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ReSound Smart Fit 2.Oh, That's New!

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All right, thank you so much for joining today. We can go ahead and get started.

All right, so just to review the outcomes for this course, after this course, participants will be able to describe the new elements found on the home screen. After this course, participants will be able to identify use cases where the new instrument MPO button can help. After this course, participants will be able to name up to six offerings outside the fitting software contained within this new product release. All right, so today we'll be talking about smart Fit 2.0. So this is a complete new look and feel for our home screen.

And I'm excited about this course because as Melissa mentioned, there's a lot of opportunities to give your opinion and participate and kind of let you walk through the design journey with us a little bit. And I'm excited to hear what you have to say. So my name is Erica Kaler. I do work for GN hearing, and I do help participate in the design of what you see in the fitting software. So this is exciting for me and near and dear to my heart to see something new come out like this.

We'll get started just with an introduction. We'll walk through the new home screen and the design and research behind it. We'll walk through some additions or enhancements that are made to the fitting screen for 2.0, and then we'll go beyond the fitting software, actually, and talk about the app and some of the hardware solutions. And then finally there'll be a summary and review, which will include a lightning quiz so that we'll be using the chat for that as well.

All right, so now I'll get started with the presentation. So I will go ahead and turn off my video so the focus can be on the slide. And again, the chat will be ready for you there anytime when there's an opportunity to participate. All right, so let's get into home screen design and research.

All right, so I'm already going to start with an opportunity for you to participate in the chat by looking at these screens. So go ahead and pay attention to the screen you see here. Some of you might be

familiar with. This is, this is what we call the launcher page in smart fit all the way through 1.18. And this was designed over seven years ago.

And the main purpose of this screen was really to distinguish product and software. So at the time, we were moving from Aventa to Smartfit, and the Linx 3D product was the only product that was going to be offered starting in smart fit. All other legacy products were offered in Aventa. So the goal of this page was actually just product and software, and easily for you to be able to distinguish where to go when using the new smart Fitzhen. The focus here is the product.

So that's in the upper pane on the left and the upper pane on the right was to offer some clear solutions on how to get to one software or the other, and some guidance around that. As time passes, more product launches and the Aventa becomes less relevant, largely. And the purpose of this launcher needs to change. So it's time for an update.

Okay, so where do you begin when you're designing and starting over with a new screen like this, a screen that somebody lands on or customers land on every single time they open the software. So you have to just decide what your needs or your purpose will be. But going about doing that can be a challenge because those need to be identified by the people who use it, and that is everybody out there who uses the fitting software on a regular basis. Also equally important are the people that don't use it, because those insights are just as valuable to find out why someone is straying away from the software. Maybe they aren't interested in it or they're struggling with it.

So it's really important to gauge the impressions of people who are really efficient and loyal users, and then also people who are not using the software. So when you see this screen, please put in the chat. How do you feel when you see this screen? It could be anything that comes to mind. Positive, negative.

When you see the launcher screen for 18 and before, what are your perceptions of the screen when it's presented to you in opening the fitting software? So go ahead and just shout out anything in the chat.

Okay, so a lot of people saying, let's see that they, someone said they like it, feels like it gives you all the first info that you need, helps determine the receiver. So I think the takeaway here is there's a lot of information on this screen, and I know that we're in this forum here and everyone's reading everyone responses, but a lot of times when we talk to clinicians and we go in their office, they're not as kind as you might be here. And they say that it looks busy. It's hard to find what they need. They don't like the scroll bar because there's scroll bars here that you may need to use to access certain product.

And we thought maybe there's a time for a change. There's a time to keep the elements that people like and then also help update the screen to give them a better flow.

All right, so the main focus and the main needs from the feedback was established for smart Fit 1.0 that we had to make sure that people were identifying the correct software for their product. It was taking them to the right place. They understood eventually which products went to which software they should be able to connect in a clear and intuitive way. The needs for smart fit 2.0 weren't so much product driven, or driven so much by identifying where to go, because pretty much most products fit today are in smart fit as opposed to Aventa. But connecting is always very clear and then making the pre-fit some pre-fitting activities accessible outside the software.

So keeping, again, the good elements that we have here, the information, like you said, you like to see on the front end what's clear, but then also giving an update to what we're working with.

All right, so again, just one more look at the old design, because this is going to be the last time you see it in this presentation to the new design. So if you haven't seen the news screen home screen yet in smart fit 2.0, this is what it looks like. I'm just wondering here. So if our goals are to bring things forward,

to make a clear, quick to action, how do you feel about this screen? What are some of the first things that you notice about this screen?

