**Cochlear Implant / ABI**

- SNHL (AC Thresholds)
- Conductive & Mixed Loss (BC Thresholds)

**Electro-Acoustic Stimulation (EAS)**

- SNHL (AC Thresholds)
- Conductive & Mixed Loss (BC Thresholds)

**Middle Ear Implant**

- SNHL—AC thresholds within pink shaded area
- Normal Tymps
- AB Gap <10dB HL
- Inability wear conventional hearing aids due to outer ear problems (e.g. exostoses, allergic to earmoulds)
- Preserved speech discrimination (50% on AB Words) at a comfortable level (aided or unaided)
- Stable hearing loss

**Bone Conduction Implant (BCI)**

- Bone conduction thresholds within shaded area above
- Inability to wear conventional hearing aids
- Outer or middle ear problems
- OR
- Single Sided Deafness [defined as 4fq average <20dBAH on best ear]
- Must have had a CROS aid trial where appropriate

**Referral Guidelines for Auditory Implants**

- **Referral Criteria:**
  - Severe-Profound HF hearing loss
  - (>$80dBHL at 2 or more frequencies 0.5, 1, 2, 3 or 4kHz bilaterally)
  - Adults: Limited benefit from conventional amplification
  - Paediatrics: Insufficient audition to support development of age appropriate speech and spoken language development

- **Will also consider any hearing loss with:**
  - Dead Regions
  - ANSD

- If they are receiving limited benefit from conventional amplification

- **Contraindications:**
  - Unrealistic expectations

- **Auditory Brainstem Implant**

  - In cases where there is no auditory nerve, or the auditory nerve is compromised.
General information for professionals referring a patient for an auditory implant assessment

We accept referrals from a wide range of professionals who work with the patient including GPs, Audiologists, Teachers of the Deaf, Speech and Language Therapists, Hearing Therapists, ENT surgeons and Consultants in Audiovestibular Medicine. There is no minimum or maximum age of referral. However there are minimum ages for some of the surgical procedures.

Please contact your local department for further advice.

Please ensure you include the following important background information in the referral:

- Up to date audiogram
- History of audiological thresholds
- Main mode of communication including whether an interpreter is needed and which language/s
- Hearing aid use
- Aetiology of deafness, or investigations to date into aetiology
- Information on additional needs or developmental delays and/or learning difficulties
- Patient’s preferred contact details