Goodrich Center for the Deaf
2500 Lipscomb Street
Ft. Worth, TX 76110.
Phone: 817-926-5305

Daytime meetings:
2nd Saturday at the Goodrich Center for the Deaf
9:30 a.m., refreshments
10:00 a.m., program

SHHH is a consumer organization dedicated to educating members about the causes, nature, and complications of hearing loss and what can be done to help. Members receive the bimonthly journal, Hearing Loss; a publications catalog lists many resources.

Association of Late-Deafened Adults (ALDA)
ALDA, Inc.
10310 Main Street, #274
Fairfax, VA 22030
404-289-1596 (TTY)
404-284-6862 (FAX)
www.alda.org. (WEB)

ALDA provides education, advocacy, and support for late-deafened adults and their families.
Alexander Graham Bell Association for the Deaf
3417 Volta Place NW
Washington, DC 20007-2778

800-432-7543 (toll free)
202-337-5220 (Voice/TTY)
202-337-8314 (FAX)
202-337-8767 (Voice, Publication Sales)
202-337-8270 (FAX, Publication Sales)
E-mail: AGBELL2@aol.com
Internet: http://www.agbell.org/

The A. G. Bell Association is dedicated to empowering persons with hearing loss to function independently by learning to use and maintain verbal communication. Although this group emphasizes children with severe hearing loss and their families, a catalog is available which lists many resources for adults.

Cochlear Implant Club International (CICI)
P.O. Box 464
Buffalo, NY 14223-0464

716-838-4662 (Voice/TTY)
E-mail: 76207,3114 (Compuserve)

Cochlear Crusaders (Dallas chapter, CICI)
Meetings are the 3rd Saturday of each month except December, 1:00 p.m.
5th floor meeting rooms, Tom Landry Sports Medicine and Research Center
411 Washington Street, Dallas, TX 75246
For information, contact: Frank or Leola Mosso, 214-487-0760 or 490-4155 (Voice/TTY)

CICI is a support group for cochlear implant recipients and their families; they publish an informative newsletter.

Meniere's Network
c/o The EAR Foundation
Education and Auditory Research Foundation
1817 Patterson Street
Nashville, TN 37203

800-545-4327 (toll free, 8:00 a.m. - 4:30 p.m., eastern time)
615-329-7849 (TTY)
615-329-7935 (FAX)

This is a national network of patient support groups that provide people with Meniere's Disease the opportunity to share experiences and coping strategies.
WEEK 1

HEARING
"Hear today, gone tomorrow."

1. Audiograms
   - Speech Sounds
   - Environmental Sounds

2. Hearing Aids
   - Components
     Behind-the-Ear (BTE)
     In-the-Ear (ITE)
     In-the-Canal (ITC)

3. Care and Maintenance of Hearing Aid(s)

4. Troubleshooting

5. Equipment to Use with Hearing Aids

6. Local and National Self-help Groups for People with Hearing Loss
Relative Loudness Levels of Common Sounds

From: *Learning to Hear Again*
Hearing Conservation, 5.L.1
BTE: Components and Checklist

From: *Learning to Hear Again*
Guide to Hearing Aid Use, p. 5
ITE/ITC: Components and Checklist

From: *Learning to Hear Again*
Guide to Hearing Aid Use, p. 6
How to Care for Your Hearing Aid

From: *Learning to Hear Again*  
Guide to Hearing Aid Use, p. 13
## Troubleshooting Your Hearing Aid (pt. 1)

### PROBLEMS

* "Dead" hearing aid
  *(no sound at all)*

### CAUSES

1. Battery is weak.
2. Battery is in hearing aid incorrectly.
3. Wrong type of battery.
4. Battery contacts are corroded.
5. Opening to canal is plugged with wax.
6. disconnected.
7. Tubing is twisted or kinked.
8. Tubing is plugged.
9. Moisture is in tubing.

### SOLUTIONS

1. Put in new battery.
2. Put battery in aid correctly.
3. Replace with right type of battery.
4. Check with audiologist.
5. Remove wax with a wax removal tool and clean vent with a pipe cleaner.
7. Straighten tubing.
8. Clean tubing with a pipe cleaner, wash, and dry with air blower.
9. Use air blower to dry.

