

AS AUDIO VISUAL SCRIPT -
COUNSELLING FOR THE HEARING IMPAIRED

Reg No M 9314

An Independent Project submitted as part fulfillment of the
First Year M.Sc (Speech and Hearing) to the
University of Mysore.

All India Institute of Speech and Hearing
MYSORE - 570006
May 1994

DEDICATED TO

- The two most beautiful people in my life -
Mummy and Papa

- My cute and adorable sisters -
Richa and Mona

- The people who make me smile -
Mukul, Niel, Sumit, Sumeet
Princess Ann
Ever helpful Mona
My nutty buddy Jyoths

CERTIFICATE

This is to certify that the Project entitled:

" AN AUDIO VISUAL SCRIPT -
COUNSELLING FOR HEARING IMPAIRED "

*Is a bonafied work done in part fulfillment for the. First Year Degree
of Master of Science (Speech and Hearing) of the student with*

Reg. No. M.9314.

Mysore,
May 1994.

Dr.(Miss)S.Nikam
Director
All India Institute
of Speech and Hearing .
MYSORE .

CERTIFICATE

This is to certify that the Prefect entitled .

**" AN AUDIO VISUAL SCRIPT -
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has teen prepared under &y supervsion and guidance

Mysore. ,


Dr. (Miss) S. N. Kam

May1994

GUIDE

DECLARATION

I hereby declare that this Independent Project entitled,

**" AN AUDIO VISUAL SCRIPT -
COUNSELLING FOR THE HEARING IMPAIRED. "**

is the result of my own work under the guidance of
Dr.(Miss) S. Nikam, Professor and Head of the Department
of Audiology, All India Institute of Speech and Hearing, Mysore, has
not been submitted earlier at any University for any other
Diploma or Degree.

MYSORE,
MAY 1994

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INTRODUCTION

Counselling forms an important part in the total rehabilitation program of an individual. We are counselling when we motivate our customers to choose an action that will improve their communication abilities and overcome the problems faced by them on account of sensory deficiencies

An audiologist interacts with different groups of people, each having specific problems based upon their age, sex, occupation, living standards, personality. For example, a spouse of a hard of hearing needs to be counselled regarding the type and degree of hearing loss and its effects. Information regarding educational placement, vocational training and various schemes run by the government form an integral part of the counselling.

"Is he deaf? What percentage of hearing loss does he have? Will he talk? Can he go to regular school? Why me? Why my child? What caused this problem? These are questions posed by parents of the young children. Parental counselling for a child with a hearing loss involves informing parents about hearing loss, the need for hearing aids, the use of hearing aids, regular check up and language development. Emotional support and personal adjustment information is also an

important aspect of effective communication between the parents and the professionals.

Another population that is in need of counselling is the old and the aged and their family members. The atrophic effects associated with aging, present a diffuse distribution (Gloring and Gilad-1979). The inability to hear and understand what others are saying can be the final blow towards the finality of aging. (Gilad and Gloring 1979). The older adult having hearing loss has many associated problems such as finding it difficult to get adjusted in the society, acceptance of the problem, communication gap between him and the society. Inability of his relatives and friends to adjust to the problem.

This group's success with amplifications can be hindered by such complicating variables as reduced mental agility. motivation. physical well being and flexibility. These factors can create problems in adjusting to amplification that require extensive management.

An audiologist can provide guidelines that will help to ensure optimum success for hearing aid wearers and overall well being. It is a rare hearing aid user who can put on a new instrument and use it optimally without rather extensive counselling and orientation. This involves much more than

simply showing the individual where the controls are and how to put the aid on and take it off: it includes discussion of the proper manner in which to adjust to the new and often abrasive sound of the aid, and to identify and remedy the tangential psychological aspects of hearing loss.

Counselling is a process of helping a client make a decision in such a way as to maximize the probability that his/her future development will be both satisfactory and usefull. (Tyler-1969)

Counselling can be delineated into two areas: 'informational' and 'personal adjustment counselling' (Flahive and white, 1981). Informational counselling is an activity "during which the audiologist provides the client or parents with an understanding of the hearing impairment, its consequences and the role of the hearing aid". The latter is where the audiologist assists the client or parent in finding a solution to her/his or their problems.

