

Name: Mr. James Smith
Age: 38
Gender: Male
Clinician:
Date tested: 3/26/08

Case History

Mr. James Smith's chief complaint today is that he is having trouble hearing in noisy situations, and has a constant tinnitus. The patient has the most difficulty working at an automobile manufacturing plant communicating with his supervisor. The hearing loss has been progressing for a couple years, but the onset is unknown, and Mr. Smith does not believe he was experiencing any difficulty a few years ago. Mr. Smith has a history of earaches as a child but never saw a physician, and had any medical or surgical treatments performed. Mr. Smith has no other physical symptoms or diseases at this time. The only medication that Mr. Smith takes is Aspirin for headaches, but remarked that he does so "infrequently". The tinnitus that Mr. Smith complains of is constant, and bothers him most at night, or when it is quiet. He was unsure if the tinnitus was in both ears or if he heard it "in his head". The patient has no symptoms of vertigo. He has worked at an automobile manufacturing plant for 14 years where he is exposed to machinery noise such as metal presses. The noise was described as constant bursts of metal banging and scraping. Mr. Smith currently wears no ear protection at his job. Mr. Smith's father also had a hearing loss but the cause is unknown. The patient currently does not wear hearing aids.

the difficulty is in the communicate, not the work situation.

mobile manufacturing plant where he works.

although it has been available to him

I added this b/c it is probably important that he has chosen not to wear it.

this is different than not having been provided w/ ear prot.

OAEs not really necessary for this case.

Results

Otososcopic examination was unremarkable with no indication of any medical symptoms. Results of OAE testing indicate absent emissions at mid to high frequencies bilaterally. Results of the pure tone audiogram indicate that the right ear is hearing within normal limits sloping to a mild sensory neural hearing loss with a notch at 4000 Hz. The left ear is hearing within normal limits sloping to a moderate sensory neural hearing loss also with a notch at 4000 Hz. Speech audiometry results were recorded at 40 dB re: SRT with results of 92% in the right ear and 96% in the left ear. Rollover indexes tested at 70 dB re: SRT were 0 bilaterally. Acoustic reflexes were present in the normal range at all frequencies tested with reduced sensation levels re: pure tone audiogram bilaterally. Reflex decay was negative bilaterally.

tympanometry results?

Recommendations

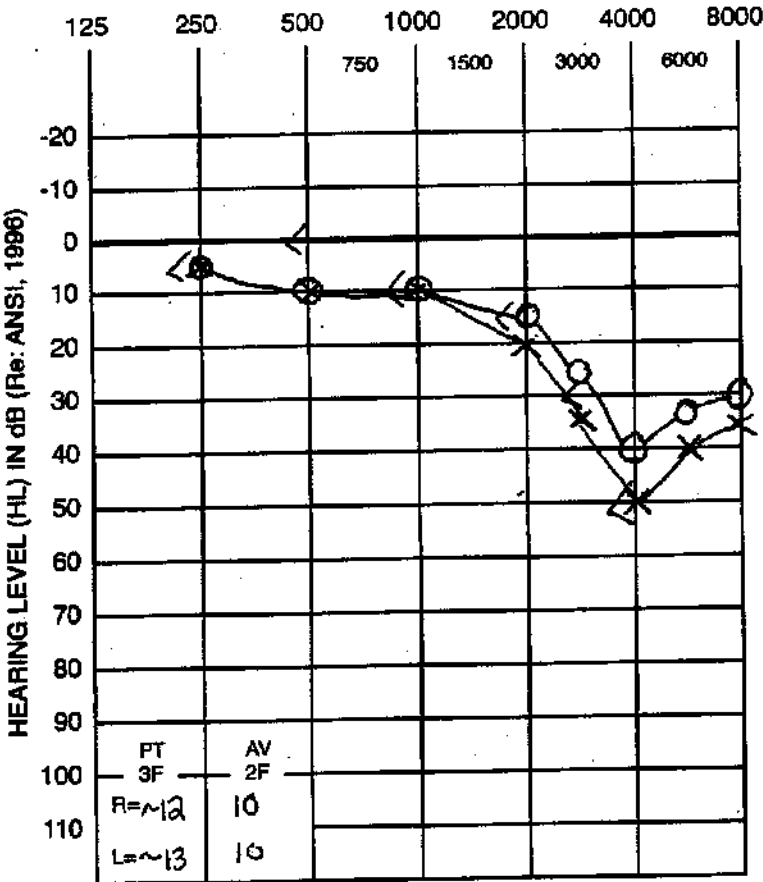
Case history and tests performed today indicate Mr. Smith has a noise induced hearing loss bilaterally. The patient was counseled on noise exposure and the importance of hearing protection in his work environment and other places where he may be exposed to loud noises. He was also made aware of his risk for progression beyond the loss that he has sustained. The patient understands that he is a hearing aid candidate who may benefit from amplification outside of work. Mr. Smith was strongly encouraged to try custom ear plugs from our clinic if he was unwilling to wear those which were company issued, but realizes that hearing his supervisor at work may still be problematic. The patient was made aware of the benefits of hearing aids to mask tinnitus and was told that white noise or a fan turned on at night may decrease this problem he experiences when

