Yoda Ear Center • Audiology Department

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Patient Name: Deborah Dragon Fish Medical Record #: 9874563217

Date of Birth: 6/23/2022 Age: 3 m.o.

Date of evaluation: 10/17/2022 Patient Type: Outpatient

Referring Provider: Grey, Meredith, MD Audiologist: Lucy Brown, AuD

**Audiology Evaluation: Non-Sedated Auditory Brainstem Response Evaluation (ABR)**

**HISTORY:**

• Referred for an auditory brainstem evaluation following referred newborn hearing screen

• Birth Hospital: Seattle Grace Hospital

• Newborn Hearing Screening: Referred using OAEs, left ear, passed right ear

• Previous screening on 8/12/22 obtained passing AABR for the right ear, referred on left.

• Risk factors for hearing loss (JCIH): syndrome associated with hearing loss (Trisomy 21)

• A Spanish language interpreter translated for mother

Deborah arrived wide awake and took a long time (90 minutes) to fall into a calm /quiet state suitable for testing

**IMPRESSIONS:**

• **Right:** essentially normal middle ear function, and high intensity click

• **Left:** abnormal middle ear function- limited response in the moderate range

**RECOMMENDATIONS:**

• Otologic consultation with ENT

• Repeat testing following ENT evaluation

**TEST RESULTS:**

**Otoscopy:**

**Right:** Clear small canal, unable to visualize TM

**Left:** Very small canal, unable to visualize TM

**Middle Ear Studies:** Tympanometry tested with a 1000 Hz probe tone

**Right:** Consistent with essentially normal middle ear function Canal volume of 0.22

**Left:** Flat tracing; consistent with possible middle ear involvement canal volume of 0.17

**Cochlear Studies: Distortion Product Otoacoustic Emissions (DPOAEs)** dd not repeat

**Auditory Brainstem Response (ABR):** A single-channel montage (Fz - Aipsi), stimulus rate of 27.70 clicks per second, Blackman window, multiple recordings and insert earphones was used.

**Threshold testing:** *ABR thresholds are generally closely correlated with behavioral hearing thresholds. It is important to corroborate findings with behavioral audiological testing as ABR is a measure of neural synchrony along the auditory pathway, not cortical auditory function.*

**Morphology and repeatability: good /fair**

**Sleep state:** fair, slept for a very short time

**Right:**

Click: 20 dB eHL

**Left:**

Click: 60 dB eHL

1000 Hz: 50 dB eHL (with +10 dB correction)

**Neurodiagnostic Click:** Recorded in response to rarefaction and condensation click stimuli with click stimulation at 60 dB eHL

**Right:**

• Poor morphology

• Wave V did not reverse with change in polarity, suggesting true neural response as opposed to auditory neuropathy spectrum disorder

Thank you for allowing us to participate in care. If you have any questions or concerns, please feel free to contact me at 754-139-8675 or email me at lbrown@yodaearcenter.org.

Lucy Brown, AuD

Doctor of Audiology