HEARING HEALTH CHECK

Check all that apply to you.

- □ Speech or other sounds seem muffled to me.
- ☐ I have trouble hearing in a group, in a noisy area, on the phone, or when I can't see who is talking.
- □ I have to ask others to speak more slowly or clearly, to talk louder, or to repeat what they said.
- I have trouble hearing high pitched sounds (e.g. birds chirping, doorbells, telephones, alarm clocks).
- □ I turn up the volume higher than other people prefer when watching TV or listening to the radio or music.
- ☐ I am sensitive to certain sounds or find certain sounds very bothersome.
- □ I have ringing in my ears (tinnitus).

If you checked any one of the statements above, you should have a hearing evaluation to assess the severity and type of hearing loss.

EAR HEALTH CHECK

Check all that apply to you.

- □ I am younger than 18.
- ☐ I have hearing loss or ringing (tinnitus) that occurs only in one ear or that is noticeably different in one ear.
- □ I have sudden, quickly worsening, or fluctuating hearing loss.
- □ I think I might have a build-up of earwax, fluid in the ear, or something else in one or both ears.
- □ I have taken over-the-counter or prescription medication that causes hearing loss in the past.
- □ I have had chemotherapy and/or radiation in the head and neck area.
- □ I experience pain or discomfort in one or both of my ears.
- ☐ I have noticed drainage from one or both of my ears.
- ☐ I have experienced balance problems or dizziness.

If you checked any one of the statements above, you should have a medical evaluation to address any underlying medical conditions that may be impacting your hearing before purchasing any type of hearing aid.

Thank you for choosing ENT & Allergy of Delaware to be your hearing healthcare provider.

We value your business.

OUR LOCATIONS

Iron Hill Corporate Center 700 Prides Crossing Suite 200 Newark, DE 19713

Foulkstone Plaza 1401 Foulk Road Suite 205 Wilmington, DE 19803

Middletown Crossing 306 E. Main Street Middletown, DE 19709

CONTACT US

Please contact our office to schedule an appointment. We are available by phone during the following hours:

MONDAY - THURSDAY

8:00 a.m. – 5:00 p.m.

FRIDAY

8:00 a.m. - 12:00 p.m.

(302) 998-0300 EXT. 4



Hearing Aid Guide



ENTAD Hearing Aid Guide 11-17-22.indd 1 11/17/22 12:30 PM

PRESCRIPTION HEARING AIDS

All ages

Comprehensive hearing test by licensed audiologist and medical evaluation by a physician

All degrees of hearing loss

Consultation with an audiologist to discuss your individual hearing loss, style and technology options, communication needs, and personal preferences.

Custom and standard in-the-ear and behind-the-ear styles available

Advanced digital sound processing, noise reduction, feedback management, wireless compatibility, telehealth, and rechargeable options available.

Fit and programmed by an audiologist using prescriptive fitting formulas, real ear verification measures, and on ear calibration.

45 day Trial Period and ongoing visits with certified audiology assistants and audiologists

Standard repair warranty and Loss & Damage Coverage included

\$1990 - \$6350 per pair. Insurance coverage or discounts may be available. VS

AGE RANGE

EXAMINATION

HEARING LOSS

SELECTION PROCESS

STYLES

FEATURES

FITTING

FOLLOW-UP

WARRANTY

COST

OVER-THE-COUNTER HEARING AIDS

Adults only (18+)

No hearing test or medical examination required

Self-perceived mild to moderate hearing loss

Self Selected. Available in some stores and/or online. See device packaging or website for details.

One Size Fits Most. Various earpiece sizes may be available, similar to earbuds.

Self-Fitting and Non-Self-Fitting

Self Fitting: can be controlled, customized, and programmed by the user.

Non Self-fitting: limited user adjustments available

Programmed and fit by the user. See package for details.

No trial period or ability to return devices is required by the FDA. See device packaging for details.

No warranty required by the FDA. See device packaging for details.

Estimated \$50 - \$3000 per pair. No insurance coverage.



Consult a medical provider before buying any over-the-counter or prescription hearing aid if you have any of the following medical conditions:

- Ear deformity
- Fluid, pus, or blood coming from the ear
- Hearing loss or ringing (tinnitus) that occurs only in one ear or that is noticeably different in one ear
- Pain or discomfort in the ear
- History of excessive earwax or feeling that something is in the ear
- Pain or discomfort in the ear

- Sudden, quickly worsening, or fluctuating hearing loss
- Vertigo or severe dizziness

ENTAD Hearing Aid Guide 11-17-22.indd 2 11/17/22 12:30 PM