Go ahead and place those in the chat. More like a first impression. It looks cleaner. Someone says it looks easy to follow.

All right, this is great because this is just kind of what we experienced when we did interview several clinicians in their office, it took a few minutes to orient yourself. It looks more open. It looks easy to follow. I like the blue. It looks cleaner.

So this is pretty typical. And it's great feedback because when we rated the old smart fit screen, many people said that they liked it. But then when they were presented with a new smart fit screen, they were like, oh, this is nice. So it's familiarity, I think is comfortable. But then when you see a new option, then it takes a second and maybe it's better.

So how did we get to this screen? Is always a good question. So I'll just take you through that journey quickly. We have traveled everywhere. We did a lot of work in house and out, and we went through multiple phases.

So the first phase is typically an exploration phase. So we're using the old launcher screen and we're saying we need a new launcher, but what purpose should it serve and what is important to the people that are going to use this screen? So we brought activities out to people's offices. They could be card sorting activities, they could be interviews, combination of both to just identify what is important to you as a fitter to have at your fingertips when you open the fitting software. Next activity was definition.

The definition is to just basically, as it says, define what is it are we working towards? As I mentioned before, we're working towards getting some options upfront that might be hidden behind the connection

flow. So, meaning you have to select a patient and then go through that whole connection flow process in order to access anything really in the fitting software except what you saw on that screen related to product and connection in the original launcher. But of course, there's many, many things in the fitting software. So the question next is what do you bring forward?

So again, HCP is out in the field helping us define what's important and what do we bring forward once we gather that information, we're able to make a new prototype design and take that back out to the field for more learnings. And once we get our second prototype buttoned up based on the learnings from the first version of the prototype, we finally make built, meaning that we assemble and actually develop the software in a working way and then take the software back out to the field for final impressions and any stumbling points when someone's actually using the fitting software to do clinical tasks such as fit the hearing aid and adjust the hearing aid. So this is how we move through to get to this point. So this brings us back to the home screen. You can see that there's a call to action with the connect button.

Some of the things that popped up during those iterations of the versioning and testing were the serial number. The serial number was asked for many times to be present on the screen. So even though it wasn't in the original design, it shows up here, the word connected and not connected. Again, we're not part of the original design, but we're asked for during the iterative phases of the design. And now you see them here.

So those are just some examples that you'll see on the screen. Now I'd like to bring your attention to the top part of the screen where you see the black ribbon. So this is our new home screen, as you can see it marked in the red. But there's a lot of other options across the top and we can walk through those is these were some of the items that were identified as being important outside of the fitting and bringing them forward in front of the connection flow. So we do have the catalog screen and originally our

launchers served as a catalog.

It brought all of the product forward, product options forward. That was eventually why we needed the scroll bar, but now we've replaced it with a catalog that's actually served for a shopping mentality. So our UX designers identified how people work and some of their thought processes they base their decisions on when they're in a shopping mentality. So that's why we named it catalog. And you're able to compare some features here within different hearing aids and form factors so you can do side by side comparisons.

The flow goes from a left to right flow as opposed to everything being mostly contained in the upper box of the old launcher. Then we have some other exciting plans for future releases to make this screen better. But the point here is to facilitate the shopping mentality. And we also included an order button on the bottom which would take you to the website where you could actually order product.

All right, so the next tab in line is a resources tab. So just walking through the items in the resources tab we see the education this will bring you. All of these tabs will actually, or circles will bring you to different URL's or websites. The first one under education is actually what we're at right now. So it'll take you to the resound page for audiology online.

If you select the gnhearing.com, it'll take you to the resound Pro website. And if you select user guides, it'll take you to the website that contains guides in all languages so you have easy access if you need to print out a user guide or access a user guide in a different language than supplied with the product in the packaging. So I'm going to pull the videos and support out on a separate screen over here just to talk through those and give some more ideas around those because these are probably my favorites. So the support material will also take you to actually the resound Pro website, but will take you to the support page where it gives you information about specific product and also takes you to videos, which of course the videos link also takes you to videos, but those are housed on the YouTube channel. But

the important part that both take you to videos is that I like these because you can send them, you can actually, oops.

You can actually send them to your patients by clicking the share and give them access to the videos. So if they are struggling with how to put the hearing aids in a charger insert or remove clean a hearing aid, there's nice videos right here that you can actually just send directly to the patient to their email you can send them even before they arrive for their dispensing and have that waiting for them when they get home just as a refresher or even just setting some expectations before they actually receive the hearing aids that they're fitting. I like these a lot because it's just easy access to really helpful material that you can fire off to your patient. We have the updates tab, so walking through these there is a link to the Noah link wireless updater. So this is housed on the HIMSA website.

