Boothless technologies create new opportunities for hearing assessment and conservation *Testing Hearing Outside Constraints of Traditional Sound Booths*

https://health.mil/News/Articles/2021/07/08/Mobile-hearing-test-system-enables-quicker-diagnosis-treatment



Jesse Norris, PhD inorris@edareinc.com

2021 November

Disclaimer

The wireless automated hearing test system (WAHTS) development has been supported by funding from:

- National Institute on Deafness and Other Communication Disorders (R44DC017930)
- National Institute for Occupational Safety and Health (R44OH011714)
- Department of the Army (W81XWH14C1409)

The content presented is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health nor of the Department of Defense.

I work for the company that developed the WAHTS, and the views expressed in this presentation are my own.

SBIR Data Rights Contract No: W81XWH14C1409 Contractor Name: Creare LLC Contractor Address: 16 Great Hollow Road, Hanover NH 03741 Expiration of SBIR Data Right Period: December 25, 2024

The Government's rights to use, modify, reproduce, release, perform, display, or disclose technical data or computer software marked with this legend are restricted during the periods shown as provided in paragraph (b)(4) of the Rights in Noncommercial Technical Data and Computer Software -- Small Business Innovation Research (SBIR) Program clause contained in the above identified contract.

Any reproduction of technical data, computer software, or portions thereof marked with this legend must also reproduce the markings.



Outline

- 1. Hearing Conservation
- 2. Regulations
- 3. Traditional Technologies
- 4. Boothless Audiometry
- 5. Opportunities
- 6. Conclusion



Objective of Hearing Conservation

Prevent the occurrence and reduce the progression of occupational noise-induced hearing loss

Basic program components*:

- noise exposure monitoring
- engineering and administrative controls (e.g., reducing the noise at the source, limiting exposure to hazardous noise)
- audiometric evaluations
- use and fit of hearing protection devices
- education and motivation
- record keeping
- program evaluation and audit



Objective of Hearing Conservation

Prevent the occurrence and reduce the progression of occupational noise-induced hearing loss

Basic program components^{*}:

- noise exposure monitoring
- engineering and administrative controls (e.g., reducing the noise at the source, limiting exposure to hazardous noise)
- audiometric evaluations
- use and fit of hearing protection devices
- education and motivation
- record keeping
- program evaluation and audit



Terminology

Hearing Screening

Quickly identify potential hearing loss

- "Pass" or "Refer" result for more hearing testing or medical care
- Screening protocols dependent on the purpose of the screening

Occupational Hearing Test*

Determine sensitivity of a listener's hearing in each ear

- Identifies hearing thresholds which are the "softest" a person can hear 50% of the time at each test frequency
- Results presented as an audiogram



• Typically tests fewer frequencies than a diagnostic clinical test

Hearing Protector Fit Test

Measure the attenuation an individual achieves

- Results in "Personal Attenuation Rating" (PAR)
- Fit testing has been shown to improve individuals' ability to properly train, fit and wear hearing protectors



*Also referred to as "audiometric monitoring" Ideally, monitoring identifies noise induced hearing loss (NIHL) early

Occupational Hearing Services

For:		Administered by:		
Hearing Screening	DOT truck/bus drivers and pilotsWhisper Test is pass/referThreshold acceptance criteria	• Anyone		
Pure-Tone Threshold Testing	Monitoring hearing thresholds of workers exposed to noise	 Certified or Trained Technician[*] Audiologist 		
Hearing Protector Fit Testing	Verifying hearing protectors provide adequate protection ⁺	• Anyone		
Diagnostic Audiometry (Air, Bone, Speech Testing)	 Investigation of possible work- related hearing loss Worker's compensation claim evaluations 	• Audiologist		



1

*Supervised by licensed audiologist or physician ⁺Can also check for over protection

What Happens to the Tests

Results Aggregated

1

In software

Audiograms Reviewed

2

By audiologist or physician

- Flag invalid test (e.g. noiseexposed just before a baseline exam) and schedule retest
- Identify Standard Threshold Shift (STS) and schedule a retest within 30-days
- Confirm STS and determine if work related and potential need to report hearing loss to regulatory agency

Diagnostic Test (air, bone, speech)

3

Results combined with other information(e.g., noise exposure history, work history, hearing protector use fitting and use history) to determine if the hearing loss is workrelated and requires recording/reporting on the illness/injury forms

4 If Hearing Loss Identified as

Work-Related

 Employee has an option of filing a separate worker's compensation claim, or some companies automatically send them for that investigation



Be aware, this is overly simplified!



