

ON-SITE AUDIOLOGY SERVICES

CHOOSING THE RIGHT AUDIOLOGY SERVICE PROVIDER IS ONE OF THE MOST IMPORTANT DECISIONS YOU CAN MAKE FOR YOUR RESIDENTS



Services are covered by Medicare, Medicaid and other Major Insurance carriers



ABOUT US

We are a 501(c)(3) Non-Profit Foundation dedicated to improving hearing care accessibility for seniors, hearing health advocacy and education. ABHF is especially concerned about seniors with undiagnosed and untreated hearing loss.

Our Audiologists and Dispensers are licensed professionals who specialize in the diagnosis, treatment and care of patients who have a hearing loss. Our mission is to provide the most complete, efficient and caring audiology services possible. We offer a comprehensive array of services including cerumen (ear wax) removal, hearing loss prevention, and hearing rehabilitation to include hearing aids and assistive listening systems. Our goal is to improve the quality of life for people with hearing loss and to improve the ability for family and healthcare professionals to care for and provide quality health care services.

OUR DOCTORS of AUDIOLOGY (Au.D)



Our Illinois Board certified Doctors of Audiology are licensed and certified by the State. The Doctor will schedule regular visits to your facility usually a minimum of once per month on the same day each month and is available to provide hearing health to all your residents. They coordinate with your staff to identify and screen residents who need to be seen and will confirm with your staff 3 days prior to the visit the residents that need to be seen.

OUR LICENSED DISPENSERS

Our State licensed and certified Dispensers will visit the facility on an as needed basis based on the residents who are prescribed hearing aids as part of their hearing rehabilitation. The intent is to provide the instrument as quickly as possible to provide maximum benefit for the individual.



WHAT IS AUDITORY DEPRIVATION?

When the human ear loses its ability to detect certain sounds, the brain loses its ability to understand those sounds. In effect, the ear is not being “exercised” and the brain “forgets” its ability to interpret and understand those sounds. This is Auditory Deprivation. The longer hearing loss is undiagnosed and untreated, the worse the effects of this deprivation can be. Rarely is hearing loss irreversible but total recovery is equally rare. Hearing instruments can decrease and in many cases can substantially reverse auditory deprivation. Hearing instruments provide stimulation or “exercise” for the brain to relearn how to interpret and understand sounds. Like other rehabilitation efforts, the sooner the individual begins to use hearing instruments the better the results will be.

NCOA STUDY DEBUNKS HEARING LOSS AS HARMLESS CONDITION

"This study debunks the myth that hearing loss in older persons is a harmless condition," said James Firman, Ed.D., president and CEO of The National Council on the Aging. The survey of 2,300 hearing impaired adults age 50 and older found that those with untreated hearing loss were more likely to report depression, anxiety, and paranoia and were less likely to participate in organized social activities, compared to those who wear hearing aids. The study was conducted by Seniors Research Group, an alliance between NCOA and Market Strategies Inc.



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UNTREATED HEARING LOSS LINKED TO DEMENTIA AND ALZHEIMER'S

Older adults with untreated hearing loss appear more likely to develop dementia, and their risk increases as hearing loss becomes more severe, according to a report in the February issue of Archives of Neurology, one of the JAMA/Archives journals. The Study done by Dr. Frank Lin, M.D. from the Johns Hopkins University School of Medicine and researchers from the National Institute on Aging compared normal hearing participants with those with untreated hearing loss. Those with mild, moderate, and severe hearing loss had two-times, three-times, and five-times greater risk of developing dementia over time. In fact, the study found the greater the hearing loss; the higher the risk of developing the disease.

The research could lead to new ways of warding off dementia, a problem that affects millions of people around the world and brings with it heavy societal burdens, say the researchers. According to Dr. Lin, "a hearing aid could help postpone or prevent dementia".

NEUROPLASTICITY AND HEARING LOSS

When the brain loses the stimulation it gets from normal hearing, that section of the brain assigned to use "auditory stimulation" will be reassigned to be used for other functions. The brain neuron structure is "plastic" and will reshape itself based on stimulus availability. When hearing aids are used to increase aural stimulation, there is a period of time required for the brain to reshape itself and to reestablish neural pathways to utilize the renewed aural stimulation provided by the hearing aids. The longer the individual has been without normal stimulation; the longer it takes to reestablish neural pathways. Most residents will require regular and continued use of the hearing instruments to obtain the best results. The brain must be given regular and consistent aural stimulation in order for the neural pathways to be reestablished effectively.



AUDIOLOGICAL PROCEDURES

Prior to Testing: We will need a census and an initial list of residents to be screened for hearing loss. Our staff or the facility can do the screening. For those residents who do not pass the screening, we will need a Physician's order for a hearing evaluation. On subsequent visits the Doctor will identify the patients to be tested and their assistant will do additional screenings for future visits.

Day of Testing: We will need a fairly quiet room without interruptions. Occasional help may be requested to locate and move patients to the testing area. We will not have more than one person waiting at a time. The Doctor will perform a complete evaluation including wax removal, Tympanometry, and diagnostic testing. Patient reports will be left at the facility and flagged in the patient charts or as requested.

