

## Cochlear Implant Candidacy Programming Protocol, Adult Ear & Hearing | Center for Neurosciences

Activation of the Cochlear Implant (CI) is performed by the Audiologist 2-6 weeks following surgery. While we understand all recipients are very anxious to have the CI activated there are a variety of factors to consider when determining the activation date. For example very frail patients, those who underwent a petrosectomy, or very complex ear patients may require a longer healing period after surgery. The Ear & Hearing team will coordinate to determine your specific activation timeframe to maximize your success with the cochlear implant.

### **INITIAL ACTIVATION, DAY 1**

**60 MINS**

*2-6 weeks post-op*

#### **Equipment orientation**

- Sound processors
- Batteries & charging
- Trouble shooting supplies
- Accessories
- Manuals and other documents

#### **MAPPING and Programming**

- Magnet selection
- NRT/tNRI/Telemetry
- Mapping/programming

#### **Counseling**

- Practice attaching batteries and placing sound processor on head
- Consistent daily usage except when sleeping or around water
- CEASE use of contralateral hearing aid for the 1st month to encourage neural plasticity of electric hearing
- Importance of aural rehabilitation; provide handout with resources

### **INITIAL ACTIVATION, DAY 2**

**60 MINS**

*5-14 days following Day 1*

#### **Residual hearing evaluation**

- Tympanometry
- Unaided thresholds for pure tone air and bone conduction per Minimum Reporting Standards

#### **CI-aided thresholds**

- Determine hearing sensitivity through CI sound processor in sound-field

***INITIAL ACTIVATION, DAY 2, continued***

**MAPPING and Programming**

- Magnet check
- Activation of acoustic component if thresholds <85 dB HL, 125-2000 Hz
- Mapping/programming/data logging
- Obtain ear mold impression for future fitting if candidate for acoustic component

**Counseling**

- Consistent daily usage except when sleeping or around water
- CEASE use of contralateral hearing aid for the 1st month to encourage neural plasticity of electric hearing
- Importance of aural rehabilitation; provide handout with resources if needed

**1-MONTH FOLLOW-UP**

**60 MINS**

*1-month following Day 1 of activation*

**Residual hearing evaluation**

- Tympanometry
- Unaided thresholds for pure tone air and bone conduction per Minimum Reporting Standards

**CI-aided thresholds**

- Determine hearing sensitivity through CI sound processor in sound-field

**MAPPING and Programming**

- Magnet check
- Activation of acoustic component if thresholds <85 dB HL, 125-2000 Hz
- Mapping/programming/data logging
- Obtain ear mold impression for future fitting if candidate for acoustic component

**Counseling**

- Consistent daily usage except when sleeping or around water
- RESUME use of contralateral hearing aid for daily listening
- Importance of CI-only aural rehabilitation; provide resources handout if needed

### 3-MONTH FOLLOW-UP

90 MINS

*3-months following Day 1 of activation*

#### **Residual hearing evaluation**

Tympanometry

Unaided thresholds for pure tone air and bone conduction per Minimum Reporting Standards

#### **CI-aided thresholds**

Determine hearing sensitivity through CI sound processor

#### **Evaluation of Aural Rehabilitation Status in the BEST AIDED CONDITION**

Verification of hearing aid output via Real-Ear-Measures using evidence-based prescriptive targets. Testing performed in the sound field at 60 dBA at 0 degree azimuth for both speech & noise via recorded materials unless otherwise indicated.

Test Battery based on Minimum Reporting Standards:

AzBio, Quiet, Newly implanted ear only

CNC, words/phonemes, Quiet, Newly implanted ear only

*\*Minimum Reporting Standards include individual ear and binaurally aided testing in both Quiet and Noise conditions. The Ear & Hearing Clinic has elected to evaluate ONLY the implanted ear in the Quiet condition during the 3-month appointment.*

#### **MAPPING and Programming**

Magnet check

Activation of acoustic component if thresholds <85 dB HL, 125-2000 Hz

Mapping/programming/data logging

Obtain ear mold impression for future fitting if candidate for acoustic component

#### **Counseling**

Consistent daily usage except when sleeping or around water

Continue use of contralateral hearing aid during daily listening

Importance of CI-only aural rehabilitation; provide resources handout if needed

## 6-MONTH FOLLOW-UP

90 MINS

*6-months following Day 1 of activation*

### Residual hearing evaluation

Tympanometry

Unaided thresholds for pure tone air and bone conduction per Minimum Reporting Standards

### CI-aided thresholds

Determine hearing sensitivity through CI sound processor in sound-field

### Evaluation of Aural Rehabilitation Status in the BEST AIDED CONDITION

Verification of hearing aid output via Real-Ear-Measures using evidence-based prescriptive targets. Testing performed in the sound field at 60 dBA at 0 degree azimuth for both speech & noise via recorded materials unless otherwise indicated.

