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Advanced Target Programming

Presenter: Haley Butler, AuD

All right, thank you so much. Thank you all for joining today for this Advanced target training. My name is Haley Butler. I am a clinical trainer employed by Phonak. I've been with Phonak for about two and a half years now.

I have no other financial or non financial disclosures for you today.

Here you'll see our learning objectives. So by the end of today's webinar, you should be able to explain how to perform advanced program adjustments in the Target software, list basic hearing aid programming complaints, as well as how to resolve those complaints, and then identify specific tools within the software that will help guide adjustments when the solution is not so obvious.

Now, when I was little, I was fascinated by my dad's toolbox. First of all, it was a pretty color, red, bright red. But when you first opened it, the top tray held everything that you would need to fix kind of your everyday problem. It had screwdrivers, pliers and a hammer. And these were things that we used all the time.

But if we lifted the top tray, below were tools with specialized uses. Maybe a plumber's wrench or chisels or vice grips. And so the Target software is kind of like the toolbox that you see here. We have tools that we're very familiar with using on a day to day basis. But then if we go a little bit deeper, we have some specialized tools for when things are a little bit more complex.

So today we're going to do a quick overview of the top tray tools. But then we're going to, then we're going to spend some time on things that you might be less familiar with and require a little bit more of a deep dive.

So this is our agenda for today. We are going to begin with an overview of the target software and then we're going to move on to some case studies and additional features within Target. And finally, excuse

me, we'll have time to wrap up and answer any questions that you may have. So feel free to put any questions into the chat and we will address those at the end.

Excuse me. So once you have the Target software open, it's ideal to look at the bottom of the screen and locate updates. And this is where you're going to see if there are any potential software updates. You can also find the target software on the Phonak store in the top ribbon. The label you'll look for is called Software Downloads.

And when installing the software, please note that only Phonak Target is required for programming. So it's going to give you the option of also downloading the Target media and the Target sounds. And while I do think those are great to download, they are optional. And this is true for both standalone Target or if you're programming through NOAA software. So whenever you're programming, and no matter where you are in the process of fitting, Target is always subdivided into three main sections.

You've got your client, your instruments, and your fitting tab. And so, as expected, each section has details about each topic. So under Client, you'll find client specific information that's important for an accurate fitting. So that might include their audiogram as well as any RECD values if you're working with pediatric patients. If you do tinnitus devices, you can also enter that information in the audiogram screen as well.

Next, under the Instruments tab, that's where you'll find the instrument connection functions, which provide you the ability to connect devices and review technical specifications. It also allows you to set up any acoustic parameters associated with your fitting. And then the third section, the fitting section is really everything about how the hearing aids are set within the software.

So when conducting a fitting, there are really five basic Connect, calibrate, customize, configure, and close. So let's chat about what might be involved in each of these steps. Step one is going to be to

simply connect the devices. So what you'll do is you'll remove the hearing aids from the charger that's going to power them on automatically and put them into a detection mode. Then you're going to click Connect at the top of the screen.

And you may notice that the connect button is highlighted in orange. And a general rule of thumb in the target software is anything highlighted in orange requires your attention. And this can help guide you through the general steps of getting through the software. But at any rate, you'll hit that connect button, it'll detect the hearing aids, and then you'll assign the aids to the appropriate side. Assign the aids to the appropriate side.

Fun little tip. If you press the button on the hearing aid, the serial number will actually flash green on the screen. And so if you don't have as good of eyes as some of the younger folks do, I'm not in that category anymore. You can just press that button and it'll highlight the hearing aid. And then you can see, oh, the right receiver's on it.

So this is the right hearing aid alternate. You can also click on the musical notes and that will play an audible signal and again allow you to identify that this is the right hearing aid versus the left.

Now, when you connect for a first fit, the system is going to let you choose between a long term user, experienced user or first time user. And the system will default depending on how long the patient has been in your system. Now, if you're working with aids that have previously been fit, the system will pop up and give you the option to reset to factory settings. It is okay to uncheck this and proceed. All identifying information, such as any Bluetooth, connections and whatnot will be cleared when a new fitting is created.

So go ahead and save yourself the time, uncheck that box and just move forward.

Now, after you connect the hearing aids to the software, it will automatically take you then to the acoustic parameters page. And here the system will check the receiver in case of a mismatch. So it'll notify you if hey, you've got standard receiver in the software, but it detects a moderate receiver on the hearing aid. Additionally, if you have a slim tip or a seashell and you've requested our AOV or acoustically optimized venting, then you'll need to enter the acoustic code on the screen. The code can be found in two different places.