Federal agencies have requirements and guidelines regarding hearing conservation programs and fitness for duty



OSHA 1910.95: Noise Regulation for General Industry^{*}

OSHA 1904.10: Recording Criteria for Occupational Hearing Loss Cases



DOT: FCMSA, FAA, FRA: Each have their own requirements



NIOSH publishes recommended exposure limit (REL) and guidelines for preventing hearing loss



MSHA 30 CFR Part 62: Noise Enforcement Policy



DOD 6055.12: Hearing Conservation Program

Additionally, there are 22 OSHA-approved state plans covering private, state and local workers, and 6 plans covering state and local workers

*Exempts agriculture and oil & gas industries, and construction is covered under a noise exposure standard but has yet to provide a hearing conservation rule: 29 CFR 1926.52



Training & Professional Organizations



- Trained Audiometric Technician
- Course Director
- Professional Supervisor



2



Licensed Audiologist

- M.S., M.A., Au.D., Ed.D. Sc.D., Ph.D.,
- Certified by the American Board of Audiology or the American Speech-Language Hearing Association
- Both typically require passing the national praxis exam



• Multidisciplinary Organization focused on Hearing Conservation

Traditional Booth Setup



Sound booth to block background sound





Audiologist with audiometer and computer interface

Patient inside sound booth with wired connection from headset to audiometer

Traditional Test Locations



Fixed installation of sound booths



Mobile sound booths

Traditional Test Equipment

Sound booths



Boothless Audiometry

- Innovation driven by:
 - Mobile devices: portability and connectivity^{*}
 - COVID-19: forced many booths to either halt or operate at significantly reduced capacity
- Many products are simply taking equipment used in the booth outside the booth and monitoring the background (ambient) noise

^{*}Even if internet not required for operation, devices and software have made it easier to transfer results once connection becomes available again

Constraints

- Measuring accurate hearing thresholds require the listener's attention and focus
- Background noise poses two problems:
 - 1. Limits the ability to test quiet stimuli, and
 - 2. Distracts listener

4

Background (or Ambient) Noise

- Measured with a sound level meter (SLM)
 SLMs meet different accuracy requirements indicated by "Class" (or "Type")*
- Important to verify levels are sufficiently quiet to meet applicable standard

	Octave bands (Hz)						
Criteria (dB SPL)	125	250	500	1000	2000	4000	8000
ANSI S3.1–1960	_	_	40	40	47	57	67
ANSI S3.1–1999 (R2018)	49	35	21	26	34	37	37
ISO 8253: 2010	47	33	18	20	27	34	33
OSHA (1983)	_	_	40	40	47	57	62
NHCA (1994)	_	_	24.5	26.5	28	34.5	43.5



• Many boothless systems integrate with sound level meters to monitor ambient noise levels

4

Background Noise in Practice



Green Room



Mobile Trailer



Meinke, et al. 2017

Background Noise in Practice



Green Room



Mobile Trailer



Meinke, et al. 2017



Background Noise Summary



*Note that OSHA currently does not recognize the attenuation provided by the transducers

Commercially Available Systems





4





Refer to: Gates, Kathy, Quintin A. Hecht, Marjorie AM Grantham, Andrew J. Fallon, and Malisha Martukovich. "Hearing Health Care Delivery Outside the Booth." Perspectives of the ASHA Special Interest Groups (2021): 1-14.

20

Wireless Automated Hearing Test System

What's a WAHTS?