Test Battery based on Minimum Reporting Standards:

AzBio, +5 SNR

Right hearing device

Left hearing device

Binaurally aided

AzBio, Quiet

Right hearing device

Left hearing device

Binaurally aided

CNC, words/phonemes, Quiet

Right hearing device

Left hearing device

Binaurally aided

### MAPPING and Programming

Magnet check

Activation of acoustic component if thresholds <85 dB HL, 125-2000 Hz

Mapping/programming/data logging

Obtain ear mold impression for future fitting if candidate for acoustic component

### Counseling

Consistent daily usage except when sleeping or around water

Continue use of contralateral hearing aid during daily listening

Importance of CI-only aural rehabilitation; provide resources handout if needed

## 12-MONTH FOLLOW-UP

90 MINS

*12-months following Day 1 of activation*

### Residual hearing evaluation

Tympanometry

Unaided thresholds for pure tone air and bone conduction per Minimum Reporting Standards

### CI-aided thresholds

Determine hearing sensitivity through CI sound processor in sound-field

### Evaluation of Aural Rehabilitation Status in the BEST AIDED CONDITION

Verification of hearing aid output via Real-Ear-Measures using evidence-based prescriptive targets. Testing performed in the sound field at 60 dBA at 0 degree azimuth for both speech & noise via recorded materials unless otherwise indicated.

Test Battery based on Minimum Reporting Standards:

AzBio, +5 SNR

Right hearing device

Left hearing device

Binaurally aided

AzBio, Quiet

Right hearing device

Left hearing device

Binaurally aided

CNC, words/phonemes, Quiet

Right hearing device

Left hearing device

Binaurally aided

### MAPPING and Programming

Magnet check

Activation of acoustic component if thresholds <85 dB HL, 125-2000 Hz

Mapping/programming/data logging

Obtain ear mold impression for future fitting if candidate for acoustic component

### Counseling

Consistent daily usage except when sleeping or around water

Continue use of contralateral hearing aid during daily listening

Importance of CI-only aural rehabilitation; provide resources handout if needed

## ANNUAL APPOINTMENTS FOR ADULTS

90 MINS

### Residual hearing evaluation

Tympanometry

Unaided thresholds for pure tone air and bone conduction per Minimum Reporting Standards

### CI-aided thresholds

Determine hearing sensitivity through CI sound processor in sound-field

### Evaluation of Aural Rehabilitation Status in the BEST AIDED CONDITION

Verification of hearing aid output via Real-Ear-Measures using evidence-based prescriptive targets. Testing performed in the sound field at 60 dBA at 0 degree azimuth for both speech & noise via recorded materials unless otherwise indicated.

Test Battery based on Minimum Reporting Standards:

AzBio, +5 SNR

Right hearing device

Left hearing device

Binaurally aided

AzBio, Quiet

Right hearing device

Left hearing device

Binaurally aided

CNC, words/phonemes, Quiet

Right hearing device

Left hearing device

Binaurally aided

### MAPPING and Programming

Magnet check

Activation of acoustic component if thresholds <85 dB HL, 125-2000 Hz

Mapping/programming/data logging

Obtain ear mold impression for future fitting if candidate for acoustic component

### Counseling

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## Minimum Reporting Standards Cochlear Implant Adult Ear & Hearing | Center for Neurosciences

Minimum reporting standards for adult cochlear implantation has been endorsed by the Implantable Hearing Devices Committee and the Hearing Committee of the American Academy of Otolaryngology-Head and Neck Surgery. Reporting of the minimal data set is intended to facilitate inter-study comparability and consistency or reporting of adult cochlear implant outcome data.

### MINIMUM REPORTING STANDARDS, AUDIOLOGIC

- I. **Reporting Time Frames:**
  - Pre-operative
  - 2-4 weeks post-operative
  - 3-months (\*at CNS we have elected to test the CI ear only at this time frame)
  - 6- months
  - 12-months
  
- II. **Air Conduction Thresholds:**
  - 125, 250, 500, 1000, 1500, 2000, 4000, 8000 Hz
  - Threshold listed as 120 dB if No Response is obtained
  
- III. **Bone Conduction Thresholds**
  - 250, 500, 1000, 1500, 2000, 4000 Hz
  - \*Criteria for Functional Hearing Threshold: < 80 dBHL for 125, 250, 500 Hz
  
- IV. **Minimum Speech Test Battery with presentation at 0-degree Azimuth**
  - a. *Test Conditions:*
    - Left ear
    - Right ear
    - Binaural
  - b. *Test Battery:*
    - CNC in quiet
    - AzBio or BKB-Sin, Quiet
    - AzBio or BKB-Sin, +5 Noise (speech and noise co-located at 0-degree azimuth)
  
- V. **Daily Listening Condition**
  - No amplification
  - Conventional hearing aid
  - CI only
  - CI + hearing aid

Thank you for choosing Ear and Hearing | Center for Neurosciences.