

Recognize, re-evaluate, refer.

If your patient still struggles to hear with their hearing aids, administer a hearing test and refer for a cochlear implant evaluation if they meet this criteria.[1*]

60

greater than or equal to 60 dB in the better ear

Audibility

Pure Tone Average
(500, 1000, 2000 Hz)

For ***single-side deafness***, the criteria are 80/30 instead (≥80 dB in the poor ear and ≤30 dB in the good ear)[2]

No referral is a bad referral. Even if a patient is not deemed a candidate, it provides a baseline for future testing. **90% of eligible patients are not referred.**[3] You have the power to change this.

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Recognize when it's time to refer.

Speech clarity not improved with hearing aid use

Relies on family members to call your practice or speak for them during appointments

Background noise dramatically affects their understanding of speech

Needs to see your face or mouth to understand you when you speak

1. Zwolan, T. A., Schvartz-Leyzac, K. C., & Pleasant, T. (2020). Development of a 60/60 guideline for referring adults for a traditional cochlear implant candidacy evaluation. Otology & Neurotology, 41(7), 895–900. https://doi.org/10.1097/MAO.0000000000002664.
2. Dillon, M. T., Kocharyan, A., Daher, G. S., Carlson, M. L., Shapiro, W. H., Snapp, H. A., & Firszt, J. B. (2022). American Cochlear Implant Alliance task force guidelines for clinical assessment and management of adult cochlear implantation for single-sided deafness. Ear and Hearing, 43(6), 1605–1619. https://doi.org/10.1097/AUD.0000000000001260.
3. Swords, C., Ghedia, R., Blanchford, H., Arwyn-Jones, J., Heward, E., Milinis, K., Hardman, J., Smith, M. E., Bance, M., Muzaffar, J., & INTEGRATE (2024). Socioeconomic and ethnic disparities associated with access to cochlear implantation for severe-to-profound hearing loss: A multicentre observational study of UK adults. PLoS medicine, 21(4), e1004296. https://doi.org/10.1371/journal.pmed.1004296.

*This provides a recommendation only of when an adult may be referred for a cochlear implant evaluation, but does not guarantee candidacy based on indications. (Only for adults).

The content of this guideline is intended as a guide for information purposes only and does not replace or remove clinical judgment or the professional care and duty necessary for each specific recipient case.

Clinical care carried out in accordance with this guideline should be provided within the context of locally available resources, expertise, and standards of care and practice.

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