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Helping Patients Like Never Before

Presenter: Karen Toole, AuD

Hello and welcome. Thank you all for joining me today. My name is Karen Toole, and I'm the national education and training specialist for Oticon. I'm delighted to present to you on all the updates to Oticon Intent. It's my hope that after this course, you'll be able to describe product and connectivity updates available for products on the Sirius platform, discuss new Oticon intent evidence introduced to support benefits for people with hearing loss, and demonstrate how to utilize new Oticon counseling Tools that are available now.

I'd like to introduce you to Bernie Parent, who would like to tell you more about his experience with Oticon intent.

I'm from Canada, originally from Quebec, from Montreal, and I was fortunate to play hockey as a goaltender for the Philadelphia Flyers, and we won two championships. Two Stanley Cups. 1970. 1975. Today, with my hearing aid, I feel as happy as I did when we won the Stanley cup.

To be able to hear every little piece that is going on around me is just beautiful. I describe it. One word, clear. It's difficult to explain how grateful I am to have this beautiful product, to be able to hear noises, people talking, people asking questions. Before, I used to have to repeat things two and three times, maybe four times, you know, and it was hard for him to admit that he could not hear.

We go along the water, along the ocean, and you hear that beautiful noise of the ocean with the waves hitting the beach, and we share that. Especially when I go outside, right here on the balcony, for example, I hear the boats going by, or I'll walk down the street and I hear the birds chirping. With social life, it really makes also a big difference, especially when I'm in the group, people, and somebody's talking to me. I could hear clearly what they were saying. I can hear the dog so much better when she needs to go out, when she needs little cookie.

When I go to the hockey games, you know, the guy, whoever has the puck, you know, will pass to his partner, and I hear the sound of the puck hitting the blade. When there's a phone call, I hear the sound is so clear and beautiful, it's incredible. Bernie's really not tech savvy, so the ease of using the app is mind blowing. How I adjust my hearing aids. I could do it with my phone and adjust the sound.

If I'm in a place that's busy and loud or whatever, I could adjust it or to a place where it's very quiet and I could readjust it to the situation where I'm in. The charger lasts the whole day before I go to sleep at night, the charger is on a little table next to me. So just take them off, put them in the charger. When I get up in the morning, I look at them and say, good morning, buddies. And then I put them on and life is beautiful.

One word that I would use to describe Bernie his hearing aids is confidence. Much more confident. Psychologically, I feel better. Physically, I feel better and I feel better because I can communicate, socialize with people, with my friends, and my whole life has changed.

I'd also love to share a few stories of my own. I do trainings with providers across the US, and just recently, while at a training, an HCP mentioned he had a few of his trusted patients try Oticon intent to get their opinions. Both were current more users and neither were considering upgrading to to new technology at the time. The consensus between the both of them was that the sound quality was so improved that they didn't want to give up the devices and they chose to keep them in another training. I met an office assistant and she just switched from another manufacturer to Oticon intent.

Excuse me. She has been so impressed by her ability to hear, even in difficult situations. I was really happy to hear that she was feeling more successful in communicating, not only in her personal life, but professionally as well.

Oticon champions all the work you do to advance hearing healthcare. We're committed to helping your practice and your patients thrive by focusing on three main areas. Our unique approach to developing hearing aids starts with the brain and understanding what it needs to make sense of sound by challenging conventions and bringing you life changing products. We're deeply committed to you and the needs of your business, which includes our position on OTC devices and why we have a managed care strategy and through our support of the Eriksholm Research center. This collaborative effort between Oticon, Eric's home, and many academic institutions is dedicated to exploring effective ways of addressing hearing loss in the long term.

We seamlessly integrate Ericks Holm research with our state of the art engineering capabilities to consistently bring you innovative products rooted in our brain hearing technology. And just as Bernie said, engagement is the end goal that we're striving for. To achieve or maintain engagement, our patients need to communicate effectively. And of course, hearing loss presents a major challenge to typical verbal communication. Communication is a high level cognitive process, but it's critical that we focus at the highest level because our breakdowns in communication are what bring patients to your door.