THE AUDIOLOGIST HOLE

Counselling is as much of a component in the provision of audiological services as is hearing assessment, hearing aids and evoked potential testing. We as audiologists do not interact solely as information givers, we also have a professional, ethical and financial stake to influence the clients to accept the course of action best suited to them.

Audiologist plays an important role in the successful rehabilitation of a hearing impaired person, starting from the hearing assessment, diagnosis of the problem and ending with a satisfactory counselling session. This counselling procedure includes:

1. Description of the person's audiological findings.
2. Discussing the handicapping aspects of hearing loss.
3. Describing the benefits and limitations of aids.
4. Analyzing total communication needs.
5. Finding solutions for communicating problems.
6. Explaining the means and ways of getting financial aid.
7. Informing the significant others in the geriatrics family regarding how best they can aid him to improve his discriminatory abilities.

VISUAL

TITLE (ON YOUR CHART)

A group of children talking to each other. Another group where all people are conversing.

A deaf child not responding to other children

A person is wearing spectacles to read a book.

Focus shifts to a child watching T.V. He is wearing spectacles.

A teacher talks to a child, who is wearing a hearing aid.

An old man puts on a Behind-The-Ear aid to listen to a transistor.

AUDIO

IT IS IN YOUR HANDS !!

Hearing is vital to every human being. Hearing is very important in understanding others ideas and in expressing one's own views.

Hearing impairment leaves a person very lonely in a world of his own. His inability to hear is the flaw which sets him apart from other normal children.

Every disability can be prevented from being a handicap. Management methods have been developed for every kind of disability.

Example, spectacles have been the major line of management in case of visual impairment.

Similarly in case of hearing impairment the major advancement in management has been in developing listening devices namely, "HEARING AIDS.

Management varies with age, type and degree of hearing impairment.

Focus on different types of hearing aids. (Body level, Behind the ear & spectacle type.

Just as in case of the selection of appropriate spectacles, the selection of a hearing aid involves a systematic procedure.

A client is guided from audiometric room to HAT room (panel shifts to HAT)

A client finishes his/her hearing evaluation and is then guided to Hearing Aid Trial or HAT room for hearing aid evaluation.

A small clip of hearing aid evaluation.

A battery of tests and evaluations are done. The best available hearing aid is prescribed to the person.

"WAIT! This is not the end of the story, but the beginning."

written caption

audio statement

A child is sitting in mother's lap and grandfather is also sitting beside holding a hearing aid.

This is a hearing aid. It will help to hear sounds by making them louder. Therefore it is recommended for the use of people with hearing loss.

Focus on a hearing aid and its accessories. Hearing aid is focussed from all the direction to show its parts.

For effective usage of your aid for longer periods of time, it is important to know the various parts and the basis of hearing aid operation. Now let's shift our focus from hearing aid in general to specific parts of an aid.

Focus-seperately on a microphone, battery, volume control and a receiver.

These are a few parts of a hearing aid, microphone battery, volume control and receiver.

Focus shifts to other parts kept at the side-cord, on-off switch, tone control and telecoil, Earmold is also focussed.

The other parts of a hearing aid are cord, on-off switch, tone control and telecoil. This is an earmould.

An audiologist is sitting with a hearing aid and its components. In front the mother is sitting with her child. Grandfather is sitting beside them.

Let me tell you about the component details of a hearing aid.

Audiologist points to the microphone in the aid.

This is a microphone. It is an important and very delicate part of the hearing aid. This is the part which picks up the sound.

Audiologist puts the aid in child's pocket.

Microphone, which as you can see is the grid area on the aid which should not be covered by cloth. Otherwise there will be obstruction in the passage of sound.

Focus shifts to mother.

Question by mother, 'are there any other precautions which we should keep in mind ?'

Mother puts on a body level hearing aid on her child. Hearing aid is put in a hearing aid harness.

Body level hearing aids are worn on the body in a special harness or is clipped to the clothing. A wire(cord) runs from the aid to the receiver at the ear.

Grandfather puts on a Behind-The-Ear aid.

Ear level hearing aids rest behind the ear, with a plastic tube instead of a cord.

Audiologist shows a body level and Behind The Ear aid to the mother and to the grandfather.