It's actually printed on the earpiece itself or you can find it on the invoice. Now, anytime you see a black target or a bullseye, this indicates that this is the suggested choice for the fitting, taking into account the audiogram, the fitting formula and the device chosen. So if you're unsure, maybe what what earpiece to use on a patient or what power receiver to use, it's a great place to look and see which one has that bullseye next to it. Now, can you deviate from that? Absolutely.

But that bullseye is what the software recommends, again taking into account all of those parameters for that specific patient.

For steps two, three and four, you can navigate via the tabs moving left to right within the fitting session, or you can use the icons at the top. So if you follow those left to right, you'll hit everything that you need to hit. So there's essentially two ways to go about this. It's really whatever your preference is, using the tabs or using those quick buttons.

So for step two, we're going to calibrate the devices. So to recap, we've connected them and now we're going to calibrate. For phonak aids, you always want to run the feedback test, even if there's no acoustic feedback present. The measurement from this test is taking into account a lot of different things. It's taking into account ownvoice pickup during hands free phone calls.

It's measuring the estimated venting for the individual's ear and the acoustic coupling, as well as providing some data to inform some feature settings down the road. So for example, if you're fitting a patient with a sphere, these results will impact the strength of the spheric speech clarity feature. So always run this feedback test and again follow the orange within the software.

Once the feedback test is complete, if you need to adjust the curve to provide more headroom, simply use the over tuning controls. So the feedback test here that you see is beautiful. We've got nice headroom between the gain curves and that purple line. But if you do see that the feedback measurement is cutting into the gain curves, then feel free to use that over tuning. You'll notice that you can over tune separately for each ear.

So maybe one ear has a better fit, maybe it has a custom ear mold. You can leave that be and just adjust the other ear.

The third step is to customize. So we've connected, we've calibrated, now we're going to customize. And global tuning is where you can quickly adjust the overall gain level if your patient needs it. So I like to kind of ask the listener a close ended question about the comfort of the loudness of my speech. For example, I might say, you know, I'm talking to you in a normal tone of voice.

You shouldn't have to strain to hear me, nor should my voice be too loud, is that correct? Rather than kind of the quality of the speech, well, how does my voice sound? We want to identify kind of the volume of speech. So if the listener then needs the loudness suggested, then you can use the global tuning gain level slider to set it at the preferred loudness setting. So again we want to try to find that level at which they're not straining and it's not too loud.

It's essentially a comfortable volume.

Generally few changes are needed during the initial fit. With our new fitting formula found in Infineo APD 3.0, patients are really loving the sound and they're hearing well. So this tab is just to make adjustments to features and programs, which more often is going to happen during a follow up appointment as needed. And we'll go into these shortly.

The fourth step is configure. So we've connected, we've calibrated, we've customized and now we're going to configure. And you'll find that on the Device options tab. So here this is where patients are going to interact with their hearing aids. So maybe this is setting up tap control for your patient.

Maybe this is enabling the push button for volume adjustments or program change. And fun little tip. It can be really helpful to print out a customized report for your patient. So on the left hand side you'll see under services that reports option. And I really love this feature.

It does let you choose from multiple languages. It also lets you choose a larger font if there's any visual impairment. You can not only print it, but you can also email it as well. So it's about a four page report and again it's going to be customized and personalized to your patient and how those buttons are configured.

And if you choose, this is optional, but the Bluetooth tab of the device options allow you to personalize the Bluetooth name for your patient. And so this is how it's going to appear on the patient's phone after you paired it. So for example, rather than saying R Phonak hearing aid, you could change it to R Hailey Streaming and that is what would show up on the Bluetooth page.

And the fifth step is going to be to close.

So here you will in the top right corner you'll click save and close. And that is going to finalize the settings into the hearing aids. So do note that things do not save as you go. So in order to save any

adjustments you've made, you do need to save and close. And make sure you'll see that once saving is complete, you'll get a nice little check mark next to everything you can save the database and from there you can close the session.

So just to recap, that is our first fit in five, you connected the hearing aids, calibrated and ran the feedback test. Customize by setting that global tuning gain level to where it's a comfortable volume, configuring those device options and perhaps renaming their Bluetooth setting and then closing saving those changes. That's your fitting. You can easily do that in about five minutes. It's too easy.