When a patient seeks care, it's really almost always due to a need to improve communication abilities with those around them that they care about the most. And we've been on this journey of helping patients to achieve or maintain engagement for a really long time. We want to strive to develop new innovations that continue to make it easier for your patients to engage in communication more effortlessly and lead the life they want to live. Oticon intent took that journey to the next level. Our 4d sensor technology.

Oticon intent seamlessly adapts as the user's needs change, and that 4d sensor technology enables oticon intent to increasingly prioritize speech, clarity or surrounding sounds as the user intention

requires increased emphasis. This high flexibility technology is the foundation for engaging in conversation in all sound environments. So now let's dive into product updates for Oticon intent, including the smart charger miniRITE and some firmware updates.

If you've been fitting Oticon real, you'll see that Oticon smart charger miniRITE has many similarities to our previous generation smart charger. It provides convenient charging with more than a full day of battery life, which gives your hearing aid user the freedom to travel light and keep their hearing aids powered and protected while on the go. The Oticon Smart charger miniRITE has a built in lithium ion battery that also works as a power bank. When the charger is plugged into a power source, both the hearing aids and the charger are being charged, but when it's unplugged, it switches to power bank mode. This allows the hearing aid to continue to charge without the use of an outlet.

It's important to note that the charging of the power bank itself can take up to 4 hours, depending on the current charge level. And when both the charger and the hearing aids are depleted, it may take up to 6 hours to fully charge. This table also displays the specific charging times based on the hours of use. So just like the desktop charger, the smart charger miniRITE will give the user 4 hours of use in as little as 15 minutes of charging time, and a full day's charge is achieved in just 2 hours of charging time. When the charger is plugged into a power source, the leds on the back of the charger will light up to show the charger status of the power bank.

Once the power bank's fully charged, the leds will turn off. When the charger is unplugged, the leds will show how much battery capacity is left in the charger's power bank. The remaining battery level can be checked by opening the charger's lid. I also want you to note that the number of green lights no longer refer to the number of charging cycles like the previous charger, they only indicate battery capacity for charging. This is more in line with how we perceive battery status, and your patients will have better knowledge of how long it takes to deplete the smart charger miniRITE's power bank because of the fact

that it's measured in a percentage level, just like their smartphone or their other devices.

Here are a few tips for optimizing the charging function of the smart charger that you should review with your patients. A key tip for first time use is to make sure the charger's built in battery is fully charged and patients should keep the lid closed while charging the hearing aids for optimized efficiency. If the user plans to store the charger for more than two weeks, it's really a good idea to fully charge the power bank battery before putting it away and to maintain the health of the rechargeable battery. It's ideal to charge the charger's power bank fully once every twelve months. If not, they might need to send it in for service so that the battery can be replaced.

And patients should also ensure that any power source or USB C cord that's used to charge the smart charger complies with USB 2.0 minimum output of 500 mA. For detailed care instructions, I really recommend using the smartcharger miniRITE's instruction for use booklet for air travel. Users should keep the Oticon smart charger mini right in their carry on luggage, not their checked bags. This is to comply with airline regulations on lithium ion batteries. Users are responsible for following specific airline rules, and when in doubt, they should consult with the airline directly because all airlines differ in how their rules are when deciding which charger to choose.

Oticon recognizes that while many hearing aid users might prefer just one charger, the option to have both should be available. And when comparing chargers, the portable smart charger miniRITE offers the same functionality as the desktop charger, with additional features like a power bank and a protective lid that might appeal to those needing a lot more versatility in their charging. The desktop charger is often considered easier to use, and it's more cost effective. It might also be a better option for those with very large ear molds since it's open with the release of Genie two 2024.2 Oticon intent firmware version one 1.0 will be available for you to update current patients hearing aids. I'd like you to remember that these updates only apply to Oticon intent hearing instruments, and here are a few of the

highlights of the firmware update streampath, which is a novel streaming pathway and I'm going to discuss this further.