are consistent with

V. need recs!

only conduct ABEL typically considered in the case of these were also present normal HLs

FREQUENCY IN HERTZ (Hz)



Earphone: insert
 supraural

Legend:

	RE	LE	No Response (Examples)
AIR CONDUCTION			
Unmasked	○	×	×
Masked	△	□	○
BONE CONDUCTION			
Unmasked	<	>	×
Masked	[]	↓

Subject ID: Mr. James Smith

DOB: 1/8/70 Age: 38

Tester: [Signature] Date: 3/26/08
of test

SPEECH AUDIOMETRY

	SRT/SDT	%	SPEECH RECOGNITION		Test
			HL	S/N	
R	8	92	50		NU-6
● R		92	80		NU-6
L	10	96	50		NU-6
● L		96	80		NU-6

IMMITTANCE MEASUREMENTS

REFLEX DECAY			TYMPANOMETRY	
FREQUENCY			R	L
	500	1000	2000	
RE	70s	70s		Ear Canal Vol. 1.36 1.36
LE	710s	710s		Pressure Peak (daPa) -4 -4
				Compliance (ml) .67 .67

ACOUSTIC REFLEX THRESHOLDS

STIM EAR	PROBE EAR	FREQUENCY					WBN
		250	500	1000	2000	4000	
R	R		90	90	95		
L	R		85	90	90		
L	L		85	90	90		
R	L		85	85	85		

AUDIOLOGICAL SUMMARY AND RECOMMENDATIONS

[Empty box for summary and recommendations]

#18

total = $\frac{28}{30} = 93\%$

#2

Clinical Case Grading Rubric
Written Report & Audiogram

Points	Writing Style	Completeness Of Case History	Description of Test Results			Appropriate Selection Of Tests	Recommendations	
			Completeness	Clarity	Accuracy		Clarity	Appropriateness
0	Very difficult to read. Writing is unclear. Contains numerous grammatical/spelling errors.	No case history information or only demographic information provided.	No description of results provided.	Description is unclear.	All descriptions provided are incorrect.	Missing the majority of appropriate tests or simply includes results for all available tests without regard to appropriateness for this case.	Recommendations are unclear.	No recommendations made or recommendations are all inappropriate for this case.
1	Difficult to read. Writing is somewhat unclear. Contains several grammatical/spelling errors.	Minimal case history information provided. Missing important pieces relevant to case.	Description of some results provided, but others are omitted. <i>x times not done 1.5</i>	Description is moderately clear.	The descriptions contain a mix of accurate and inaccurate information.	Missing 1-2 important tests and/or included information for 1-2 inappropriate tests. The tests chosen are broadly appropriate.	Recommendations moderately clear.	Recommendations contain a mix of appropriate and inappropriate recommendations and/or 1-2 key recommendations are omitted.
2	Moderately easy to read. Writing is clear. Few grammatical/spelling errors.	Case history information is mostly complete, only less important information has been omitted. <i>NS</i>	Description of all relevant test results provided.	Description is clear and easy to understand. ✓	The descriptions are mostly accurate with only 1 or 2 errors. <i>WDA</i>	No more than one error of omission or inclusion of appropriate tests. Test choice is accurate with one exception. <i>(OAE)</i>	Recommendations very clear. ✓	Recommendations are appropriate and comprehensive. ✓
3	Easy to read. Writing is very clear. <i>2</i> grammatical/spelling errors. ✓	Case history information is complete.			The descriptions are accurate. ✓	All necessary tests included and no unnecessary tests included.		

3 2.5 1.5 2 3 2 2 2