So now we're going to come back to the fine tuning. Since so many fitting actions occur on this specific screen, I just want to run through each to kind of provide a quick overview. So the opening page is going to show you your GAIN and mpo. Get my little laser pointer here. So gain and npo and here you can choose how many handles you'd like the frequency range to be grouped into.

So if you need to make adjustments to just one aid, you can always decouple the two sides by clicking this as well. And then you can make right versus left adjustments. Now as a Reminder, during any fine tuning, whichever programs are highlighted in green on the left hand side is what you are going to make that change to. So right now if I were to make a change to gain an mpo, it would apply that change to all of those programs. Conversely, if I just wanted to make an adjustment to one program, I would select that program and only that would be green and I would then make my change.

Got ahead of myself there. So again, if you want to apply maybe that change to all of your automatic programs, you can select automatic programs or one specific program. You'll just select that at the bottom here you're going to see program options and this is going to adjust the sound cleaning features for each program. So we're going to discuss these shortly when looking at specific case studies. So stand by with that.

But here you can see the parameters that you have as a provider to make adjustments to. Now you might notice that these will slightly differ depending on the program. But in general you're adjusting your microphone directionality. You'll find speech enhancer in a calm situation. Sound relax, noise block, soft noise reduction, wind block.

Those are found in a lot of the programs. And then whistleblock is our second type of feedback management for those intermittent types of feedback. Maybe hugging someone or putting a hat on, for example.

Now in this third tab, audibility fine tuning, this is where it fine tunes only those areas that are applicable to a specific sound. So you can choose the sound type. In this example we have the male S sound and the graph is going to show you which frequencies and inputs are responsible for that sound. The darker the shading, the more effect it's going to have. Or, or yeah, especially the, the more responsible it will be at making that change.

So when you make the change, you'll see a bigger change happen in the darker shaded areas, but the lighter boxes are going to have a little bit less of a change.

The fourth tab that you see here is the SoundRecover 2 tab. This adjusts specific aspects of our frequency compression and we're going to learn more about this a little bit later as well.

The fourth tab, or excuse me, the fifth tab that you see here is automatic fine tuning. This is going to apply adjustments based upon specific categories. I want really love this feature. This allows you to select kind of a general complaint that your patient may have. Maybe it's with their own voice, maybe it's with background noise, maybe it's with music.

Over here you can select the specific issue. So maybe it's too loud, too tinny, too echoey. And then you can see what the recommendation is. And if you read that and say, hey, that makes sense, then you can hit fix issue and it'll apply that change. You can actually hit fix issue multiple times.

It might be more aggressive with this specific recommendation, or it might apply a different recommendation. And if you need to go back, you can always hit undo as well.

And then the last tab that you see here is our Tinnitus Balance tab. And this provides adjustments for for any active tinnitus masking sounds. Now, of note, your Tinnitus balance does need to be enabled in Global Tuning. There's a Tinnitus Balance tab down there, and that is where you would find your options for set to hearing loss. Set to white noise, set to pink noise, and you can make some broad global adjustments.

But here in the Fine Tuning tab with Tinnitus Balance, this is where you can really shape that tinnitus balance as you see fit.

So those are kind of the everyday tools that we have in our toolbox. But next, let's look at a few case studies to see how we can put them to use to address some of those common and maybe some of those uncommon patient complaints.

All right, so for our first case study, we have the complaint of my own voice sounds. Funny, man, if I had a quarter for every time that I heard that over the years, I would probably have a full piggy bank. But we know that their own voice is one of the first things that patients notice as they're suddenly hearing themselves through the hearing aids. And then when we put something in their ear, we are partially occluding their ear, and that's trapping some of sound in their own head. So let's examine a couple ways that we might address this complaint.

First, we might consider changing the acoustic parameters. Now, keep in mind, if you change this, you're going to need to rerun your feedback test, and it's then going to prompt you to recalculate target. So just keep that in mind. But let's say in this example, we initially had it set as a power dome, and we change it to a vented dome to allow a little bit more natural neutral sound to come in. Then you again will rerun your feedback test and recalculate your settings.

A second tactic is the occlusion compensation that you'll find within the Global Tuning tab. This is essentially going to reduce gain for your low frequencies and more so for the loud outputs. As you see on the graph, because of the area affected, this feature makes more noticeable changes to more occluded fittings. So if your patient has custom hearing aids or standard ear molds, it's going to have a greater effect. I recommend if you try adjusting this, go from off to strong just to see if that has an effect.