When we cover connectivity updates, there will be general updates for improved performance related to hearing aids general updates for improved connectivity general updates for improved performance of Oticon Genie two, including improvements to the feedback analyzer for a faster measurement and the ability to turn off the audible indicator for service mode with Oticon intent now we have some exciting new brain hearing research on Oticon's intent that I'd like to share with you today. But before we jump in, I'd like to talk to you about hearing aid research in general. Much of the scientific research that informs our understanding of cognitive hearing science, or brain hearing, is generated by the Eriksholm Research Center. Eriksholm is an independent research facility that engages in close collaboration with world leading academic research institutions, and it expands our knowledge in this and other areas. The investment into Eriksholm Research center and the use of the knowledge that it generates is unique to Oticon and is an important example of Oticon's commitment to thought leadership.

All manufacturers will talk to you about their research, and of course, the outcomes of the study are always going to show that the product is in a positive light. But is the study really giving you a holistic view of the patient experience? What metric do we want to study in the research, and what are we asking? Are we asking the right questions to answer the study's hypothesis? We are interested in measures that reflect how patients will experience the real world and how this will impact their outcomes.

When we only test under certain conditions, we really can't determine this. And Oticon has been testing under more real world conditions than our competitors for many years. In the real world, noise and speech are all around your patient. It's really important to consider all these questions when designing a study that will evaluate a hearing aid in a more realistic environment. That's what your patient

encounters.

It's not just that typical setup where speech is in the front and noise just happens to be in the back. The additional research I'm going to show you today will highlight how we've gone above and beyond in our efforts to develop life changing technology for your patients and have again developed innovative research methods and studies to test this technology. We'll talk about these unique research methods we've used and how we thought about questions that we ask in our research studies. This ultimately will give you even more benefit for your patients when you fit them with oticon intent. Here you'll see that we use pupillometry, which has really been a benchmark to assess listening effort in oticon products for quite some time, and this time we've used a new method of monitoring heart rate.

I think you'll find these studies very interesting and find some key takeaways that you'll be able to use as you discuss the benefits of oticon intent with your patients. We have three new studies to share. For the first time in the industry, we're talking about reducing listening stress, and we're able to measure the reduction with oticon intent compared to oticon real. And we've measured a reduction in sustained listening effort also comparing oticon intent to oticon real. And we have a new competitive technical evidence study showing oticon intent provides more access to speech queues than four leading competitors.

To highlight these studies, I'm going to introduce you to two of Dumont's research team. First up is Valentina, who's going to discuss the studies on listening stress and listening effort. With Oticon intent, our users will have more cognitive capacities available so they can engage in life without feeling exhausted at the end of the day. My name is Valentina Zapata Rodriguez. I am a senior researcher at Oticon.

For me, as a researcher, the most interesting part of this study was the evaluation of listening stress. We know from the literature that noise actually can affect heart rate. So when we go into a noisy

environment, our heart rate can actually increase. And this is connected to listening stress. So we are perceiving a modest due to the change in the sound environment.

But this has never been before tested with hearing impaired users or actually the effect of the hearing aids on listening stress.

In this study, we put a lot of effort into designing a listening test that was closer to reality. So we wanted to increase the. The link between naturalistic testing in our lab. So then, to do that, we collaborated with the Technical University of Denmark and the Erlstone Research center. And what we did was to use virtual reality and Rome acoustic simulation to simulate a typical listening scenario, being at a party or like a dinner, where you have multiple concoctions, conversation happening at the same time.

So the participants, what they have to do was first to locate a specific story that it was coming from a visual avatar that they could see on the goggles, the VR goggles. And then once the participants locate the avatar, so they had to stay still. And then now they will hear a news clip, and then they needed to stay still, paying attention to this news clip. And then at the end of the news clip, they would answer a question about the content. So then this is similar to the common listening scenario, right?