These two are the major types of hearing aids, body level hearing aid and ear level hearing aid or called as Behind The Ear aid.

HOW SOUND TRAVELS ?

VISUAL CAPTION

QUESTION ASKED BY THE SPEAKER ?

ON A CHART

Sound travels through different parts of hearing aid to the user's ear. The sound waves reaching the microphone are converted into electrical signal which is amplified. This electric signal is again converted into sound signal at the ear level by the receiver.

SHIFT THE FOCUS TO THE CHART.

RECEIVER- A hearing aid receiver is a delicate part of the hearing aid system. It is a small speaker which connects the loud electrical signal to the sound signal and feeds this sound to the ear.

Audiologist shows the receivers recommended for the child and the old man.

Each hearing aid model has a particular receiver that goes with it. That matching receiver only must be used for best results.

Audiologist shows - a bone conduction type receiver.

It is important to* know the receiver type recommended. This is a bone conduction type receiver.

Points to the air conduction receiver of the young child.

This is an air-conduction receiver

Audiologist shows a number written on the air conduction receiver.

Secondly, on your receiver there is a specific number written. You should know the type and number of your receiver so that at the time of replacing the damaged receiver correct type of receiver is purchased.

Focus shifts to Audiologist and slowly even mother and grandfather along with the child are focussed.

It should be free from dust and water. Small insects can damage the inner parts of the hearing aid. So when the hearing aid is not in use, put it in the hearing aid case which is supplied with every hearing aid.

Audiologist shows the hearing aid case and puts the hearing aid into it.

It should not be exposed to high temperatures, so keep it away from hot stove or gas. Take care to see that hearing aid is not dropped.

Audiologist points to the clip.

With the help of the clip secure it properly to clothing.

Harness is shown to the mother and audiologist clips the aid to it.

Better still get a harness made for the child in which the hearing aid can be placed. While talking food take care to see that it does not fall in the microphone.

Audiologist takes the aid and explains to the clients.

Amplifier makes the sound louder with the help of a battery.

Audiologist picks up the cord of the aid and demonstrates the plugging of cord with the receiver.

If two receivers are used one for each ear, be sure that they are so that you get the maximum benefit. You have to connect this receiver with the cord. Connection should be proper. Small and large pins of the cord should be inserted properly into their corresponding plug points in the receiver.

Child picks up the receiver and it slips from his hands and falls on the table near a glass of water.

Take care. This receiver being very delicate, should not be dropped or banged against hard surfaces. It must be kept away from dust and not allowed to get wet. While cleaning the earmold detach the receiver from it.

Old man sitting beside picks up the receiver and detaches it from the cord.

Please don't. The receiver should not be detached from earmould or cord unnecessarily.

Focus on all the clients and then include audiologist too.

When giving the hearing aid for repairs be sure the receiver is also included for it is a vital link in the whole aid.

Child has put on the aid. Grandfather calls his name but child doesn't respond. The mother and grandfather are perplexed.

Don't look so worried the aid doesn't have a cell. That's why the child is not able to hear you.

Focus includes audiologist too.

Hearing aid requires a cell for it to work. Different types of hearing aids use different type of cells.

Focus on a pen torch cell and a button cell.

Audiologist points to the pen torch cell

A body level hearing aid like the one worn by the child requires a pen torch cell for its operation.

Points to the button cell and looks at the geriatric client.

This one is called as a button cell. It is used for your kind of Behind The Ear aid or for other aids such as in the ear and spectacle type.

Audiologist addresses both the clients.

It is important to know that the cell is of the correct voltage to make the hearing aid work. These hearing aids are designed for 1.5 volts cells.

While addressing the clients audiologist picks up the pen torch cell.

One cell of body level aid functions effectively. for about 8-10 days depending on the use.

Audiologist points to button cell.

This button cell for behind the ear aid will last for 100 hours of usage roughly.

Audiologist once again faces the clients.

After that with the decrease of cell voltage, the volume control needs to be turned up higher.

Audiologist shifts the volume control from 1-6.

But volume control too should not be increased by more than $\frac{2}{3}$ of the full range of volume control. Example, if it is 1 to 6 then volume control should not be increased more than 4.