And sometimes people ask if they have to go to the website to actually do the update and we do just put the link to the website there because we don't want you to actually have to wait for a fitting software release in order to be able to access or update your NOAA link wireless. The cadence in which we release the software doesn't always match up with the Noah link wireless updates. We just give you a link straight there so you have the most current information at your fingertips. We have accessory updater. So this was removed from the desktop that was during install would be placed on your desktop, but now it's right here.

Not on the desktop but within the launcher. I'm sorry. The home screen takes you through the same process for accessory update as previous and same with the software update. So this is just a relocation again from the hamburger menu that was behind the connection flow but still walks you through the same process. It just brings the item forward and gives you access upfront.

Offentimes when you're updating, for example, the software, you're not going to want to go into a patient and go through the connection flow to update the software because you're not likely doing that

with a patient. So it brings of these housekeeping items forward for you.

The next tab is the preferences. So preferences looks generally the same, just again in a different place. So this should look familiar to you, but it also may not look familiar to you because we learned that many people don't know the preferences exist or they haven't updated them. So let's just take another poll. Have you ever set up your personal preferences in the fitting software?

So it doesn't have to be smart fit, but just any software that you use most do you typically look at or adjust your preferences?

So what I see so far are yes, which is great. I'm glad to see that.

So globally what we see is typically people don't update their preferences, but I'm glad to see the people here do. And we actually have something called auto preferences because of that reason. That they were sort of hidden behind the connection flow. Again, you're not really of the mindset of changing preferences when you're in with a patient. So we're bringing that forward and kind of as a reminder that there's a lot of neat preferences in here that could help facilitate a quicker workflow if they're set appropriately at the beginning.

Okay, so I guess the question for you is what else? Is there anything on the screen that or in these tabs that you don't see that you're missing or that you wish were here? That's always an important question for us.

It's just a point of view question. I can think of some things as a clinician myself that I would like to see up here, but I won't bias your opinion. And that's a segue into the fact that this is part of a journey, that this journey isn't over. We aren't finished designing or updating these screens. We have more input and more ideas from not only our internal audiology teams, but external audiologists that did find that they

were missing some things upfront.

So if you don't see anything here, hopefully in the future we'll bring some more things forward to you to help improve your workflow. And if you do ever see anything that's missing, of course, feel free to always share that information with your resound team member.

All right, so moving away from the home screen and now getting into the fitting screen. So once you're in the fitting screen, you may or may not need to go back to the home. So we'll talk about that and then we'll move into some enhancements that are in the fitting screen, such as the instrument MPO button, the environmental optimizer on, and the hearing noise program, and then aided gain measurements in autonomous.

Okay, so getting to and from home. So the home is the launcher revamp that we just talked about in the first section. And those, as I mentioned, it houses a lot of neat things that always used to be found in this part of the fitting. So post connection flow and we brought those forward. But there might be cases that where you do need to go back and access those items.

And we did add a access to the home up in the upper black menu. In the rare case, you might need to go back outside the fitting and actually access or adjust some of the parameters that are found outside the fitting. So you can just go ahead and click that home button here and it will take you back to the screens that we were just looking at. So once you land there, the screen may look like this. You'll see a couple different things here that have changed, maybe compared to the last screenshot, you'll notice that the devices are both connected in a connected state.

You can see that with the green connected button here. But most importantly, I want to point out our call to action button with the blue. This actually changed in its context here from the connect in the large blue button to continue. So this is getting you back into your fitting again. During the testing, we found

that there was a little bit of confusion on what the state of the fitting or the devices were.

So we did add some context here to help facilitate the understanding that the devices are still connected. You're still in a session, you can get back to the session easily. None of your data has been lost. So if you do need to come out here and, for example, update an accessory, or you suddenly feel the urge to change a preference, you can just come right back out here, make your changes, and then hit the big blue button to go right back into your fitting.

Okay, so, getting away from design a little bit, let's get more into some audiology topics. So we're going to talk MPO. So we did introduce what we call the instrument MPO button. So I'm going to start with a little bit of history of where this comes from. Our hearing aids used to be set to max MPO for all devices, and this was based on the hardware capability.