And if it does, if the patient reports an improvement, you know you're chasing the right rabbit. And then from there I would find the least amount that you can do that would be satisfactory for the patient. Conversely, if you change this from off to strong and it has no effect for the patient, then we know that it's probably something else, maybe the fit of the device, maybe we need to change the earpiece and try something different.

Automatic fine tuning can be a useful tool as well, both for patients who have trouble articulating what they're experiencing and as well as for you to give you a quick way to make some changes. And so this is really one of my favorite tools to use with invoice complaints. So in the automatic fine tuning, you can select the problematic event or environment. Excuse me. So in this case we've got own voice and then you can choose the issue, kind of what is wrong.

And so in this case we're choosing hollow and boomy. Again, you can see what the recommendation is. It's suggesting reducing gain, especially at the low frequencies. And you can then hit fix issue.

You can see on the graph here what is changing on the screen. So the lightly shaded area is the target gain and the darker shaded area is the current setting. So if that change did not improve the situation, I would hit undo and perhaps try something else.

Moving on to our second case study. The report is speech is loud enough, but I can't understand. So it's not a volume issue, but it's more of a clarity issue. Now the first thing though that I would double check is to see what their current gain level is. Are they only maybe at 80% because you selected new user or 90% because you selected, you know, semi experienced?

Well, maybe they've acclimated to sound and they're ready to move up, which is going to give them more volume but also give them more clarity as well.

You can also take a look at their Sound Recover two settings to see if they're losing any high frequency audibility due to the degree or configuration of their hearing loss. I love how adaptive sound recover 2 is and I want to spend a little bit of time reviewing how it works. So this is what it looks like in the target Software. You see CT1 with this solid line and CT2 with this dashed line. The area below CT1 is always left alone and there's no compression.

So this region here, there's no compression occurring, whereas the area above the dotted line or CT2, it is always receiving compression. This is what we call fixed compression. Now, the area between those two lines is an adaptive area. And what happens there is really dependent on the input signal. So if the signal had high frequency energy like a F or an S or a th sound, then compression will extend through the adaptive area as you see here.

However, if the signal is more low or mid frequency weighted, like you would expect from our vowel sounds, then the compression will stop at CT2 and the adaptive area remains unchanged. So here you'll see this high frequency sound is being compressed down into the adaptive area and the fixed

area. Here we've got the low frequency dominant, and so it's being compressed just in the fixed area, but we're leaving that adaptive area unchanged.

Now, sound recover is continuously and instantaneously adapting in this way based on the distribution of the energy of that input signal. And it's determining where the starting point of compression is at any single moment in time.

Now, you have two sliders here. You've got your audibility and distinction slider as well as your clarity and comfort slider. And what I Love is that SoundRecover 2 is extremely flexible. So between these two sliders, there's actually 80 different possible configurations. Now, if a patient isn't hearing high frequency sounds like the S and the sh, then moving the slider towards audibility is going to make sound recover 2 stronger.

If they are hearing the sounds but they're having a hard time distinguishing them, maybe everything sounds lispy, then you might want to move the slider towards distinction. And this is going to then create more separation between the S and the sh. And if you're checking during verification, the s and the sh should have 1/3 octave between them. Now, let's say we found that sweet spot. We found the sweet spot of the S and the SH are both audible to the patient and they're distinguishable.

They can clearly tell when I say sea shells, they can distinguish that difference. But let's say that they tell you that things just aren't quite right. Or maybe vowels seem a little bit off, or maybe you're just still too lispy and it sounds very unnatural. You can then adjust this clarity versus Comfort slider. Adjusting this to the right will shift your CT2, changing the proportion of the adaptive and fixed areas.

So when I bring this to the right, I am going to change this fixed region, and it's going to become smaller, as you see here. So essentially there's going to be less compression happening. As a side note, if you move all the way to comfort, go back and double check that your audibility and your

distinction is still there. So just one thing to know that adjusting this could have an effect on this.

Typically, in my personal experience, I find the target symbol, what the software recommends is spot on.

Maybe if I have to adjust it, it's one step to the left or the right. Same thing here. If I have to adjust it, it might be to be one spot to the right. Rarely should you be making any really big adjustments to either of these sliders.

All right, moving on to the third case study. I have trouble in noise. I'm sure you've all heard that before, right? And that's because this is one of the top priorities that many patients have. They want to hear better in noisy environments.