### Distortion of sound

1. Battery is almost dead.
2. Battery contacts are corroded.
3. Opening to canal is plugged.
4. Volume control is too high or full-on.
5. Microphone opening is dirty or covered.
6. Moisture is in earmold and/or tubing.
7. Tubing is collapsed or twisted.

### SOLUTIONS

1. Put in new battery.
2. Check with audiologist.
3. Remove wax or dirt with a wax removal tool.
4. Turn down volume control to correct setting.
5. Remove dirt, food, etc. from microphone and be sure microphone is left uncovered. (Sometimes cleaning must be done by the audiologist.)
6. Dry earmold and tubing well after washing, using air blower.
7. Untwist and open tubing.

*Bold wording pertains to individuals with Behind-The-Ear Hearing Aids.*
# Troubleshooting Your Hearing Aid (pt. 2)

<table>
<thead>
<tr>
<th>PROBLEMS</th>
<th>CAUSES</th>
<th>SOLUTIONS</th>
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| *Intermittent sound (aid goes on and off)* | 1. Battery is almost dead.  
2. Battery contacts are corroded.  
3. Bad volume control.  
4. Moisture is in aid.  
5. Moisture is in tubing. | 1. Put in new battery.  
2. Check with audiologist.  
3. Check with audiologist.  
4. Use dehumidifier overnight. If problem persists, check with audiologist.  
5. Use air blower. |
| *Feedback (whistling)* | 1. Hearing aid (earmold) is not put into aid correctly.  
2. Hearing aid (earmold) does not fit well. Possibly too big or too small.  
3. Volume control is too high.  
4. Internal feedback inside the hearing aid case because of defect in aid.  
5. Aid is not firmly attached to earmold.  
6. Tubing is cracked or has hole in it. | 1. Put hearing aid (earmold) carefully into the ear so it fits snugly.  
2. Check with audiologist.  
3. Turn down volume, but not below its normal setting.  
4. Check with audiologist.  
5. Push earmold or tubing firmly together with hearing aid or tubing.  
6. Have tubing replaced. |

*Bold wording pertains to individuals with Behind-The-Ear Hearing Aids.*
Equipment to Be Used with Hearing Aids

From: *Learning to Hear Again*
Guide to Hearing Aid Use, p. 14
Equipment to Be Used with Hearing Aids (cont.)

From: *Learning to Hear Again* Guide to Hearing Aid Use, p. 15
Listening Experiences with Hearing Aids

From: Learning to Hear Again
Guide to Hearing Aid Use, p. 4
Self-Help Groups

Self Help for Hard of Hearing People, Inc. (Dallas)
P.O. Box 25307
Dallas, Texas 75225-1307

Alexander Graham Bell Association for the Deaf
3417 Volta Place, N.W.
Washington, D.C. 20007
Tel. (202) 337-5220
Fax (202) 337-8314

Meniere's Network
The Ear Foundation
2000 Church Street
P.O. Box 11
Nashville, Tennessee 37236
Tel. (615) 329-7809

National Association for the Deaf
814 Thayer Avenue
Silver Springs, Maryland 20810
Tel. (301) 587-1788
TTY (301) 587-1789
Fax (301) 587-1791
WEEK 2

TASTE
"I can't hear as fast as you talk."

1. Reasons Why Hearing Aids are NOT Always Enough

2. Common Complaints of Hearing Aid Users

3. Communication Strategies
   - HOH Listeners
   - Talkers
REASONS WHY HEARING AIDS ARE NOT ALWAYS ENOUGH

1. Hearing aids cannot restore normal hearing.
   Very simply, a hearing aid can make louder the sounds and words that are otherwise too faint for you to hear --- a hearing aid is a mini-amplifier.

2. The human ear is capable of hearing sounds from about 20 – 20,000 Hz.
   A hearing aid is very good at amplifying sounds from about 400 – 4000 Hz.

3. The use of a hearing aid requires a period of adjustment and learning new skills.

COMMON COMPLAINTS OF HEARING AID USERS

1. My own voice sounds different.
2. The hearing aid picks up noise more than it does speech.
3. The hearing aid whistles.
4. I can hear, but I can’t understand.
5. Wind whistles when I am outside or driving in the car with the windows open.
6. There is a feeling of fullness in the ear.
Rules for Good Communication

From: *Learning to Hear Again*
*Communication Strategies, 5.E.4*
Communication Guidelines

From: Learning to Hear Again
Communication Strategies, p. 3
10 Keys to Effective Listening

From: *Learning to Hear Again*
Listening Strategies, 5.D.4
Stress and Hearing Loss

From: Learning to Hear Again
Communication Strategies, p. 20
WEEK 3

SIGHT
"I can hear better wearing my glasses."