So how loud or how much power can the receiver put out? And we would set the MPO at max. But over time, there were some concerns about the values being shown on the screen and that they're quite high, as you can imagine, showing MPO. And there were led to some concerns and some questions as to why not actually prescribe the MPO values, which would then lower them as they'd be based on the hearing loss we did introduce quite some time ago. Probably should have wrote it down, but I can't remember exactly what release it was in it.

It was very, very early, either in smart fit, at the very end of the event, a series where we actually started prescribing the MPO values instead of setting them at max. And that's based on the fitting formula. So the understanding MPO is important here. And here's some kind of tips and great information about MPO that I'm just going to run through quickly here. But I'd like to point out there's a great article in the last bullet here from Francis Cook that's talking about MPO and hearing aid fittings and all of the good things that you can do with MPO and how to approach MPO with your hearing aid fittings.

But just to run through the bullet points here, just a reminder, the NPO is the highest output that the hearing aid could possibly reach. It doesn't necessarily mean that it's going to get there. So it's based on the receiver. So choosing smaller receivers usually result in lower NPO. But even if you choose a higher power receiver or a higher power instrument, for whatever reason, doesn't mean that the gain is ever going to allow NPO to be reached.

So as long as you're choosing appropriate gain prescriptions verifying the fitting, it's most likely not going to reach the MPO. And I see a question in the chat, and it is leading me to my third bullet point, is that for our fitting software, the MPO is not set based on the UCL. So if you have somebody that has normal UCL and you do have a concern that we're going to actually put out that level of sound, we don't base the MPO on UCL. We actually, when someone puts in a reduced UCL value, we'll actually adjust the loud, the loud input gains to make sure that they are not exposed to the loud sound, because that is a more functional way for our hearing aids to ensure that the patient will not become uncomfortable if they have reduced UCL, as opposed to trying to govern the MPO. Because as we'll talk here, governing the MPO could result in actually some distortion.

And why does that happen? So, I have two kind of analogies or ways of looking at these here. One for more visual, one for more mathematic. If we look at option a in the view here is how do we end up with distortion if we reduce MPO values? Well, in option a here, we see that if we have a high level of input, let's say 90 to 100 decibels HL input, and we're giving gains around 810 decibels gains, we're going to end up with about 108, 110 or so output, which then results in to 117 ish dB SPL.

So if we look in example a, we'll notice that those values, we are right there at those values, we're very close to being at 116 or 117 decibels SPL. This isn't necessarily sufficient because we could run into distortion and the patient may be able to hear that distortion if we look at it from a different perspective. For the house example in option b, if we think of the MPO as our roof, and we think of our gains as our

interior rooms. We don't necessarily want the ceilings of the interior rooms butting up to the roof.

Ideally, we would have some sort of insulation there, some buffering or an attic space to kind of keep comfort and avoid discomfort to those rooms below.

So you want to have some kind of spacing. But it is a little hard to visualize that on this screen because we do have the gains typically showing in HL, and we will see SPL values for MPO. So in order to do a quick check, if you are using a smaller receiver than you're pushing the limits over the receiver, or you have some concerns about where your gains are lying in terms of the calculated NPO, you can just flip to the output screen. And how you do that is you just use the little center card between the gain graphs and choose display options and select output. And that flips your output screen.

That gives you a great view of your house or your output. And you can see the roof of your house is the red line. You can see your rooms are your blue and red gain curves. And we like to see some space in between there. So if you see those budding up, then you're going to want to increase your MPO or you're going to want to change your receiver.

So the question is how to determine that. Well, the prescribed MPO is actually the bottom of the light gray. So if you see that your gains are budding up to the bottom of the light gray, then that's a software solution. You can increase those to the bottom of the dark gray. But if your gains are budding up to the bottom of the dark gray, then that's a hardware solution change.

And that means you may need to increase your power level or your receiver.

So if you're in the realm of being able to do a software solution, that's where we added the use instrument MPO button that's located in between your gain controls on the bottom of your gain adjustment screen. So you just go ahead and click that button, and you'll see the MPO to the left and the right jump up to maximum. So they'll go from the bottom of the light gray to the bottom of the dark

gray if you're looking at the output screen. If you're not looking at the output screen, you won't see a change on the graph, but you'll see a change in the gridline on the bottom here with the number values. So when might you want to use this MPO button?

Of course, we talked about when the curves are too close. Also, if you're fitting greater hearing loss with a small dynamic range, you'll want to also change this if you're using a small power on a receiver and it really can't be increased or changed. So, for example, maybe somebody has a tiny ear canal and they're really struggling with comfort. If you're using a high power receiver, you might have to use a smaller receiver and want to increase the MPO. Patient complaint might drive you to use this button.