One of my favorite things about the Phonak software is the flexibility that we give you as providers to make really targeted adjustments to address where the patient has concerns. The aid automatically utilizes directionality, advanced processing and comfort features in a very multifaceted approach. And these all live in the program options tab of the fine tuning page. So let's take a look at that further.

So when a patient reports trouble and noise, it's imperative that we ask some follow up clarifying questions. So here we're in speech and noise and program options.

So one thing that we might want to say is, you know, can you describe the noise? What does it sound like? And maybe to them the noise is the dog barking or maybe it's dishes clattering. And so for that type of noise sound, relax is going to be the best option. And that's going to allow you to kind of cushion those sounds with a faster attack time while still unaffected speech.

You'll see here that it defaults to weakness. You could bring that up to maybe 12 and adjust it to moderate. Now, of note, we usually recommend baby steps, not large steps. The reason for that is

because some of these programs that you see here in our automatic setting are blending. And so we want to make sure that there's no stark differences between these programs.

Now, if the noise that they're referring to is more of a general restaurant noise, or maybe it's road noise, the noise block is going to look and see what channels have noise present, and then it's going to reduce that noise. Now, maybe for the patient, the noise means, oh, well, my, my air conditioner fan is kicking on or I hear the hum of my computer. In that case, soft noise reduction slider is in a is going to adjust how much gain is being applied for those soft ambient sounds. Essentially, when you adjust soft noise reduction, this is shifting your TK or threshold midpoint. For those of you who have been fitting Phonak for a while, I believe it was with Belong and previous we used to have a tab here that was your your G30 or TK.

We've now essentially hidden that in soft noise reduction to try to make it a little bit more intu or maybe for your patient. The noise is actually related to wind noise while working outside. And so with wind block, when it's activated, it's going to decrease those low frequency sounds when noise from the turbulence of wind is going to be detected. So decreasing your low frequencies but still maintaining those high frequencies for good speech clarity. So if your neighbor comes over to talk to you or you're outside golfing with some friends, you're still able to hold those conversations.

Now, in regards to directionality, the speech and noise program is using Ultra Zoom. And a good little tip, anytime you see Zoom in the software, it's referring to that directionality. So Speech and noise is using Ultra Zoom speech and Loud noise is utilizing our stereo zoom 2.0 and stereo zoom 2.0 is our adaptive binaural beamformer. So both all four microphones are working together for a four microphone system. And that allows us to even further narrow that microphone directionality for those really loud noisy environments.

Now, both these programs also use dynamic noise cancellation, which is a spatial noise canceller that is trying to provide extra noise reduction from the sides and the rear. So keep in mind, dynamic noise cancellation is working in conjunction with noise block. And fun fact, patients can actually adjust both of these real time in the MyPhonak app. So once they maybe they're in Autosense or maybe they go into a the restaurant program. If they go to kind of the advanced features, you'll see the slider for speech focus and it goes from wide to narrow.

That is them directly adjusting either Ultra Zoom or Stereo Zoom 2.0, depending on the setting that they're in. And then if they adjust noise reduction, it goes from low to high, that is them adjusting dynamic noise cancellation. Now of note, dynamic noise cancellation is more of a premium feature. So you'll find that in our 70 and 90 level technology. Actually same thing for Stereozoom 2 as well.

In lower levels of technology, for example, this would actually be adjusting the noise Block setting when DNC is not available.

Now, our new Audeo Infineo. Excuse me, Our new Audeo Sphere Infineo devices are utilizing a new feature called Spheric Speech Clarity. Spheric Speech Clarity is a denoising system powered by our proprietary Deep Sonic chip. This chip is utilizing a deep Neural network, or a DNN that is designed to separate speech from noise in real time, regardless of the direction of the noise or the direction of the speech. It really differs from traditional noise reduction technology which still relies on directional microphones.

So let's take a look at this a little bit further. So in the real world, using spirit speech clarity means that speech and noise can be separated like never before. And the sound is truly quite amazing. Some companies try to fit this type of processing onto their main chip that is managing everything else, but they face the limits of space size and power needs. It took the power of Phonak to make something completely new and different.

And the proof is in the hearing and how patients are doing in those loud, noisy environments. Only by having a separate chip can we achieve the breadth and depth of function to give the level of this benefit.