Wireless audiometric headphones with embedded computing

- Calibration independent of mobile device
- Attenuation on par with single wall sound booth
- Intuitive headband
- No cables!







Opportunities to Verify Earplug Fit



3M E-A-Rfit

Fit-check Solo

Benson CCF-200

Edare WAHTS

Fit testing improves individual's ability to properly insert their hearing protectors and is an opportunity to train what a proper fit "feels like."

Federman, et al. 2021

"Individual fit-testing is recommended as best practice when possible"

DODI 6055.12, 2019

Opportunities with Teleaudiology



Connect licensed audiologists and physicians to conduct diagnostic tests, review results, and consult with remote patients



Opportunities in Treatment



Boothless audiometry can bring testing closer to injury enabling diagnosis and intervention

Lee, et al. 2021 The 'Downrange Acoustic Toolbox': An Active Solution for Acute Acoustic Trauma https://health.mil/News/Articles/2021/07/08/Mobile-hearing-test-system-enables-quicker-diagnosis-treatment



Conclusions

- Occupational hearing conservation programs aim to protect individuals who are exposed to hazardous noise from developing noiseinduced hearing loss and tinnitus
- New technologies for "boothless audiometry" and "fit testing" present opportunities to change how we test, educate, and help individuals <u>protect their hearing</u>



6

References

- American National Standards Institute (ANSI). ANSI Technical Report, Evaluating the Effectiveness of Hearing Conservation Programs through Audiometric Data Base Analysis. ANSI S12.13 TR- 2002 (R-2011).
- Brungart, Douglas, Jaclyn Schurman, Dawn Konrad-Martin, Kelly Watts, Jay Buckey, Odile Clavier, Peter G. Jacobs, Samuel Gordon, and Marilyn F. Dille. "Using tablet-based technology to deliver time-efficient ototoxicity monitoring." International journal of audiology 57, no. sup4 (2018): S78-S86.
- Byrne, David C., William J. Murphy, Edward F. Krieg, Robert M. Ghent, Kevin L. Michael, Earl W. Stefanson, and William A. Ahroon. "Inter-laboratory comparison of three earplug fit-test systems." Journal of occupational and environmental hygiene 14, no. 4 (2017): 294-305.
- Federman, Jeremy, Stephanie J. Karch, and Christon Duhon. "How hearing conservation training format impacts personal attenuation ratings in US Marine Corps Training Recruits." International Journal of Audiology 60, no. 2 (2021): 151-159.
- Gates, Kathy, Quintin A. Hecht, Marjorie AM Grantham, Andrew J. Fallon, and Malisha Martukovich. "Hearing Health Care Delivery Outside the Booth." *Perspectives of the ASHA Special Interest Groups* (2021): 1-14.
- Kulinski, Devon, Matthew J. Makashay, Coral Dirks, Benjamin Sheffield, and Douglas S. Brungart. "Development of a tabletbased fit test system for military and austere environments." The Journal of the Acoustical Society of America 148, no. 4 (2020): 2805-2805.
- Lee, Jonathan Daw Ern, Douglas M. Bowley, J. A. Miles, J. Muzaffar, R. Poole, and Linda E. Orr. "The Downrange Acoustic Toolbox: An Active Solution for Combat-Related Acute Acoustic Trauma." Journal of Special Operations Medicine: a Peer Reviewed Journal for SOF Medical Professionals 20, no. 4 (2020): 104-111.
- Meinke, Deanna K., Jesse A. Norris, Brendan P. Flynn, and Odile H. Clavier. "Going wireless and booth-less for hearing testing in industry." International journal of audiology 56, no. sup1 (2017): 41-51.
- Murphy, William J., Mark R. Stephenson, David C. Byrne, Brad Witt, and Jesse Duran. "Effects of training on hearing protector attenuation." Noise and Health 13, no. 51 (2011): 132.
- Tufts, Jennifer B., Kelly N. Jahn, and JohNP. ByrAM. "Consistency of attenuation across multiple fittings of custom and noncustom earplugs." Annals of occupational hygiene 57, no. 5 (2013): 571-580.