So those complaints might be that sounds are muffled, they're not loud enough, they're unclear. It could be just if you take a look at the output, you might see that you need to press the button. And before making large gain increases, you might want to just do this for louder fitting rules. So, as you know, there's different fitting rules. Some prescribe more gain than others out of the, out of an initial fit.

And if, you know, if you're using a louder fitting rule, as I say, or one that prescribes more gain, you might want to go ahead and click the button to make sure that you're getting the most out of the hearing aid and not distorting. And then finally setting a music program. So this is also helpful with music because since music is so dynamic, you don't want to start clipping or distorting music. So these are just some reasons that you might want to use the button.

So another question that comes in sometimes is, well, what if I press the button and I didn't mean to? Or what if I press the button and I want to go back? Well, no worries. If you press the button and you go to Max MPO, as we discussed further or earlier, there really is no worry that you're going to do any damage to the patient, necessarily, because we're not prescribing gains to that level. It's just we're setting the roof higher, so you just have a taller attic, so to speak.

But if you really want to get your MPO back down to a lower level or two prescribed, you can just move it back down just like you would change a gain back down. So if you want to visualize again the prescribed MPO, you can use the output screen and use the lower limits of the light gray. So you'll be basically taking that red line down from the dark gray down to the light gray with the clicking of the gainhead.

All right, so moving into another fitting audiology type feature. This is the environmental optimizer in the hear and noise program environment. So just a little refresher on what is the hear in noise program environment. It's typically set as a default for program two, or uses a program to next to the all around program. And it is really designed for serious noise situations, dynamic situations.

And the goal here is to give the most flexibility within that program to help address noise complaints. So if you did use the software in the past, I believe it was before 15 or 16, we had a two different programs. We had a program called Restaurant, and we had what I like to call the focus program. So at the time, one would have been called ultra focus and then eventually upgraded into front focus. And they were two separate dedicated programs, but addressed both for noise.

One was more aggressive than the other. And we had some learnings from the launches that were, after that, the introduction of the focus programs, and learn that maybe people aren't necessarily needing two separate dedicated noise programs. It's most likely they'll use one. And that's what we call this umbrella program is inherent noise program because it sort of is an all encompassing noise program. When we merge those two types of programs together, the focus and the restaurant program, of course, we had to merge the settings together and design a kind of a brand new program, but kind of a hybrid program together.

And we did take the focus program settings for hearing noise as opposed to restaurant, which actually sent the environmental optimizer two to off in this program, kind of relying on the beam former for the

most amount of noise reduction. Well, over time, people felt like they would like to see the environmental optimizer on. If they were selling a lower price point hearing aid and didn't have access to the focus programs, they really wanted the environmental optimizer on because they couldn't rely on the beam former. So we did go ahead and make that change after hearing feedback from everyone in the field. So what we do now for new fittings, we set the environmental optimizer on and we set it to the way you see with the colored sliders here.

So moving from the off settings where everything is set to gray and set to zero to now activating the feature environmental optimizer with the slider settings, as you see here. So where do we get the slider settings from? Well, this is designed for heavy noise and very dynamic listening environments. So we really catered to those environments in trying to have a more natural sound quality, but still giving the desired effect of really reducing noise and enhancing speech. So that's why you see the dramatic effect with the sliders here.

I know that. Back with older product, we've been saying to keep the sliders close together in proximity when they're in the adjacent environments, and this sort of deviates from that mindset. But that's okay because times have changed and the product that was giving us a little bit of a challenge before has changed immensely since those recommendations have kind of circulated around in the field and we are recommending these settings. But if you find yourself with a patient that is saying to you, you know what, when I'm in quiet, I'm noticing, or less dynamic and listening environment, I'm noticing that I'm hearing game changes. It could be that they actually forgot to change away from their hearing noise program and go back to all around.

So that's an option to just remind them to. This program is designed for dynamic environments with heavy noise and they need to set back to their all around. Or if it's not a solution for them to remember to switch back to all around, you could just make those sliders closer together in the adjacent

environment. So instead of having the seven decibels disparity here between adjacent environments, you could bring up your noise to closer to the zero or bring down the speech sliders. So that's just a troubleshooting tactic if you do find that a patient is kind of struggling with the hearing noise program.

