

BIAP Recommendation 09/5 Annex:

Detection of risk factors

Foreword

This document presents a Recommendation by the International Bureau for Audiophonology BIAP.

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Comments on this document are welcome and should be sent to the Secretary General of the International Bureau for Audiophonology BIAP. The address can be found on the BIAP website at www.biap.org.

Introduction

In most countries, there is no precise legislation how the ear impression-taking process should take place. Therefore, the BIAP would like to make a recommendation on this subject. Although such an impression appears to be harmless in practice, it presents considerable risks.

Recommendation

Absolute and temporary contraindications for an ear impression

- Infection or inflammation of the outer ear
- Acute inflammation of the middle ear (otitis media)
- Ear wax (cerumen) plug or over-production
- Foreign body/parts in the external auditory canal
- Blood in the external auditory canal
- A recently carried out otological surgery

Relative contraindications

- Inflammation of the middle ear
- Presence of a ventilation tube in the eardrum (tympanostomy tube)
- Perforation (fissure) of the eardrum
- Cicatrization of the eardrum after tympanoplasty
- Removal of the mastoid process (mastoidectomy)

- Exostoses of the external auditory canal
- Skin diseases of the external auditory canal

If necessary, seek medical advice.

The following complications may occur during the performance of an ear impression-taking:

- It is not possible to remove the ear impression in a pleasant way / without pain
- Barotrauma and alternobolar dizziness
- Constipation by ear wax (cerumen)
- Hematoma in the auditory canal or on the eardrum
- Perforation of the eardrum
- Traumatic perforation of the eardrum with perilymphatic fistula
- Postoperative complications following a recent otological surgery
- Skin irritation
- Insertion of impression material into the middle ear

References

Berkey, D. (1995). Guns Putty and Powder or The Audiologists Guide to Impression Material. The Hearing Journal. Vol.6, no. 2.

BSA Education Committee October 2004. British Society of Audiology Guidelines on Minimum Training Standards for Otoscopy and Impression Taking.

College of Audiologists and Speech-Language Pathologists of Ontario (March 2005). Preferred Practice Guideline for Ear Impressions.

Dillon, H. (2001). Hearing Aid Earmolds, Earshells, and Coupling Systems in Hearing Aids. New York: Thieme.

Pirzanski, C. (1997). Critical Factors In Taking an Anatomically Accurate Impression. The Hearing Journal. Vol. 50, no.10.

Pirzanski, C. (2000). Selecting material for impression taking: The case for standard viscosity silicones. The Hearing Journal. Vol.53, no.10.

This recommendation was created and approved in multidisciplinary cooperation between professionals of all audiophonologic disciplines, which are medicine, pedagogy, speech therapy, psychology and hearing instrument audiology.

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This recommendation and its annex were compiled in accordance with the technical commissions 06 hearing aids and 29 tinnitus.