

Best Practice Protocol

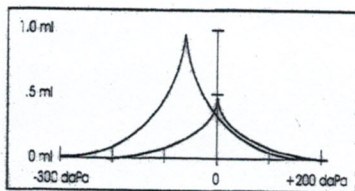
Three Components and the Failure Criteria for Each

- 1) Otoscopic Inspection of Ear Canal*
- 2) Pure Tones: 20dB @ 1000, 2000, and 4000 Hz

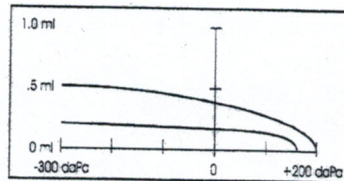
No response to at least one frequency in at least one ear constitutes a **FAIL**
If the student cannot be conditioned to respond to Pure Tones, it is a **FAIL**

3) Tympanometry

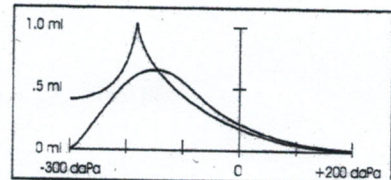
- a) Middle ear pressure > -250 is a **FAIL**
- b) $< .2$ compliance (flat) is a **FAIL**. If compliance is $< .2$ AND there is a peak AND an acoustic reflex is present, it is a **PASS**
- c) Ear Canal Volume (normal range 1st-5th grade: 1.1-2.1) NOTE: The ECV reading is **not** significant in the presence of normal compliance and pressure



Normal



Low Compliance (Flat)



Negative MEP

**A student must PASS all three components
in order to PASS the hearing screening**

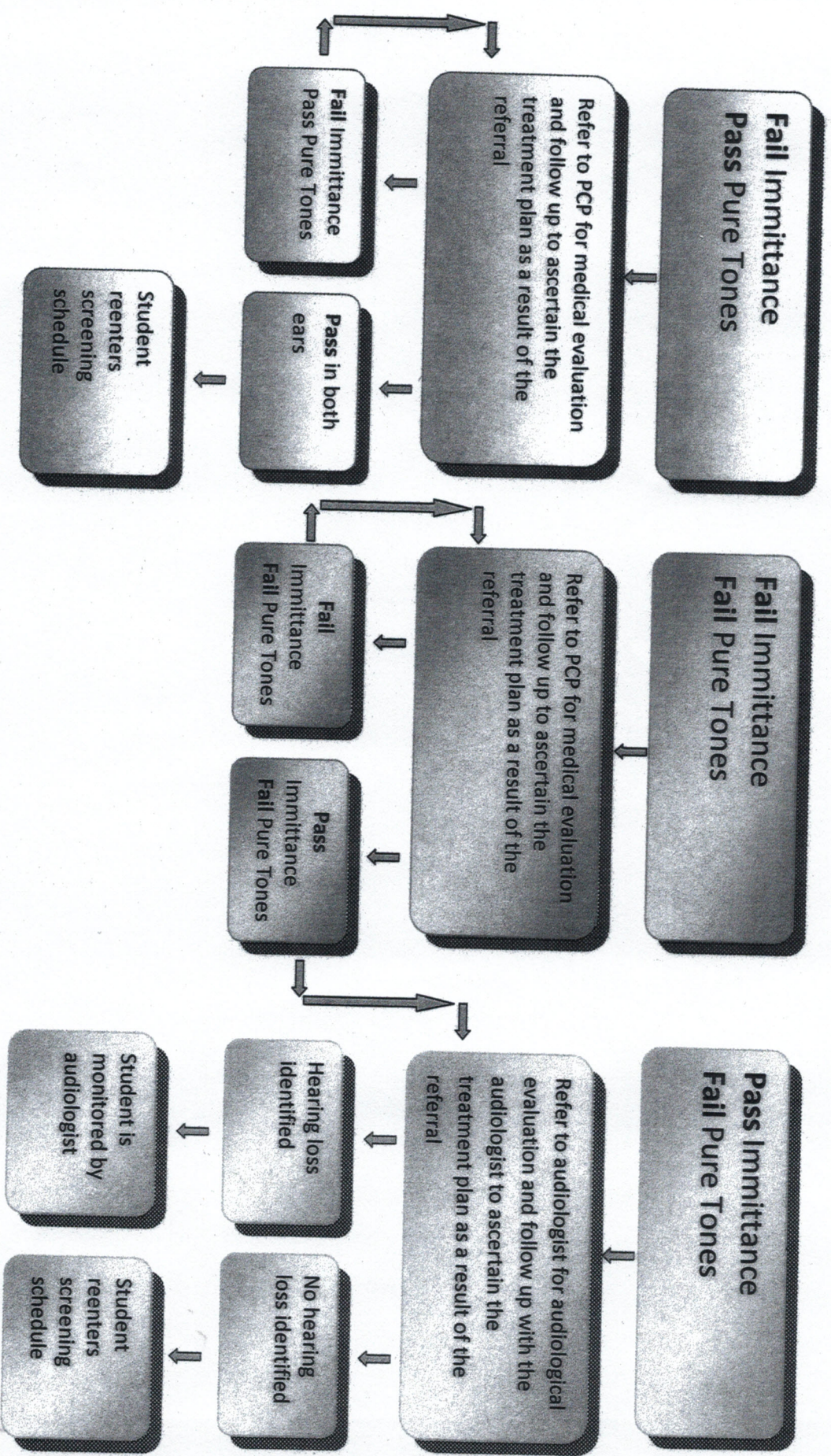
**Any FAIL is rescreened in 4-6 weeks and all three components
are repeated for both ears**

**Students who FAIL any portion of the rescreen are REFERRED
according to the Flow Chart**

**Calibrate hearing screening equipment annually
MSR West (1-800-777-4130)**

*If P.E. tube(s) are noted, proceed with the screening. A large ECV with low compliance suggests the tube is open. This is a **PASS** (for the tympanometry component). If ECV is normal (remember to compare ears) and compliance is low the tube may be out and/or there may be a middle ear problem. With a signed Release to Send Information, forward information to the managing physician. This is a **FAIL**; follow rescreen/referral protocol.

DISPOSITION OF HEARING RESCREENINGS^{1,2}
K-12 Students



Legend: PCP=Primary Care Physician

¹All Students failing any component of the initial screening in one or both ears are rescreened in 4-6 weeks.
²All Students being rescreened receive otoscopic inspection, immittance, and pure tones in both ears