Okay, so getting into the auto rem feature and the aided gain, and I'll have you sort of get your chat typing fingers ready again. We're going to talk about some updates here for auto-rem, and that again is the introduction of an aided gain measurement. Just a little bit of history, again, is that auto-rem has been a part of the fitting software for a very long time and actually within Aventa, and then it has been iterated over time to remain current again based on input from the field. And when we get input from hcps and from the field, it usually is based on protocol, clinical protocol, or what's the gold standard at the time. So of course, REM has been a gold standard for a long time, but the way that we do REM has changed over time and the recommendations have changed over time.

So auto REM needs to kind of stay in fashion and also needs to change with the times as well. So if your clinic that does ReM, I'm going to ask you here to place in the chat. Do you typically do a to gain or insertion gain? What's your preference in terms of those measurements? Or do you even have a preference?

Maybe you don't. Either is fine for you, or maybe one of your clinical protocols dictates that they recommend one or another. Let me know. Any opinions on that?

All right, so not many opinions being shared here. Someone mentioned that they don't typically do REM, but if you do do REM and you do do auto REM, and you're either undecided in which that you'd rather use, or you use both, the good news is that we have both. Now, in the past, we've always had insertion gain measurements that would show on screen, insertion gain targets that would show on screen. And if you ever visited your REM session afterwards in NOAA, you would notice that there was an aided gain measurement and there was an aided response measurement, and it would show your

unaided gain curve. But on screen, during the auto-rem process, the only view that was shown was insertion gain.

But now we've actually introduced the aided gain view. So you can use either one. If you choose to use the aided gain, then you do not need to measure an unaided gain curve as that is required for an insertion gain measurement. So if you do not measure an unaided gain curve, the insertion gain measurement will be grayed out. But you can use the aided gain if that makes sense, because one is required for the other.

Aided gain does not require the unaided. The unaided curve, though, is nice. It's just a pulse check on what your probe tube is like. Make sure everything's functioning properly. There's no blockage in the tube.

Make sure it's placed, it's not pinched. It's still a nice tool, even if you're going to use aided gain, even though it's not actually part of the measurement calculation. I also added on the bottom here is a canadian audiologist article, and I think that this was worth reading because it kind of gave comparisons on a little discussion on why insertion gain measurements are available and what those are and what those bring to the table versus unaided gain measurements. So if you're having that dilemma in your head right now, this is a nice article that I think is definitely worth the read if you have time. So giving an idea on what that looks like here is you have the auto-rem screen.

This is the step four of auto REM. And there's a new toggle that we introduced highlighted there with the orange box. And this is the aided versus insertion gain toggle. And I just want to point out that this is that grayed out view where the insertion gain is grayed out because the unaided measurement did not take place in Step three. So just so you know what that looks like.

But if you did the unaided gain measurement, you have the freedom to switch between the two, and it'll look like that, sort of like that vent accommodation toggle below where it's in the rich black format, and you can go between.

All right, so now that we've gotten through the fitting items and the home screen, we're going to look at what's beyond the fitting software. So we're going to talk about some hardware solutions quickly. Is this mostly geared towards fitting software, since that is my baby here at GN hearing, but don't want to neglect the hardware. And we'll also talk about some great app solutions, which are kind of neat. And then finally we'll end in our quiz.

Okay, so talking about the non rechargeable customs, this is new. With this launch of software, we included the 312 zinc air batteries. So non rechargeable. The rechargeables already are on the market. And this is just a new hardware design.

So when you know you're taking out the rechargeable battery. We also took out the Mi radio. This offers the smallest version of this product because as we remove components, we're able to make the shell smaller. So it's great for a small design of the hearing aid. We're relying on the adaptive directionality and soft switching for directional solutions.

But even though we are taking out the Mi radio, which could defeature some of our directionality, we are still offering connectivity in the Bluetooth broadcast, and the MFI and Android connectivity and then the wireless accessories.

All right, so how to look at these different products, right, so we have the rechargeables now. And now the non rechargeables. So if you're looking at the lineup side by side, this is kind of how I think about it. So there's, I would just rank them by priority. So if you're really looking for somebody that is concerned with cosmetics and the goal is to get something small, I would definitely go for a CIC with the non

wireless, non rechargeable, obviously option.

It keeps it small. And if wireless is not a priority and the cosmetics are, if you're looking for a balance between the two, I would shoot for maybe something that is small yet connected, which would be the wireless 312. So, as I mentioned before, it gives you the connectivity, but it doesn't have all the bells and whistles because it keeps the hearing aid on the smaller side. Or if you're looking for all of the features, all of the connectivity, then if you offer the full featured rechargeable. So you have the rechargeability, you have all of the features.

You have that Mi radio. You have the connectivity to the outside accessories and phones and tablets, and it gives you kind of covers all the bases. But trade off is, of course, the larger size to accommodate all the radios and rechargeable battery.