So then you locate and then you pay attention to the conversation, this intimate conversation that is happening also with this setup, what we wanted was a actually to test oticon intent, how the user would use it in daily life. In this experiment for us was very important that the users could actually move. So then it was closer to the dynamic that we actually encountered in real life, like in conversation.

And the results were remarkable. So we found a significant reduction of up to 31% on listening effort based on the relative change in the mean pupil dilation. And also we found a reduction of 40% in the mean change in heart rate. And with this monitoring heart rate, we evaluated the lesson in stress. So for our user, these results means that oticon intent provides personalized listening support that

supports the range by reducing listening effort and listening stress so our users can have more cognitive capacities available to do other things during the day and engage in life like never before.

In this study, we looked at something that has been never done before in the industry. We measured listening stress. Listening and noise doesn't only require effort, it may even be stressful, and listening stress reduces our ability to engage in conversation. Stress is a natural response to a perceived threat. During periods of stress, our bodies trigger a fight or flight response to increase our chances of survival, which ultimately raises your heart rate.

Dealing with loud noises and struggling to follow speech and noisy environments can cause the same reaction. This is called listening stress. Studies show that even short periods of stress can have a negative impact on our cognitive abilities, which reduces our ability to engage in conversation. And prolonged stress can even increase the risk of cardiovascular disease. But stress is a natural response to not only external but internal challenges or threats.

Stress helps the body to reprioritize resources. For example, when you're running, your body needs to reprioritize in order to send more oxygen to the muscles that you need for running compared to when you're walking. It does this by increasing the heart rate. Our bodies have a similar response to sound and noise, and being in a noisy environment and struggling to understand speech and noise can also increase heart rate. This is documented by a great deal of scientific research across multiple disciplines.

Since change in heart rate can be observed as a reaction to listening and noise, heart rate monitoring was used as a method in this study. The change in heart rate can give us insights regarding the level of stress in varying realistic environments that the test subjects were experiencing. Previous research has only been focused on people with normal hearing. Using heart rate as an outcome measure in people with hearing aids has never been done before, and as Valentina mentioned, we used heart rate

monitoring to determine how stressed the user is while wearing not only oticon intent but also oticon real. To measure listening stress, study participants were asked to complete challenging listening tasks in a complex sitting environment while wearing the heart rate monitor.

On the x axis of this graph is the time in seconds, and on the y axis is the amount of heart rate change between conditions. This is the difference in heart rate in a more complex sound scene, which was a four talker setup, compared to the heart rate during a less complex sound scene, which was the two talker setup. The heart rate is measured in beats per minute, and the larger change indicates higher stress levels at the beginning of this task. The change in heart rate is similar for both hearing aids. However, note that when active listening part begins about approximately 7 seconds, the heart rate with oticon intent decreases down to a point where it's comparable to the heart rate during speech comprehension in the less complex sound scene.

So over time, the results show that the change in heart rate is less prominent with oticon intent than with oticon real. Overall, even in the most stressful listening situations, oticon intent instantly reacts to the user's needs, delivering a 40% reduction in listening stress compared to oticon real.

Pupillometry was used to assess listening effort, which we have used to benchmark improvements in oticon technology for quite some time. When performing a demanding task, such as listening to speech and noise, an increase in effort is reflected by the change in pupil size. The larger the degree of pupil dilation, the more the listening effort is thought to be needed for the task. Pupil dilation can be measured over a short duration, which in that case, the peak or the greatest amount of pupil dilation is measured to understand the effect of the task. Pupil dilation can also be measured over a longer period of time, which is really more consistent with real world experiences, especially when the task involves listening to speech.

For example, if you're listening to me talk right now about pupil dilation, you're engaging in sustained listening effort. Following dialogue requires paying attention to the talker over a sustained period of time, which requires attention and engagement. To understand the essence of conversation, we'll also need to react, reflect, and respond to by assessing the changes in people dilation while listening to running speech like this using a longer time window. This gives us a measure of listening effort that is more representative of real life situations. The aim of this study was to measure listening effort to determine whether our technologies can help people to expend less effort while engaging in conversation.

