Sample—Cochlear Implant Candidacy Considerations for Pediatrics

When counseling parents about their child’s hearing loss, many factors need to be considered. It is important to provide early and adequate access to sound for optimal speech, language, cognitive, and social outcomes. This patient management tool is designed to help you to determine whether a CI candidacy referral is appropriate.

1. Does the child have a severe to profound hearing loss? ______ Yes ______ No

2. Do age-appropriate speech perception results suggest limited progress or a plateau in speech and language skills? ______ Yes ______ No

3. Do functional gain measures indicate that the child does not have access to all frequencies necessary for speech and language development? ______ Yes ______ No

4. Does the child have difficulty responding to his/her name in quiet or noisy situations consistently while wearing current hearing aids? ______ Yes ______ No

5. Does the child present with a delay in his/her speech and/or language skills? ______ Yes ______ No

6. Do others (ex. family members, teachers, neighbors) have difficulty understanding his/her speech? ______ Yes ______ No

7. Does the child have difficulty interacting and communicating with same-age peers? ______ Yes ______ No

8. Does the child show a delay in reading acquisition and/or reading fluency? ______ Yes ______ No

9. Does the child expend extra effort when listening, leading to fatigue? ______ Yes ______ No

10. Does the child show frustration with poor communication outcomes at home, school, or social settings? ______ Yes ______ No

11. Does the child depend on visual cues to interact successfully at home or school? ______ Yes ______ No

Totals:

If two or more of the answers regarding functional hearing are yes, a cochlear implant referral is appropriate.
Sample—Cochlear Implant Candidacy Considerations for Adults

The following checklist has been developed as a patient management tool to help you determine when a cochlear implant candidacy is warranted.

1. Does the patient have a moderate to profound sensorineural hearing loss bilaterally?  
   _____ Yes   _____ No

2. Does the patient have a ski-slope sensorineural hearing loss with poor word recognition test results?  
   _____ Yes   _____ No

3. Does the patient have a word recognition score poorer than 65% in either ear?  
   _____ Yes   _____ No

4. Does the patient’s aided hearing loss significantly impact daily interactions either socially or professionally?  
   _____ Yes   _____ No

5. Does the patient have difficulty following a conversation in noisy situations while wearing current hearing aids?  
   _____ Yes   _____ No

6. Does the patient have difficulty communicating on the telephone while wearing current hearing aids?  
   _____ Yes   _____ No

7. Is the patient dissatisfied with his/her current use of hearing aids?  
   _____ Yes   _____ No

8. Does the patient have difficulty communicating with one or more people when background noise is present?  
   _____ Yes   _____ No

9. Does the patient have difficulty in situations when lip reading is unavailable (ex. when driving a car or while his/her back is turned away from partner)?  
   _____ Yes   _____ No

10. Is the patient socially separating himself/herself because the effort of listening has become overwhelming and/or frustrating?  
    _____ Yes   _____ No

Totals:  
   [ ] Yes   [ ] No

If two or more of the answers regarding functional hearing are yes, a cochlear implant referral is appropriate.