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1.1 Symptom Description
Difficulty hearing in quiet, noise or groups. This may result in - family / friends complaining - change in behaviour

1.2 Prevalence
20% of adult population have hearing impairment and this figure rises to 90% in over 80s. Most hearing impaired patients will benefit from hearing aids

1.3 Self Assessment & Self Care
It may be helpful to consult with - NHS Direct - RNID - Websites

Or consider hearing screening or a visit to your GP Surgery

1.4 Primary Prevention
- Participation in childhood and all relevant vaccination programmes
- Avoidance of excessive noise (occupational / leisure)
- Education about exposure to noise / noise protection



5.0

1.6 Escalation thresholds
Symptomatic or Asymptomatic loss. Ax is essential if loss greater on one side

1.7 Red Flags
Sudden/ rapidly progressing loss +/- discharge/ vertigo/ +++pain

2.0 Primary Assessment (GP for Patients under 60 yrs)
Hx: Hearing loss & associated symptoms. Onset, progression, unilateral/ bilateral, use of hearing aids. Noise exposure, medications, infections. QoL impact. Past medical Hx.
Ex: Otoscopy. Medical Ex as required. Procedure: Wax removal; Medication for infections

2.6 Escalation thresholds, QOL meas., decision aids, remote advice
HAC Code of Practice, TTSA guidelines

2.7 Red Flags
Sudden & rapidly progressive hearing loss, neurological signs

3.0 Specialist Assessment
History: Clarification & expansion of primary assessment history, plus psychosocial
Examination: Clinical examination of the ear, nose & throat (when required), neuro-otological , general clinical examination, as required.
Proccedure: Wax Removal

3.6 Escalation thresholds & decision aids
Lack of diagnosis or poor response to earlier interventions

3.7 Red Flags
Intracranial pathology

4.0 Supra Specialist Assessment
History & Examination: Clarification & expansion of specialist assessment
Assessment: requirement for complex investigations pt risk v pt benefit & for otological / neuro-otological / neuro - surgical intervention
Psychosocial history & comorbidities

2.2 First Level AUDIOLOGY Service & Diagnostics

2.2.1 No diagnostic required	2.2.2 Audiological Hx & Ex Ax pts ability to perform diagnostic tests &/ or use hearing aids	2.2.3 Audiological Assessment Pure tone audiometry - air & bone conducted thresholds, Ac & Bc	2.2.4 Tympanometry As per BSA proccedure
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3.2 Diagnostics (Dx)

3.2.2 Audiological Assessment Behavioural & electrophysiological +/- vestibular as required	3.2.3 Imaging MRI CT	3.2.4 Other Diagnostics Patient specific blood tests. Psychosocial Ax
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4.2 Diagnostics (Dx)

4.2.1 Vestibular Tests As clinically indicated	4.2.2 Complex audiological/ behavioural/ electrophysiological tests As clinically indicated	4.2.3 Imaging MRI CT	4.2.4 Dx Specialist For Cochlea implant, BAHA, Auditory processing. Blood tests. Psychsocial
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2.4 Treatments (Tx) Inc Assess & Fit method

2.4.1 Information reassurance Explain symptoms/ tests/ diagnosis, inc advice & support. Sign posting. Comms. packages	2.4.2 Active Monitoring/ Self Help Hearing tactics. Patient choice to delay	2.4.3 Physical Tx (Hearing Aid Package) *Pre-fit advice *Hearing aid fitting *Post-fit advice *Comms strategies	2.4.5 Pre Treatment Ax As Required
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3.4 Definitive Treatments (Tx)

3.4.1 Information reassurance Explain symptoms/ tests/ diagnosis inc advice & support. Sign posting. Comms. packages	3.4.2 Active Monitoring Hearing Tactics	3.4.3 Physical Treatment Hearing aid package, assistive listening devices	3.4.4 Therapies Hearing therapy Psychology CBT Counselling Speech & Language therapy	3.4.5 Preop Assess	3.4.6 Invasive Tx Surgical intervention for otological / middle ear pathologies. Hard/ impacted wax removal
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4.4 Definitive Treatments (Tx)

4.4.1 Information reassurance Explain symptoms/ tests/ diagnosis inc advice & support. Sign posting. Comms. packages	4.4.2 Active Monitoring Condition specific monitoring - Annual MRI for tumours managed conservat - ively	4.4.3 Physical Tx/ Therapies Hearing aids, assistive listening devices, hearing therapy, counselling, psychology, CBT & SLT	4.4.4 Medical Tx Appropriate treatment of specific otological disease	4.4.5 Preop Assess	4.4.6 Surgical Tx Otological & neuro-otological conditions +/- neuro-radiological intervention, +/- radiotherapy
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2.5 Rehabilitation, Repair / Maintenance & Review
* Maintenance and repair where required for patients who have been fitted with a hearing aid, and advice where required
* Review (outcome assessment via telephone/internet where appropriate)

3.5 Rehabilitation, Repair / Maintenance, Review & QOL measurement
- Auditory rehabilitation
- Maintenance & repair in Tier 1
- Review pts in Tier 1 where appropriate

4.5 Rehabilitation, Review & QOL mesurement
- Auditory rehabilitation