1. Speechreading

2. Factors Affecting Communication

Gestures and Facial Expressions

From: *Learning to Hear Again*  
Speechreading, p. 14
Suggested Exercises for Gestures and Facial Expressions for Continued Practice

From: *Learning to Hear Again* Speechreading, p. 23
Lipreading: Part of the Communication Process

From: *Learning to Hear Again: Visual Awareness and Speechreading*, 5.B.1
Rules to Follow When Speechreading

1. **Watch the talker's lips.**
   This seems obvious, but often, a speechreader can be distracted by other events in the room, or the talker's hand gestures. Also, there may be a tendency to watch the talker's eyes instead of the mouth.

2. **Provide information to the talker about how to communicate with you.**
   This may include asking the talker to speak clearly and at slightly louder than normal conversational level. The talker should not shout or exaggerate lip movements. The talker should face you when speaking, and should not chew or cover the mouth, such as with a hand.

3. **Try to ensure that the room is well-lit and that your position in the room allows for optimal speechreading performance.**
   You will want to find a seat where light does not shine in your eyes and adjust light sources so they do not cast shadows on the talker's face. Position yourself near enough to the talker so you can clearly see the talker's mouth and facial expressions.

4. **Try to minimize background noise.**
   Background noise might be minimized by ensuring that radios and televisions are turned down or off. Favorable seating, say at a table away from the kitchen in a restaurant, may also minimize background noise.

5. **Know the topic of conversation.**
   During a conversation, ask someone the topic of conversation. It is much easier to recognize a message if you know what is being discussed. If you know in advance that a specific topic will be discussed, try to learn something about it beforehand.

6. **Pay attention to context cues.**
   The situation in which the conversation occurs may provide information about what is being said. The talker's facial expressions and what has been discussed beforehand may also be informative.

7. **Keep a positive attitude.**
   Speechreading can be tiring. Stay motivated, and do not be distracted by your own anxiety and self-doubts.

Sounds to Look For When Speechreading

From: *Learning to Hear Again*  
Speechreading, p. 10
Practice Sheets for P-B-M

From: *Learning to Hear Again*
Visual Awareness and Speechreading, 5.B.2
Practice Sheets for W and WH

From: Learning to Hear Again
Visual Awareness and Speechreading,
5.B.3
Practice Sheets for F and V

From: *Learning to Hear Again*
Visual Awareness and Speechreading,
5.B.4
Additional Activities for Home Practice

From: *Learning to Hear Again*
Visual Awareness and Speechreading,
5.B.10
Additional Activities for Home Practice
(cont.)

From: *Learning to Hear Again*
Visual Awareness and Speechreading,
5.B.11
Social and Emotional Issues

From: *Learning to Hear Again*
Social/Emotional Issues, 5.H.1
Effects on Emotions (Affect)

From: *Learning to Hear Again*
Social/Emotional Issues, 5.H.2
Effects on Thoughts and Relationships

From: *Learning to Hear Again*
Social/Emotional Issues, 5.H.3
WEEK 4

TOUCH
"Reach out and touch someone."

1. Being ASSERTIVE

2. Americans with Disabilities Act (ADA)

3. Assistive Listening Devices
Suggestions for Improving Communication by Being Assertive

From: Learning to Hear Again Speechreading, p. 13
Who's Covered Under the ADA?

A physical or mental impairment that substantially limits one or more of the major life activities of the individual, including the following:

orthopedic
visual
speech and hearing impairments
cerebral palsy
epilepsy
muscular dystrophy
multiple sclerosis
cancer
heart disease
diabetes
mental retardation
emotional illness
specific learning disabilities
HIV disease (symptomatic or asymptomatic)
tuberculosis
drug addiction
alcoholism

- It is not possible to list all the specific conditions, contagious or noncontagious diseases, or infections covered under the ADA.