Mother takes out a cell from a pen torch and puts it in the aid.

Never use or leave worn out cells in the hearing aid as they damage other parts of the hearing aid.

Always keep spare cells to ensure continued use of the hearing aid for optimum benefit. Be sure to store them in a cool place.

Audiologist opens the battery compartment and points to the markings positive and negative. (For both body level and Behind The Ear aid).

Each cell is marked with positive and negative marks, similarly battery compartment is also marked.

Audiologist places the pen torch cell and the button cell in the respective aids.

When you place the cell in the battery compartment, you should ensure that the marking of the cell corresponds to the marking on the battery compartment.

FEW OTHER GUIDELINES FOR THE EFFECTIVE USE.

On a chart

Speaker

1. Before replacing the cell in a hearing aid the aid should be switched off.
2. Cell should be removed from the hearing aid if it is not being used continuously.
3. If the cell terminals or contact surfaces get corroded they can be cleaned with knife or blade gently.
4. Always keep a spare cell.
5. When purchasing cells, check for the voltage. Purchase from those shops where cells are sold more frequently so that fresh stock is available.

Shift the focus to previous setting of Audiologist with the clients.

Audiologist points to the volume control on the aid.

This is the volume control. It is similar to a volume control on a radio or a T.V. The volume control can be turned up or down to make the sound louder or softer.

Audiologist shifts the wheel, until the arrow mark touches the '2' on volume control.

Use the volume control to adjust so that the sound reaching the ear is comfortably loud.

Grandfather increases the volume and puts on the aid. He looks Very dissatisfied and uncomfortable.

Do not increase the volume control to a very high level to avoid getting distorted sound. Distorting the sound does not help in understanding speech.

Focus shifts back to Audiologist.

Remember that the volume control is delicate and hence it must be handled gently. Do not turn the volume control up or down unnecessarily. Once a comfortably loud sound is found to reach the ear, leave the volume control at that level. Make sure that the volume control is kept clean. Clean it with a brush periodically.

Grandfather picks up the earmold and gives a questioning look.

This plastic is an earmold. With the help of an earmold, the hearing aid receiver fits snugly in the ear.

Focus shifts completely on the earmolds Right and Left.

To get maximum benefit from a hearing aid, a custom made earmold is a must. Custom made earmolds are made from the impression taken on the user's ear.

Audiologist gets the earmold into the child's right ear.

Earmolds must be made for each ear separately they cannot be interchanged. Look, this custom made mold fits perfectly for your child.

Audiologist gets the left earmold with the receiver.

The receiver of the hearing aid should fit into the earmold so that the receiver does not revolve. When connecting the earmold with the receiver the volume control must be turned down.

Focus shifts to the setting of clients and the audiologist.

Another important aspect is maintenance of earmold. See to it that earmold is not plugged with dust or wax etc. The earmolds should be cleaned periodically with soap and lake warm water.

Audiologist blows' into the earmold.

Blow out the dust that may be blocking the passage for sound and wipe it dry. Any kind of blockage will result in squeal and so the sound transmission won't be smooth.

Audiologist compares the earmolds of the child and the grandfather.

Earmolds may have to be got done afresh periodically as the child grows.

Audiologist looks at the grandfather.

The canal shape and size changes even in old age. Even old people need to get the molds remade. If there is any irritation or pain with the earmold, consult us or your earmold technician for proper adjustment.

Audiologist keeps the earmolds aside and picks up the cord.

Now let me tell you about the connecting link between the ear and the hearing aid. The 'cord' is a thin wire that joins the receiver with the rest of the hearing aid.

Audiologist connects the cord to the body level aid shows 'S' cord, 'V' cord and 'Y'cord.

CORDS are used for body level hearing aids. There are different types of cords, 'S' cord, 'V' cord or 'Y' cord.

Audiologist points to the cord used by the child.

This is a 'V*' cord as you can make out from its shape. Twisting, knotting, or coiling it causes breakage. Breakage causes disturbance in the transmission of sound. Sound will be heard intermittently or not at all.

Audiologist puts the receiver at her own ear and twists the cord.

In order to check breakage in the cord, roll the flexible cord gently between the thumb and forefinger at several places along the length of the cord. A cracking noise indicates a broken cord.