All right, the next hardware solution is the cross compatible VTE. So we did launch the cross Rie with the last go. Now we are launching the BTE version of the CROs. So this is the CROs transmitter, and you can pair those up together. The BTE is.

You can pair those up together with a receiver. That's actually the rechargeable custom as well. So if you have a patient that's interested in having a receiver as a custom, but the transmitter as the transmitter, as the BTE, and then the custom as a receiver, then you can go ahead and do that with this solution. The BTE, they continue to have to go together, but the BTE has the flexibility with matching itself with the BTE or with the custom. And I see someone mentioned in the chat from the last slide, radio.

So I'm. I apologize for the acronym. It's the magnetic induction radio.

Okay, so we're talking about app now, and we did make some improvements. We have new accessories, so we have app improvements to go along with those new accessories. We launched the tv streamer plus before. Now we have the multi mic plus, and you can actually do the pairing in the app now, which is great. It really gives you a nice way to kind of, for me, at least double check what's going on with the pairing process.

With the accessory, everything's visible on screen. I know that we are always able to pair the accessories outside of the fitting software, but it could become a challenge if you're me and you have to put the hearing aid up to the ear, or you're relying on the patient to say, like, hey, did you hear those troubles? And the hearing aids, you might hear them and relying to make sure that they confirm that the pairing took place, or if you're actually asking the patient to do the pairing, then again, same sort of troubles that I have is did I hear the trill, listening to the hearing aid and making sure that it paired, and then I. Now you have visual confirmation. You can actually walk through a visual process to see that you're actually paired and that it was successful to both hearing aids, which is great.

Other app improvements are just the accessibility of seeing what's connected so you can actually pull up in this bar that says, I have its tv streamer that I named kids rumors in the kids room. I have a mic partner mic, which is a multi mic. Plus I have a tv streamer. This is my bedroom tv. So you're actually able to see everything that's paired, and then again, with visual confirmation, actually see what you're streaming from.

So you hit that play button that you see there for the accessory that you want to select, and it turns into the green squiggles. So I kind of always say when the squiggles are showing, the stream is flowing, so you know when it's playing. So if something's wrong and you're not hearing it, like the volume's turned down, you can at least see it's trying to stream and that you selected the right accessory. Before, we were relying on push button or maybe switching programs within the carousel of the cards on the app,

but now it becomes really easy to see the options you have available to you and then which ones you're actively streaming from. So I really, really like this option of the visual clarity of what everything is and what you're doing with it.

So you're able to now pair these accessories in the app. You're able to remove the accessories from the app, and you're able to start and stop the streaming from the app, which I think the more that you can see and less just relying on hope, the better it is for all of us. Okay, so we will get into our quiz. If there isn't any more questions, I'm going to just grab the chat real quick to make sure. And I do not see them here.

So I'll turn the video back on. We're getting towards the end, and we can walk through these questions.

All right, so just to do the journey in review, the home screen we started with was kind of about the screen itself and the design and the research. HCP input is hugely important to us. We do have audiologists, of course, working with us, but I always, again, like to say that we're kind of in a bubble and we're a little bit biased. So any input from HCP outside that is, like, in the grind is really, really important to us in our design, in bringing people things that they need, where they need them, in the fitting software. So that's the goal for the home screen.

The home screen really is a call to action, making the actions clear and then getting you what you need upfront beyond the connection flow outside of the session. And that's an ongoing journey for us that we'll be seeing with the home screen from now in releases to come, it's just bringing more functionality and flexibility outside where those things are most valuable, rather than hidden behind.

Now, moving into the fitting screen aspects, you can always go back to the home screen. So we showed how you get to and from the home screen when you're in the middle of a fitting session. MPO is your friend that it shouldn't be scary that even if you it's there more of just another advanced feature.

If you could think of it that way or another way to help the patient that might be complaining about like low audibility or distortion. It's something to look towards as a troubleshooting solution to get you through your fitting and get the patient hearing well.

The environmental optimizer is now turned on in the hear and noise program. So if you're fitting a lower end device or just really was wondering why that feature was off, we covered why that is. And now that it's actually turned on also that you can choose between insertion gain and aided gain and auto-rem. And then finally, some of the beyond software solutions we talked about were the non rechargeable custom and the new BTe transmitter for the cross. And then of course, the variety of app solutions.

So just having the flexibility to see everything in the app, giving more visual confirmation of what should or should not be happening and what you have paired or not.