Over a longer period of time. In traditional studies, participants remain motionless during the tests. However, we don't really do this in real life. To assess the real world benefits of Oticon Intent, it's necessary to devise new testing paradigms. To accomplish this, Oticon researchers teamed up with the audio visual immersion lab at the Technical University of Denmark to create a virtual reality test methodology.

This is yet another example of thought leadership because Oticon technologies so far surpass traditional performance that new measures are required to demonstrate benefit. Noise also impacts a person's cognitive abilities because the brain needs to work harder to understand what's going on. To better understand this cognitive impact, we've investigated how much effort is required to follow speech for a sustained period of time while wearing Oticon Intent versus Oticon Reel. A challenging listening environment was created with multiple speakers. The virtual environment contained an audiovisual scene that consisted of 15 avatars that was located around the listeners. These are the results of four competing story setups.

The listener was told to locate the avatar who was talking about a specific topic. Then they had to focus on the identified avatar while a 32nd news clip was playing from that location. This was used to

simulate that when you have a conversation and you want to listen to someone in a real life, noisy setting, you focus on this specifically in order to follow and engage. When the data was averaged over time, we can see that Oticon Intent users experience a 31% reduction in pupil dilation for complex conditions with a four talker setup. This indicates that by understanding the user's intentions, Oticon Intent seamlessly and automatically optimizes the amount of listening support to prioritize speech.

This allows users to remain engaged in group and one on one intimate conversations, even in challenging environments, with less effort for sustained periods of time, all while keeping the sound scene completely open.

As part of our research, we also wanted to see how Oticon Intent, compared to other solutions in the market when listening becomes difficult. One of the most challenging tasks for a traditional hearing aid in a busy environment like a restaurant or a cafe is to separate speech from distracting noise when both are present and in front of the user. This is because most technology relies on traditional directional processing in order to enhance speech coming from the front and reduce the noise that's coming from other directions. In the same way, standardized methods for measuring speech in noise benefits use a simplified setup that's that speech is often presented in the front and that noise is coming from the back. But at Oticon, we know that this is not what a complex real life environment looks like.

In these environments, both speech and noise are present from every direction around the user, and we really wanted to reflect that in our test setup. So now let me introduce you to Mariana. She's another one of our research colleagues, and she's going to go into more detail on this study.

Users can stay engaged and confident in conversations, no matter how challenging the environment is. My name is Maria Valentina, and I'm a senior researcher at Oticon.

So personally, I found it remarkable that this study highlighted benefits that have never been demonstrated before. Typically, hearing aids are tested in setups that include noise only from the back, and this is a simple case for directionality, because it's geared towards enhancing speech from the front and removing noise from the back. However, in real life, we often have noise from other directions and many times the same direction as the speech. So in this study, we wanted to ensure we have a realistic setup, diffuse, and therefore we played noise both from the back as well as from the front. And this way, we strengthen the relevance of our results to real life.

It was extremely rewarding to see Oticon intent outperform competition in such a realistic setup.

We aimed, of course, for a fair and systematic comparison of all the devices, and that is why we conducted the study in a controlled lab environment. So we placed the hearing aids on the head and torso simulator, and we recorded the responses through the ear capacitor, the amplified sound from the hearing aids. Each device was fitted to the same moderate hearing loss and set to the prescribed settings of the manufacturer. In this way, we can ensure that all the parameters are identical, and then the results are comparable across devices.

Our study shows that Oticon intent performs exceptionally well at a range of environment complexities. So from simple to complex and very complex, and when noise comes from the same direction as the speech, specifically for the very complex situation, we have shown that Oticon intent can provide up to 45% more access to speech cues compared to four leading brands. So this means that hearing aid users can confidently rely on Oticon intent to provide the necessary support compared to other devices, even in very challenging situations where they cannot turn their back towards the noise, but still would like to communicate.