Mother puts the receiver at her ear and checks the cord. "Nods her approval" Audiologist points to the pins of the cord.

Inspect the plug point of cord for any breakage. The plug pins should be cleaned periodically with a small brush.

Both small and one larger of the two pins are pointed.

Now as you can see these are two pins, one being smaller than the other.

Audiologist show the 2 holes (one small and the other bigger) in the receivers.

The smaller pin must be inserted in the smaller hole and the bigger one in the bigger hole. Do not wind the cord around the hearing aid. Don't move the end back and forth in the socket or pull on the delicate area of the cord.

Complete focus on the Audiologist.

Till now we discussed about the component details of a hearing aid. Now let me tell you about the accessories of an aid.

Focus on a person switching on a T.V. Focus shifts to a person switching on a tape records.

Equipment like T.V, Tape recorders, transistors and radio have on-off switch.

Focus on the Audiologist and the two aids, Body level and Behind The Ear.

In the same way hearing aids also have on-off switches to make and break the circuit depending on the position it is placed in.

Focus on Audiologist pointing to the 'ON' position

The switch must be in the 'ON' position to hear sounds through the hearing aid.

Points to the 'OFF' position

When the switch is in the 'OFF' position, it breaks the circuit thereby putting a stop to the sound coming through the hearing aid.

Full set up of Audiologist with the clients is focussed upon. Audiologist puts both the aids to 'OFF' position.

Hearing aid should be switched 'OFF' when it is not in use, ie. in the night when the hearing aid is removed before going to bed.

Audiologist adjusts the volume control and once again switches on the hearing aid.

Before switching 'ON' the hearing aid volume should be turned down and kept in the minimum position.

Audiologist addresses the clients

The on-off switch should be intact. Any damage to the switch would prevent the hearing aid from functioning well.

Audiologist points to the Tone Control switch.

Another important switch is Tone Control switch. This is found in both body level and ear level hearing aids.

Focus on the Tone Control switch.

The Tone Control gives three options to the user. L, N or H. By choosing H or L of the three options the user can hear certain high or low frequency sounds better.

Mother shows her child's body level aids where the switch is on 'H' position.

Mother, 'can you please explain this in detail?'
Audiologist, 'For your child the switch needs to be put on 'H' position. This is because he requires high frequency sounds to be made louder. He has hearing loss in the higher frequencies and this position will help him to listen better.'

Audiologist points to the 'N' position of the BTE aid of the grandfather.

'N' position indicates that you do not want special amplification of the low or the high frequencies.

Focus on Audiologist

Use the tone control position recommended by the audiologist turn these controls gently.

Audiologist points to the telecoil/mike(CMT) switch.

Don't meddle with the switches unnecessarily
Some body level hearing aids have telecoil mike switches. Using a hearing aid which has such a switch is helpful when you are speaking on the telephone.

switch is shifted to T position by the audiologist

Using the switch in 'T' position, the telephone may be used by placing the receiver of the telephone near the hearing aid.

Audiologist puts on the aid picks up telephone receiver, keeps the receiver near the aid and another piece near the mouth.

As you can see a person using a hearing aid can talk on the telephone.

Focus shifts to Audiologist addressing the clients sitting in front of him.

A telecoil is a device in the hearing aid, which picks up changes in the surrounding magnetic field and converts it into an electrical signal. With such a circuit a hearing aid is also useful in classrooms, theatres etc. which are equipped with induction loop system.

Audiologist points to the 'M' position on the aid.

'M' position is used for normal conversational situations.

Audiologist points to 'MT' position and then shift the focus on the hearing aid focussing 'MT' position.

The switch may be kept in this position when telephone and normal conversation are to be used simultaneously.

Shift the focus to the previous setting of audiologist and the clients. Audiologist addresses the clients.

Like the other parts and switches of your aid, this switch too needs gentle handling. If switch is moved to 'T' position by mistake to hearing aid user won't hear any sound from the aid during a conversation.

By now you know and understand your hearing aids completely.

Focus shift on to the mother.

Question,
'can they start using their respective hearing aids?'
'Should I put the hearing aid on?'

Focus on the Audiologist and the clients.

Of course they can start using their hearing aids.