Rehabilitation and Instrumentation: Prior to dispensing hearing aids and instruments, the State requires that we have a written Physician order signed by the Physician for the hearing aid evaluation and treatment. We will request the orders from the physician and may ask for assistance from time to time. Family members are welcome to be present. Any necessary follow-up care will be provided at subsequent visits. Medicaid hearing aids are provided at no cost to the residents or their families. Discussions concerning co-payments or private pay patients will take place before the instruments are ordered.

Billing: The facility is not billed for services or instruments provided. All billing is done by ABHF to the appropriate carrier or the appropriate private entity.



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HEARING LOSS FAQ'S

Do we lose our hearing as we age? It is true that most people experience hearing loss as they get older. Studies indicate that at age 60 there is approximately 33% of the population with a loss, at age 70 approximately 67% with a loss, and at age 80 and older the percentage with a hearing loss approaches 100%. For individuals who worked in high noise environments and did not protect their hearing, the loss is greater at an earlier age.

Who should have their hearing tested? Virtually everyone should have their hearing screened annually and fully tested if they do not pass the screening. For seniors, it is even more important. With the new studies linking untreated hearing loss with dementia and Alzheimer's and the NCOA's and other studies linking untreated hearing loss with depression, anxiety and paranoia, untreated hearing loss should not be ignored. Any time there is a perceived change in the person's hearing, or responsiveness to voices or sound, or if they develop Tinnitus (ringing in the ears) their hearing should be tested as soon as possible.

How often should a hearing aid be worn? People with hearing loss should wear their hearing aids daily and as long as possible each day. The brain's neuroplasticity is triggered and the neural pathways get better and better with stimulation. Most geriatric psychiatrists recommend and are putting great emphasis on providing seniors as much aural stimulation as possible.



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Are hearing aids useful for individuals who already have dementia or Alzheimer's? According to Dr. Harold McGrath, Geriatric Psychiatrist at the Advocate Neurosciences Institute, "Aural stimulation is the single most important stimulus that should be provided to people with dementia or Alzheimer's." Aural stimulation is important in providing a basis for understanding the surroundings and situation and helps reduce the level of uncertainty, anxiety and paranoia common with these conditions. Emerging studies are showing that people with Alzheimer's and dementia are calmed and more easily influenced and managed if they have good hearing functionality.

What is a "body worn" hearing aid? The first hearing aids were body worn. As technology advanced, the size of the hearing aid was reduced and hearing aids were able to be worn on the ear with the cost of the aids increasing dramatically. Most small hearing aids are just not affordable. Additional advances in technology and specific needs of older individuals have made body worn hearing aids very functional again. With many seniors, small size is now a negative. Tiny hearing aids are easily lost (usually the responsibility of the facility to replace). They use tiny batteries that are expensive, have short lives, and are difficult to replace. Small hearing aids are often difficult to get into the ear and staff cannot tell if the hearing aid is working or not. Body worn hearing aids provide all the hearing benefits of ear worn hearing aids and more. The size is larger which make them harder to lose and easier to use. Cost is reduced. The larger size is easier to manage making them easier to use for both the resident and the staff. Body worn aids use rechargeable batteries which saves the facility significant expense. Technology makes them even more functional by incorporating an infrared TV Listening system into the instrument. The Maestro body worn hearing aid is an advanced state-of-the-art digital hearing instruments with functionality and capabilities not found in ear worn devices. Body aids are perfect for use in nursing homes.



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FACILITIES PROVIDING ABHF ON-SITE AUDIOLOGY SERVICES

AURORA

Countryside Care Center

BLOOMINGDALE

West Suburban Care Center

BRIDGEVIEW

Bridgeview Care Center
Midway Neuro

CHICAGO

Alden Northmoor
Alshore Nursing Home
Ambassador Nursing & Rehab.
Astoria Place
Avenue Care Center
Belhaven
Brightview Care Center
Bronzeville Park
California Gardens
Central Nursing
Continental Care
Fairmont Care Centre
GlenCrest
GlenElston
Harmony Nursing Home
Imperial
Lake Shore Healthcare
Lakeview Nursing Center
Mid-America Care Center
Peterson Park Health Care
Renaissance at 87th
Renaissance Midway
Renaissance Park South
Renaissance South Shore
Sherwin Manor Nursing
South Point Nursing
Windsor Park
Warren Park Nursing
Waterfront
WoodBridge

CICERO

Alden Town Center

CRESTWOOD

Crestwood Care Center

CRETE

St.James Manor

HILLSIDE

Renaissance Hillside

HOMEWOOD

South Suburban Rehab

JOLIET

Hillside
Joliet Terrace
Joliet Senior Suites

Midlothian

Plaza Nursing & Rehab

MOMENCE

Momence Care Center

NILES

Glen Bridge
Niles Nursing Center
Regency Nursing Centre

NORTHBROOK

Glen Oaks

ORLAND PARK

Alden Orland Park

RIGHTON PARK

Glenshire

RIVERWOODS

Brentwood North

SKOKIE

Grove North

SOUTH HOLLAND

Windmill Nursing Pavillion

TINLEY PARK

McAllister

WAUKEGAN

Glen Lake Terrace

WESTMONT

Burgess Square

WHEATON

Wheaton Care Center

Certain Facilities are serviced
thru ABHF affiliate Specialized
Audiology Services (SAS)