Places of Public Accommodation (ADA Handbook, Title III, pgs. III 26-28)

A place of public accommodation means a facility, operated by a private entity, whose operations affect commerce and fall within at least one of the following categories:

1) Places of lodging.
   An inn, hotel, motel, or other place of lodging, except for an establishment located within a building that contains not more than five rooms for rent or hire and that is actually occupied by the proprietor of the establishment, as the residence of the proprietor.

2) Establishments serving food or drink.
   A restaurant, bar, or other establishment serving food or drink.

3) Places of exhibition or entertainment.
   A motion picture house, theater, concert hall, stadium, or other place of exhibition or entertainment.

4) Places of public gathering.
   An auditorium, convention center, lecture hall, or other place of public gathering.

5) Sales or rental establishments.
   A bakery, grocery store, clothing store, hardware store, shopping center, or other sales or rental establishment.

6) Service establishments.
   A laundromat, dry cleaner, bank, barber shop, beauty shop, travel service, shoe repair service, funeral parlor, gas station, office of an accountant or lawyer, pharmacy, insurance office, professional office of a health care provider, hospital, or other service establishment.

7) Stations used for specified public transportation.
   A terminal, depot, or other station used for specified public transportation.

8) Places of public display or collection.
   A museum, library, gallery, or other place of public display or collection.

9) Places of recreation.
   A park, zoo, amusement park, or other place of recreation.

10) Places of education.
    A nursery, elementary, secondary, undergraduate, or postgraduate private school, or other place of education.

11) Social service center establishments.
    A day care center, senior citizen center, homeless shelter, food bank, adoption agency, or other social service center establishment.

12) Places of exercise or recreation.
    A gymnasium, health spa, bowling alley, golf course, or other place of exercise or
Seven Things Every Hearing Aid Wearer Should Know About Telecoils

By Robert A. Gilmore

1. Sensitivity: Request the most sensitive telecoil circuit possible, considering the size of the hearing aid.

2. Type of Telecoil: Request a telecoil circuit with a dedicated pre-amplifier, an active telecoil. Active telecoils are size-for-size more powerful than passive telecoils.

3. Telecoil Position: Request that the telecoil be mounted in a near-vertical position relative to the worn position. Although a horizontal position relative to the worn position generally yields a slightly stronger (approximately 5 dB) signal when coupled normally to a hearing-aid-compatible telephone, this telecoil orientation severely limits the telecoil's effectiveness when used with induction loops.

4. MT Switch: Request an “MT” combination switch (Microphone/Telecoil). In the “MT” mode, the user has simultaneous access to both the acoustic signal, via the “M” (microphone) and the induction signal (from such devices as hearing-aid-compatible telephones and audio induction-based devices such as audio loops, neck loops, and silhouette inductors) via the telecoil.

5. Remote Control: Investigate a hearing aid remote control option. The remote control feature allows the user to switch from “O” (Off), “M” (Microphone), “T” (Telecoil), and/or “MT” (Microphone/Telecoil). In addition, such features as volume and tone control may also be adjusted. Remote control is a handy feature for people who adjust their hearing aid controls frequently or have difficulty manipulating small switch controls.

6. User Tested: Request a listening test at the time of fitting using the telecoil-equipped hearing aid and a hearing-aid-compatible telephone or induction loop assistive listening system.

7. Clinician Tested: Request that your hearing aid dispenser evaluate your hearing aid's telecoil circuit using electroacoustic hearing aid test equipment. Ask your hearing aid dispenser if your make/model of hearing aid has manufacturer specifications for the telecoil. If so, compare the electroacoustic test results of your hearing aid with the manufacturer's telecoil specifications.
Assistive Devices for Persons with Hearing Impairment

From: *Learning to Hear Again*
Hearing and Hearing Loss, 5.1.3
Figure 5.1: An Infrared Assistive Listening System

- Infrared Transmitter
- VCR
- TV
- Power to Transmitter
- Transmitter plugs into VCR or plugs into jack or has microphone attached to loudspeaker

Figure 5.2: Infrared Receivers

- One-piece headset / receiver
- Receiver plugged directly into hearing aid
- Receiver with headphones
- Receiver used with neckloop and hearing aid set to "T"

Review of the Telecommunications Act of 1996, and improvements of new telephones (e.g. caller id, volume control on ringer) that can benefit individuals with hearing impairments.
Save Money on Assistive Technology for Your Car
by David Baquis

From: Hearing Loss
July/August 1998 p. 22-23
REFERENCES