In this study, we compared Oticon intent to four premium products from other manufacturers in terms of their ability to enhance speech clarity and access speech cues when speech and noise are both

coming from the front. To do so, we recreated a realistic, busy noisy sound scene with diffuse noise. To further test the capabilities of Oticon Intent, we presented speech and noise coming from the exact same location, and that was toward the side. The results also showed that in this real life situation, Oticon Intent outperformed all four leading competitors on speech clarity and access to speech cues, even in the most challenging of environments. The score is the speech intelligibility index with a higher SII, meaning more access to speech in a complex environment, which was shown on the left graph.

Oticon Intent did the best out of all the brands, with a relative SII difference of up to 22% compared to the lowest performer. For the very complex environment which was shown on the right, there was up to a 45% reduction or difference for the very complex condition when compared to the lowest performer. So what should you take away from this research? Oticon Intent consistently outperforms competitive devices, providing more access to speech across environments, and not just a single type of listening environment. Our evidence package for Oticon Intent includes numerous brain hearing outcome measures and some of which were pioneered and used first in the industry, including pupillometry for measuring listening effort and heart rate monitoring for measuring listening stress.

These studies demonstrate our belief in the concept of brain hearing. They show our commitment to aspiring to a higher level of clinical care and outcomes for your patient. If you're interested in all of the participant and setup details for these studies, please check the download section of this course to access the research briefs. And if you'd like to learn more about current and past studies, I'd highly recommend you visit the Ericsson Research center website or you can check out their YouTube channel. Now we want to spend a few minutes on connectivity with the Oticon Intent firmware version update one 1.0 Intent will have a dedicated streaming pathway.

I'll explain the benefits of this and what they'll do for your patients. Many professionals also have been asking about Auracast and how that's going to work with our hearing aids. I'll review Bluetooth LE audio

benefits, and I'm going to give you an overview of Auracast so that I can answer any of those questions for you. With firmware version one 1.0, Oticon intent has access to a dedicated streaming pathway, which we're calling Streampath. This is for uninterrupted audio streaming.

Streampath ensures that the stream signal keeps its level without interruptions, all while maintaining access to surrounding sounds for safety. With the introduction of that dedicated streaming path, the stream signal now gets its own filter bank and compressor, and it's processed separately from the microphone input. This means that the gain for stream signal will be maintained in cases where the gain from microphone inputs might be affected or attenuated when very loud sounds are present in the environment. For example, if your patient is sitting at the airport and streaming a phone call, and the environmental noise becomes really loud because the cart carrying all those passengers is coming closer and closer to them, because the loud and sudden change to the sound scene, the hearing aids will attenuate. And normally, or in past situations, this would also attenuate the streamed signal.

Now that it has its own dedicated streaming path, the gain for the streamed input will be maintained at the level that was set by the user. Bluetooth LE Audio is the latest Bluetooth audio standard that was designed for low power wireless devices, which includes hearing aids. Bluetooth LE audio enables new capabilities in hearing aids, which include a two way streaming, which enables hands free communication for Android. There's also a multi stream audio for better synchronization between the left and right hearing aids. LC three codec for audio streaming and the LC three codec is a new standard codec for audio streaming, and it provides improved power efficiency over standard Bluetooth classic protocols.

And Bluetooth LE audio also enables Auracast broadcast audio. Now, at this time, Auracast is not readily available. However, our hearing aids will be compatible. Now, I'm sure you've heard a lot about Auracast. It's being widely talked about not only in the news, but across hearing healthcare.

Auracast broadcast Audio is a Bluetooth connectivity platform that's part of the Bluetooth 5.2 standard update. Bluetooth Low energy and Bluetooth Classic are both a direct connect or a one to one connection that is only between two devices. Auracast broadcast audio is different in that it's unlimited to one connection, which means that anyone with a compatible device in the range of the transmission source can receive the information that's being broadcast. And it's not limited to just hearing aids. It can be beneficial for anyone using a compatible headset.