So one of the unique things with the software is that you can adjust the activation level for both speech and loud noise that you'll find in our Infineo IR devices, as well as the Spheric speech in loud noise that you'll find in our Sphere devices. So whichever one is part of the AutoSense program, let me give you an example of when this might be useful. So maybe you have a patient who's in premium hearing aids and they're really excited to experience the improved speech intelligibility and reduce listening effort that comes with our Stereo Zoom and our speech and loud noise program. And let's say they come back for their follow up and they report that they're in loud noise a lot, but they're not really noticing a difference. You, being a very savvy investigator, can connect their hearing aids and open up the data logging.

And when you look at the program activity, you notice that the amount of time it's switching into speech and loud noise is only 2% of the. Now, it doesn't mean that your patient is lying. They very well are in loud noise. It just means that what they perceive as loud noise is different than the criteria for the hearing aid to go into this loud noise program.

And so you can then come into the fine tuning screen and click on the header of autosense. So a lot of times people try to click Here, but you actually click on Autosense and then go into program options. And when you do, it'll take you to the screen here that allows you to adjust the activation level.

So the default is always going to be at 10. This is going to equate to about 69dB split of background noise, which is actually pretty loud. So when the Hearing aid detects 69dB SPL of noise plus conversational speech, it will automatically kick into this program. But you can change this slider. And

this is one exception to what I said earlier.

I recommend if you adjust this, bring this slider all the way to zero. So again, usually we recommend small baby steps. But here, if you bring this slider to zero, this will have it kick in at 66dB SPL. So this is about a 3dB difference. So if you're going to adjust this, bring this to zero, and then it will kick in at that lower threshold level and should effectively kick in more frequently for your patient.

Now, if the patient comes back and you look at their data logging and it's still not logging as much time as you think, again, it just means that what the patient is perceiving as loud is not meeting that criteria of 66 db spl plus the presence of speech. So from there, you could choose to add a manual program and give the patient the flexibility to manually go into it via their push button or in the app and access that stereozoom technology.

All right, our next case study here, it sounds like the hearing aid is fading in and out or shutting down. The first thing to look at in a situation like this is actually with your npo, the patient may be hearing the compression, and so raising the MPO will help keep that from happening. To see the MPO on the graph display, you're going to want to be an output view. So I know a lot of people tend to prefer gain view, which is a nice view, but output is going to show you this black line here, which is going to be your NPO curve.

Another thing to check is to compare the gain and program options between the different programs in Autosense. So if, for example, the calm program has noise block set at 8, and then here you see the speech and noise program. Noise block is set at 20. As the AIDS are blending and shifting between programs, that shift is going to be more noticeable to the patient. It's going to be more of a stark difference.

So this is why I suggested earlier you kind of want to take baby steps. So that way there's minimal differences between those programs and Then, same thing. You can check GAIN and mpo and just make sure as you're going through these different automatic programs, there's no stark differences between the gain.

You can also come back to this behind the scenes by coming into their fine tuning screen clicking again on autosense and program options where we just were for that activation level. And here you'll find that we have the program transition speed.

And so if the patient feels like maybe they're having to wait too long for the hearing aids to adjust, then you can move the slider from blended or balanced, which is what it will always default to, to fast or very fast. So this is typically what I recommend for someone who is, you know, going in and out of different types of rooms or different types of environments, and they really need that hearing aid to kind of keep up with their fast changing environments.

And then if you need it to slow down for whatever reason, maybe you've got an elderly patient, they've got a little bit of cognitive slowing, and you just want it to be a little bit slow, slower of a transition, then that is an option as well.

And again, this is also where you'll find that activation level.

Right. Next case study. It's hard to hear my companion when streaming. Or can I turn down outside noise when I'm streaming? We are a connected society with many things to watch and listen to.

As you all know, streaming, whether it be the TV streamer or maybe directly from Bluetooth devices like their cell phone, is really a high priority for a lot of patients and they might feel the need to adjust the stream sound relative to their surroundings. So let's take a look at that in the target software.

So here you'll see our autosense streaming. So these are stream signals coming from your phone, your tablet, maybe your TV connector, for example. And so while they're streaming, you'll see that the hearing aid microphone is enabled with a zero db attenuation. And so this is the default so that users can stream but still have that environmental awareness. Now, if they tell you, well, you know, when I'm in Starbucks, I'm just picking up all that Starbucks noise and I don't want to hear the Frappuccino machine and I don't want to hear their conversation, well, then you can certainly choose to attenuate that hearing aid microphone or disable the microphone altogether.