Focus on a playing child wearing earmolds.

Start by putting on the molds in the child's ears. When he is comfortable gradually increase the time for which the mold is worn.

Receivers are attached on to the worn earmolds.

Let this be for a short time initially. Increase the time gradually.

Focus on the mother attaching the cords to the receivers.

Next step is to make the child get used to the feel of the cords around his neck.

Mother joins the cord to the hearing aid and puts the aid on.

Join the other end of the cord to the hearing aid. Let the aid be on for a short time at first. Increase the duration slowly.

Mother increases the volume setting and brings it to the prescribed volume.

Volume initially should be kept-low. Child needs time to get used to this new noisy, world around him. Increase the volume to the recommended setting in small steps.

These steps will ensure that your child has accepted the aid comfortably and completely.

Focus on the Audiologist addressing the geriatric client.

You too need time to get familiar with your new friend.

Focus on the grandfather wearing an earmold. He is reading a newspaper.

Put on the earmold for a short time initially increase the time gradually. See if it causes any irritation or pain in the ear.

He attaches the aid to the ear mold. (Now he is wearing the complete Behind-The-Ear aid).

Put on the Behind-The-Ear aid. Slowly increase the volume to the recommended setting.

Focus is shifted on the Audiologist.

Intially you or your child may feel a bit disoriented with the aid on. But with time you will get used to it and the sound coming from it. It will be a part of you like your watch or your spectacle.

GUIDELINES FOR PURCHASE OF HEARING AID

VISUAL CAPTION

Focus on the setting of Audiologist and the clients.

AUDITORY STATEMENT

As we know that spectacles should be bought only from a good optician similarly there are a few guidelines for purchasing of hearing aids.

Focus on the Audiologist.

Hearing aids must be purchased only on the recommendation of a qualified professional ie, an audiologist.

Before purchasing, the user or the concerned parent must first ascertain that the particular model provides him the required help.

Though cosmetic value is important, it should not outweigh the consideration of amplification needs.

Always prefer to buy a hearing aid from a dealer with whom you can have an easy contact. A dealer who is near by and can be approached in case of any replacement or repair services. As far as possible avoid buying an aid by mail. Specific enquiries should be made about the availability and quality of the spare parts and cost of services.

Focus is shifted to the setting of Audiologist and the clients.(Audiologist counsells).

Another important aspect is repair and servicing.

Hearing aid must be serviced periodically even though it may be functioning, to ensure long term usage.

You must remember that a hearing aid must have its troubles attended to by a qualified personnel who has had training in repairing hearing aid.

Avoid unnecessary repairs at high prices. Always approach a specialized personnel and you will be ensured to have best and reliable services.

"Do's and Don'ts about your hearing aid"

Caption on a chart.

Speaker's voice in the background.

Focus on a Male Audiologist. He has a hearing aid safely-tucked in a harness.

1. Keep it out of reach of snail children and house hold pets. Always keep the hearing aid clipped in the pocket or stitch a pocket for it.
2. Keep the hearing aid away from dust and water.
3. If a hearing aid gets wet immediate action may preserve it by-
 - a) Removing the batteries at once,
 - b) Drain all water,
 - c) Dry with absorbert cloth and place in a warm but not hot place. The low heat of hair dryer could be used.

Focus shifts to a female Audiologist she has an aid in her hand.

4. Don't drop the aid.
5. Don't leave it in bright sunlight.
6. Don't store it on a radio.
7. Don't let the aid hang creating pressure for cord and receiver.
8. Keep in mind the functioning of the hearing aid and its parts. Remember the cell needs to be changed periodically.

Focus on the setting with both male and female Audiologists setting together.

Female Audiologist.

9. Keep the information pertinent to hearing aid type, model and serial number.

Male Audiologist

How will it help ?

Female Audiologist

- a) In the identification of your hearing aid in the event of loss or theft,
- b) In ensuring that you receive the same hearing aid after repair.
- c) In giving complete information regarding your aid to the audiologist.

Focus shifts back to the previous setting of Audiologist sitting in front of the client's mother, child and grandfather.
- Audiologist addresses the clients.

Do keep the given information in mind and always remember to handle your aid carefully. This will ensure you many years of good service.

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