Auracast broadcast audio has many types of use cases which include broadcasting in airports, train stations, concerts. It can even broadcast in televisions and public spaces like bars, and it can allow you to have a shared audio on a smaller device. Another widely discussed benefit is at conferences where attendees can access an interpreter if attending an event in a foreign country and they happen to not be able to speak that language. In this example, an Oticon hearing aid user is at an airport waiting for a flight. Each gate within this terminal has its own auracast transmitter.

The user is going to gate b 25. However, they're in ranges of gate b 25, 26, and 27. The user pulls up the list of broadcasts that are within range and chooses the right gate number from the list of available transmitters to receive the announcements for their flight. Once the gate's selected, then the user's receiver, in this case the Oticon intent hearing aids, are ready to receive announcements that come directly from the gate. Bluetooth LE audio and Auracast do have some limitations as they're fairly new protocols at this time.

As I said before, it's part of the Bluetooth 5.2 standardization, which is much more standardized than the previous protocols like ASHA or audio streaming for hearing aids. The number of smartphones and tablets compatible with Auracast is a bit limited right now due to the fact that it's that it's new technology and it's not really widespread yet. However, I expect that Auracast is going to be more readily available somewhere around 2030. Now I have a few updates about fitting and programming for Oticon intent

and I'd like to start with a video that outlines these updates within Genie two 2024.2.

In this video I'll take you through the new features and improvements in Oticon Genie two two 4.2. They are designed to maximize your clinical efficiency. Let's start with the resource center. Previously it was possible to access the resource center through various links on the left hand side of the screen. When clicked on, they would all lead to the same interface, the resource center for ease of use, we have now combined all these links into one resource center link, making it easier to navigate to the resource center.

This can be accessed through the welcome screen, the selection screen and the end fitting screen. Under links you can now keep existing settings in personalization. The personalization tab contains client data and personalization method where you can add the client's act value or use the personalization questionnaire. When any information is changed under client data or personalization method, you'll be asked whether you would like to recalculate the settings or keep existing settings.

There is also now a faster feedback analyzer with the theme of further enhancing clinical efficiency. The feedback analyzer is now 22% faster. This is because the feedback analyzer is now embedded in the hearing aid, meaning the fitting software simply asks the hearing aid to perform the feedback test and the measurement is sent back to the fitting software when it is completed. Here is a video to show just how much faster it is.

It is now easier to change the measurement protocol in REM autofit the REM autofit measurement protocol can now be accessed within the REM autofit program. This allows for easier switching between insertion gain and speech mapping. Hovering over the information icon provides a description of insertion gain versus speech mapping.

We also have an update for our remote care solution. You are now able to blur your background during a remote care session to ensure privacy. This feature can be enabled before the remote care session by checking the blur background box. It can also be done while you're in the remote care session if needed by clicking the blur button right here.

Several in fitting updates have also been included in this release. Firstly, more information has been added regarding the time the user needs to hold down the button for different actions. Here is the information icon next to use tap control, which provides more information regarding tap control compatibility. Lastly, service mode under audible indicators is now configurable. The box next to service mode can be checked or unchecked to turn service mode on or off.

These new features and improvements in Oticon Genie 220 24.2 aim to improve your clinical efficiency, allowing you to spend more time on the individual needs of your clients. If you want to learn more, please visit the Oticon website.

It's come to our attention that some professionals are reporting incidents where Oticon intent appears to mute unexpectedly. When investigating this, we found that it appears to happen when the mini detect receiver hasn't been really attached properly or fully. When attaching the speaker to Oticon intent, you want to hear it click, or when it's properly attached, feel it snap into place. Here's an instructional video that you can also find within Genie two that shows you how to detach and attach a mini fit detect receiver.

