

Subject: Automated Audiometry

1 Whereas, automated audiometry may serve as a cost-effective, efficient, and standardized
2 method for screening and monitoring hearing loss, and

3 Whereas, automation of audiologic tests have been incorporated into physiologic measures of
4 assessment including immittance testing, auditory brainstem response (ABR), and otoacoustic
5 emissions (OAEs), and

6 Whereas, audiologists want to ensure accessibility of high-quality audiologic services to meet the
7 continuously expanding needs of patients requiring hearing evaluations, and

8 Whereas, automated audiometry is currently being utilized by military and industrial audiology
9 for the purposes of screening and monitoring hearing loss, and

10 Whereas, automated audiometry systems that have been appropriately validated through
11 independent research may be utilized for audiologic screening and monitoring, and

12 Whereas, audiologists are uniquely qualified to provide services related to the prevention of
13 hearing loss, and diagnosis, identification, assessment, and nonmedical treatments of
14 impairments of auditory and balance function, and

15 Whereas, automated audiometry systems are emerging but the clinical efficacy, validity, and
16 reliability is not well established or documented in peer-reviewed literature to date, and

17 Whereas, physicians and audiologists both rely on the accuracy of audiologic testing for
18 treatment and management decisions, and

19 Whereas, a comprehensive diagnostic audiologic evaluation, performed by a licensed
20 audiologist, is recommended prior to medical, surgical and/or rehabilitative interventions, and

21 Whereas, CPT Category III codes, which are temporary codes used for data collection for
22 emerging technology, should be utilized when billing claims for automated audiometry, and

23 Whereas, a comprehensive audiologic evaluation involves not only the measurement of
24 frequency specific stimuli but should also include a thorough case history, otoscopy, measures of
25 physiologic function of the auditory system and auditory function including the reception,
26 recognition, processing, interpretation of speech, and monitoring of external factors, and

27 Whereas, automated audiometry may not be appropriate for many patient populations including
28 pediatrics or persons with physical and/or cognitive impairment as they may be unable to reliably
29 complete automated testing, and

30 Whereas, thorough audiologic evaluations are only one of the components performed to
31 determine candidacy for amplification, assistive listening devices and cochlear implants and
32 other issues such as physical, cognitive, social, emotional, medical and lifestyle attributes must
33 be considered.

34 **RESOLVED**, the American Academy of Audiology supports the use of automated audiometry
35 for the purposes of screening and monitoring of hearing loss with those systems that have been
36 validated by independent research, and

37 **RESOLVED**, at this time there is not sufficient evidence to support the use of automated
38 audiometry as a replacement for comprehensive audiologic evaluations completed by an
39 audiologist for the purpose of diagnosing hearing and balance disorders and determining medical
40 treatment and/or audiological management, and

41 **RESOLVED**, the American Academy of Audiology supports the ongoing research,
42 development, and validation of automated audiometry systems for potential future use in
43 achieving quality health care, and

44 **RESOLVED**, if/when automated audiometry is implemented, caution should be taken to ensure
45 accuracy and reliability of results and testing should always be overseen and interpreted by an
46 audiologist.

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