All right. All right. So there is a question about battery powered, full shell and half shell customs. So I think the question is more about the size and do they all come in the non rechargeable option? And I will say yes, that you can, of course, with the caveat that I'm the software person, not the hardware person.

So I do believe that you can order any style in the non rechargeable. It's for all customs, not just. Not just the one that I was highLighting.

Okay. And another question about the cross BTE. So what can it be connected to? So this is how I like to think about the cross compatibility or really just hearing aid compatibility within our software. In general, if you think about detectable receiver devices and non detectable receiver devices, that's sort of a dividing line almost.

So a custom and a BTE are non detectable receivers, and then you have the detectable receivers in the Rie. So the RiE crosses can match up with each other. The BTE crosses can match up with each other. Although the BTE can also be paired with the chargeable custom. The rie cross transmitter cannot.

Okay. Okay. There's one more question. Cross compatible BTE slide says rechargeable custom. But the journey slide, which I think we're on right now.

Yes. Says non rechargeable. I'm sorry about that. So, okay, I see where this is confusing. Okay, so the two new hardware solutions are the non rechargeable customs is kind of like their own entity.

And then there's the cross. BTE is its own entity. So that's what the, that's being introduced in this launch. But in terms of them working together, we need the rechargeable custom to go with the BTE transmitter. I think that clarifies.

Right. Sorry about the phrasing of it on this slide. So the, we need the rechargeable to go for the cross.

All right, so if we move through the questions here, which you might see them again if you use the instrument MPO button. A, it's not possible to return to prescribed MPO. B. Output values for loud inputs will match the MPO always those with loudness sensitivities will become uncomfortable, or d, the allowance for the output is max of the instrument. However, with appropriately prescribed gains, it's most likely that will not be reached.

What's your guess for an answer for one?

All right, we have some shout outs for a. We have some shoutouts for d. It in fact is not a because it is possible to return to the prescribed MPO values, but it just takes a little bit of effort. It doesn't toggle

back and forth. You can return to them, but you will have to click in the gain grid with the arrow buttons.

So d is the correct answer.

All right, so instrument MPO button can be helpful to prevent distortion, particularly a when small receiver sizes perform or the output is nearing the prescribed MPO, b, when small receiver size preferred, or the compression is set to low, c for those who are fit with TSG or tinnitus sound generator or for all open fittings. All right, we have some shout outs for a. And that is correct.

So this could be the software solution if you are at your limits with your hardware.

All right, we're closing into the end of class, so let's get through these if possible. Question three. If in the hearing noise program, the patient reports audible gain shifting in calm environments, you can a, remove the hearing noise program immediately, b remind them to make sure to change from the hearing noise program if they're not in a dynamic or noisy environment, c, set the adjacent sliders to closer values, or D use b and or c.

You guys are good answers in for d. And that is correct. You can do either one or both to help them not experience that effect. Question four. BTE cross transmitter can now be used along with.

I think we kind of just went over this one, and I'm hoping you get it right because I hope I didn't confuse you with the wording on the slides. Can be used with another transmitter, so. Meaning two transmitters. B, a non rechargeable custom, and a c, another rechargeable or a product older than the Nexia family. Okay, good.

I think we straightened it out. Everyone is placing their votes for C. Great. Perfect.

All right, the new smart fit home screen is, sorry, part of a larger effort to put the fitting software on a tablet. Have only three buttons on the screen. Keep the installation size small or to bring elements to the front of the fitting that are more useful for flow. All right. D.

D. D. I c. D. Yes, d.

Perfect. auto-rem now offers the option to see what measurement during the target matching rechargeable, rechargeable custom targets, or rechargeable for target matching in step four.

All right, we have some A's. We have some D's. It turns out a is the answer. You can always measure an rechargeable no matter what. We've always been able to measure rechargeable, the new feature and the new toggle offers between Reagan and rechargeablean.

So the AG is the new feature. And then our final question here. Which app feature helps visualize the system's state and performance? Are there musical notes that show when you're streaming music? Is there green squiggly lines that are showing when the stream is flowing?

Or do you have a stop sign when you stop? Or is there an airplane when you switch to airplane mode?

All right, I see BBB. Yes. B. Squiggly lines are showing when the stream is flowing. Perfect.

Okay, I am 59 seconds over, but thank you so much for sticking with me and learning about software 2.0, and I hope you get a chance to use it and give some feedBack to your representatives or me or anyone. We certainly like to hear how you're liking and not liking the software. So thank you so much for joining today and hope you have some new tidBits to take back to your clinics and fittings. Thank you.