The user also has the ability to adjust the sensitivity balance between the hearing aid microphone and the stream signal. And this can be adjusted real time by the patient, either via the rocker switch or in The Myphonak app. So, for example, I'm in that Starbucks scene. I'm wanting to, you know, stream music into my hearing aids and I don't want to hear all the Starbucks noise. I can go to my push button and I can turn up the device or volume up.

That's going to turn up the volume of the streaming and it's going to turn down the attenuation from the microphone. So I'm hearing less in the environment. Conversely, if I want more environmental awareness, I can turn down the streaming and that will turn up the microphones. I do think it's a little bit more intuitive in the app. So while they're streaming, they'll have the option for ambient balance and they can choose to hear more of the stream signal and go towards audio, or they can choose to hear more of their surroundings.

This came up trying to think of an example. Gentleman was mowing the lawn and he was wanting to listen to his music. And of course we always say, well, you need to wear hearing protection, but a lot of people like to listen to music while they're mowing the lawn. And so he wanted to be able to turn up that audio so he was hearing less of his surrounding. And so that would be a great option there.

All right, and so to wrap up this morning, we're going to take a deeper look into the toolbox at some of the lesser known but really useful tools in the target software. And my favorite is the training session. I did not know about this. I was in clinic for nine years in a university setting, so I worked a lot with students and I would have loved to know this. So if we look at the target software, you open up a client or a patient, it'll bring you to this main page here.

And you're used to seeing this new fitting session. There's a little drop down arrow next to it that says new training session. When you click that, it allows you to essentially simulate any fitting. So you can choose any hearing aid you want, old, new, any level of technology. You can choose any earpiece, you can make all the adjustments that you want.

It's not going to save the session in the software. So it's great. If you are just wanting to kind of familiarize with target, play around a little bit, you know, do a training with a student, for example, but then not have it saved to the client's database.

Another really great tool is audiogramdirect. And audiogramdirect enables you as a hearing care professional, to test the client's hearing directly through their hearing instrument. So it's essentially our in situ testing. It is designed to provide a fast and accurate starting point for the fitting process. It's important to remember that audiogramdirect is to be used as a part of the fitting process.

It is not the same as a standard clinical audiological test.

So here you'll see the audiogram direct is in the fitting tab. It's right next to the feedback test. You'll simply click Start. It'll remind you for the best results, you do want the feedback test to be run first and then you'll confirm the coupling of the hearing aid. You don't need to occlude the patient's ear.

You can use kind of whatever they are wearing, whatever earpiece, and then from there you can proceed to the testing screen. So the arrow buttons will move between the different frequencies and intensity levels. The space bar can be used to. You could either click on the screen or you can use the space bar to present the tone and then hit enter to save. Does require you to do the core frequencies of 500, 1000, 2000 and 4000.

Personally, if you're here, I just recommend doing all of them and because sometimes it can make a slight difference if you do measure 250. So, yeah, just do them all if you can. You also have the ability to test UCLs too. And so you can switch from ear conduction to ucl. If you need to mark a threshold as an R, you can simply right click and choose no response.

Once you've completed audiogramdirect, the software will use that measurement to set targets. And you can see at a glance if the an audiogramdirect test is being used by the.

Let's see here. Yeah, so this will show you that it's using the audiogram directly, but then the dotted line below is using the audiogram. And here you can see with this ad that we are using audiogram direct for that right ear.

I'll be honest with you, I didn't use this very often, but one time I could see this being very helpful. Is for those who maybe have fluctuating hearing loss. Maybe you have a patient who has chronic ear infections and they come in and they say, oh, I've got an ear infection, my hearing's down today. It's taken me three weeks to get in with the ent. Can you readjust my hearing aids?

Well, rather than having to schedule them for a full audiogram or making sure there's a booth available, you can do a quick in situ test that's going to get them by until they see the emt, for example, or maybe if they have Meniere's disease and they've got that fluctuating hearing loss and they say, hey, turn it up, turn it up, turn it up. And you're like, what the heck? You can do a little in situ test and see where their

hearing is at that day and then decide from there if you need to maybe schedule them for a hearing test or kind of what the best option is. Moving forward.

Another tool that we have is Target Match. And this is our integrated verification tool. This is a step by step workflow that seamlessly guides you through the verification and real ear fitting process. So in the automated setting, the process is straightforward and you only have to manage one software and that's with Phonak Target. So Phonak Target integrates with Real Ear measurement software, thus keeping the same look and feel that you already know.