We wanted to take the opportunity to review some other helpful tips and reminders. Remember that once you've connected to an Oticon intent device, it will stay in discoverable mode for about 120 minutes after that initial connection. And also with the previous generation mini fit speakers, you could program the devices without the speakers attached, or you could even change the speaker level during a fitting and just tell Genie two that you've made that change during a fitting. Now remember, with the

new mini detect speakers, Genie Two is now capturing information about the receiver once you connect the devices. So if you were to remove the speaker from the hearing aid, you'll lose the connection to Genie two.

Now, I'm really excited to talk to you today about the new counseling Tooles that we have for you and give you a brief introduction into person centered care, which is a new approach to supporting your patients and it's being globally accepted across healthcare. The main goal of person centered care is to improve individual outcomes. You may hear the terms patient or person centered care, and these terms are used interchangeably. The World Health Organization encourages a person centered approach to healthcare across all disciplines and the main goal again is improved individual outcomes.

So how can we relate person centered care to hearing healthcare and the discussion we want to have today about effective counseling strategies that you can use in your clinic. After this course, the Ida Institute, in collaboration with their global partners, developed this definition of person centered care for hearing health care. The person centered care movement is gaining traction globally throughout healthcare and organizations are dedicated to promoting and advancing person centered care. Scientific journals and international organizations such as ISO and the World Health Organization recognize and acknowledge its place in the global healthcare arena.

We have a new Toole to assist you with incorporating input from your patient into your clinical process. This sheet can be used while your patient is sitting in the waiting room, or you can bring them back and do it together. We will talk about the importance of understanding and listening to what is important to your patient, so this Toole makes it easier for you to incorporate this into your process. There's a space for notes so you can create goals and treatment plans for your patients. You can keep this in their file or you can just have them take it home and share it with their family and friends.

It might make a great talking point about discussing their hearing care with those that they love. Here you can see that you have questions at the top and there's a rating scale which you can use for more ease of discussion. And here is a closer look at the list of hearing aid preferences. The second Toole is a booklet that incorporates principles of person centered care and can make it easier for you to make your professional recommendation for a hearing solution. It's in this booklet form and it's designed for you to use in your office rather than just giving it to your patient.

It starts with common situations to assist you in the discussion about communication needs. There's also a box to indicate other situations that may not be listed here. On the opposite side of the page you'll see communication needs and several questions that you can use to engage your patient in conversation. This makes it easy to ask about their top three to four situations that are most important and rate how difficult they are and how important it is to them to improve their hearing in those situations. This is used by using this line Toole that you'll see on the right side of the screen.

The next page leads you to a discussion about what characteristics are important for them for you to consider when making your hearing solution recommendation. What we think is important versus what your patient might prefer could be really different and these pages make it easier for you to have an open dialogue with your patient about these preferences. We may assume a patient's priorities are different than they actually are. And finally, this visual shows you how traditional hearing aid technology provides a one size Oticon. Its all approach versus how oticon intent provides a personalized support that seamlessly adapts to your patients listening needs in all listening situations.

If you'd like to have these Tooles available in your office, please reach out to your Oticon rep to obtain copies. The IDa Institute is also an excellent resource for learning opportunities and information about the patient centered care in hearing healthcare. Check out IDa Institute's website, their articles and learning hall have a wealth of information and Tooles that I found very helpful and I believe that you

could use too. I hope you've enjoyed this course on all the recent updates on Oticon intent. Please check out our other Oticon intent courses on audiology online, or reach out to your Oticon account manager for more information.

Now I see there's a couple of questions in the chat here, so I'm going to go ahead and address those too. The first question says that they want to know more about the green lights on the back of the smart charger mini, right? So I'm going to go over for every green light, there are three green lights on the back. So if you see three green lights, then you have 70% to 100% battery capacity. With two green lights, it's 40% to 70% battery capacity.

And then the battery capacity for one green light is 40% or less. Okay, there's also another question. Somebody missed the percentage with oticon intent versus oticon real in the study for sustained listening effort. In very complex sound scenes, sustained listening effort was reduced by 31% when comparing oticon intent to oticon real. And that's all the questions.

Thank you so much again for coming.