And it guides the measurement device and uses the measurements to automatically adjust the hearing aid to match your targets.

So if you have compatible equipment, once you're set up, you'll find a tab for Target Match down here within the global tuning page. Okay, so your, your next question is, well, how do I know if I have compatible equipment? Great question. Here you will see the compatible real ear systems. So if you see one of these listed here and you have it, then it is compatible.

Feel free to reach out to your clinical trainer or our software support team and we can do a little training to make sure that everything is set up and kind of walk you through the steps of how to complete Target Match. But it's really, really fairly simple.

Next we have Client View. Client View is often a lot of people don't know about Client View. And again, I'll be honest, until I joined Phonak, I didn't know about it, but it is an option that you can activate and display on a sample second screen. The Real time display is going to use the microphone on the hearing aid to create an estimate of audibility relative to the patient's hearing thresholds. You can show both unaided and aided and this is a really impactful way to demonstrate benefit and audibility to both hearing aid users, but also family and caretakers.

So I'm going to play a little video here and it'll be about 35 seconds. Okay, we've just opened up Client View and here we show the hearing loss. We can tap click these to have them show and right now we are in unaided. So it's showing the sound being picked up at the microphone of the hearing aids. But when we show aided, then it shows the difference that the hearing aids are projecting to give.

So this is based on the values that are shown in the table view. And so that can be a nice counseling tool.

Yes, we love counseling tools. Okay, we've just opened up client view. All right, next is the AB comparison. And so this tool allows you to easily compare one setting to another when making multiple adjustments for a patient. So for the setup within the tab label for fine tuning, you will actually see a little AB and a camera icon.

So you set up your first comparison condition. So you're going to set your gain settings and then you'll click the camera to capture a snapshot of the current settings. And you can name it anything you want. You can name it high frequencies plus 3. You can name it, you know, Patient Comfortable, whatever you want.

And then you're going to. And then you'll set up your second comparison condition. So maybe you'll make another change and take another picture and call it high frequencies minus 6dB or patient uncomfortable, or again, whatever you want. And then you can click this little AB icon.

From there, when you open the AB comparison, whatever the current settings are in the target software is what you're going to see on the right hand side.

On the left, this is where you can choose what you want to compare. So you can choose from a snapshot that you took that day. But what I really love about this is you can also choose an older session. So maybe the patient comes in and says, well, I think I liked the settings at the last appointment better, or I like the settings at the fitting appointment. You can click that and it will show you a list of the previous sessions where they had something saved to the hearing aids.

So again, B is always what's most recent. That's what's in the target software. And then A is what you're comparing it to, whether that be a snapshot you took that day or an older session. And you can hit activate to kind of go back and forth between these two sound scenes and decide which the patient prefers the most if need be. You also have the media player available here if you want to use it during comparison.

So for example, if you're trying to isolate one of the speech and noise programs and see how well it does at background noise, then you can choose party noise to simulate that environment. Now, once the patient has said, you know, I really like this one, for example, then you can hit select and say, I want to apply that change. To all of the programs or just the current program. And when I say current program in this example, that would be calm situation. In most cases you're going to want to choose to apply it to all programs, but you can certainly choose as you see fit.

All right, I am going to jump ahead a little bit to kind of wrap things up. So kind of as the final word here, I want to remind you to not underestimate the power of recalculating to target. So with more involved patients, it is easy just by making small changes over the course of multiple sessions to really lose track of where you are and what you've done. In some cases, maybe you've done too much throughout. And so by clicking the little recalculate button in Target that you see here, it allows you to recalculate your fine tuning so you're gaining mpo.

You can also choose to reset your program options or maybe you just want to reset your fine tuning. You can uncheck this box and leave the program options the same. But truthfully, sometimes restarting over is kind of the best, the best remedy for some patient complaints.

So with target fitting software you have the whole toolbox. You have controls for a streamlined first fit and everyday solutions as well as some of those more specialized tools for some of those complex needs. And we didn't even cover everything today, believe it or not. But with the software there's always more to learn. So please feel free to reach out to your clinical trainer or to your account manager if you'd like additional training.

And we're always happy to help because we know that together we change lives. Lives. So I thank you guys so much for your time today. I know that was a lot of content. I am just going to double check the chat and I am not seeing anything.

And so with that I'm going to go ahead and conclude this training again. If you have follow up questions or would like additional questions training, reach out to your Phonak team. Thank you so much for joining. I hope you all have a wonderful day.