Chapter 9 HEARING LOSS and EAR IMPAIRMENT

Modified: February 2019

Introduction

This chapter provides criteria for assessing permanent impairment from entitled conditions of the ears (hearing loss, otitis media/otitis externa (otalgia/otorrhea), tinnitus and/or vertigo/disequilibrium).

The table for rating vertigo/disequilibrium from central and peripheral causes is contained within this chapter.

Impairment from malignant ear conditions is rated within Chapter 18, Malignant Impairment. Follow the steps contained within the Malignant Impairment chapter.

Rating Tables

This chapter contains one "Loss of Function" table and three "Other Impairment" tables which may be used to rate entitled hearing loss and ear conditions.

The tables within this chapter are:

Rating Tables

Table	Loss of Function	Other Impairment
Table 9.1	Loss of Function – Hearing Loss	This table is used to rate impairment from hearing loss.
	Other Impairment – Otitis Media/ Otitis Externa (otalgia/otorrhea) and Eustachian Tube	This table is used to rate impairment from otitis media/otitis externa (otalgia/otorrhea) and Eustachian tube dysfunction.
Table 9.3	Other Impairment - Tinnitus	This table is used to rate impairment from tinnitus.
	Other Impairment – Vertigo/Disequilibrium	This table is used to rate impairment from vertigo/disequilibrium.

Loss of Function - Hearing Loss

Table 9.1 is used to rate impairment from hearing loss.

Hearing loss is generally entitled as a bilateral condition, with hearing in both ears contributing to a functional loss. Only one rating may be selected from this table for bilateral hearing loss. Occasionally, a rating will be required for hearing loss in **one ear** (monaural) only.

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There are three types of hearing loss (e.g. conductive, sensorineural or mixed). Total hearing impairment, regardless of the cause, is included in the impairment criteria. Air conduction decibel values are used in the calculation of the decibel sum hearing loss (DSHL). When there is a significant difference between masked and unmasked air conduction values, the **masked values** should be used in assessing the impairment.

For determination of assessment of a hearing loss one must calculate the DSHL. The DSHL is calculated over the following four frequencies: 500 htz, 1000 htz, 2000 htz and 3000 htz. A DSHL is calculated for each entitled ear. The DSHL is obtained by adding the decibel loss in hearing at the four mentioned frequencies in each entitled ear. A non-entitled ear is considered to have a DSHL of 95. The DSHL is used in conjunction with **Table 9.1** to rate the extent of hearing loss.

When entitled hearing loss conditions result in permanent impairment of other organ systems, a consequential entitlement decision is required. If awarded, the resulting impairment of that organ system(s) will be rated using the applicable body system specific table(s).

Other Impairment - Otitis Media/Otitis Externa (Otalgia/Otorrhea) and Eustachian Tube Dysfunction

Table 9.2 is used to rate impairment from otitis media, otitis externa (otalgia/otorrhea) and eustachian tube dysfunction. Only one rating may be selected for each entitled condition. If more than one rating is applicable for an entitled condition, the ratings are **compared** and the **highest** selected.

When entitled otitis media/otitis externa (otalgia/otorrhea) and eustachian tube dysfunction conditions result in permanent impairment of other organ systems, a consequential entitlement decision is required. If awarded, the resulting impairment of that organ system(s) will be rated using the applicable body system specific table(s).

If non-entitled conditions or conditions rated within another chapter/table of the Table of Disabilities are contributing to the overall impairment, then the Partially Contributing Table (PCT) must be applied to arrive at the rating which is due to the entitled condition(s) rated within this table.

Other Impairment - Tinnitus

Table 9.3 is used to rate impairment from tinnitus. Only one rating may be selected. If more than one rating is applicable, the ratings are **compared** and the **highest** selected.

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When entitled tinnitus conditions result in permanent impairment of other organ systems, a consequential entitlement decision is required. If awarded, the resulting impairment of that organ system(s) will be rated using the applicable body system specific table(s).

If non-entitled conditions or conditions rated within another chapter/table of the Table of Disabilities are contributing to the overall impairment, then the Partially Contributing Table (PCT) must be applied to arrive at the rating which is due to the entitled condition(s) rated within this table.

Other Impairment - Vertigo/Disequilibrium

Table 9.4 is used to rate impairment from vertigo and disequilibrium conditions. Only one rating may be selected. If more than one rating is applicable, the ratings are **compared** and the **highest** selected.

When entitled vertigo/disequilibrium conditions result in permanent impairment of other organ systems, a consequential entitlement decision is required. If awarded, the resulting impairment of that organ system(s) will be rated using the applicable body system specific table(s).

If non-entitled conditions or conditions rated within another chapter/table of the Table of Disabilities are contributing to the overall impairment, then the Partially Contributing Table (PCT) must be applied to arrive at the rating which is due to the entitled condition(s) rated within this table.

Table 9.1 - Loss of Function - Hearing Loss

Only one rating may be given from **Table 9.1**.

To use this Table, calculate the decibel sum hearing loss (DSHL) over four frequencies for each ear; 500, 1000, 2000, and 3000 htz. Use the vertical axis to plot the DSHL value for the worse ear, and the horizontal axis to plot the DSHL value for the better ear. The point of intersection is the impairment value. If only one ear is entitled the DSHL in the non-entitled ear is always considered to be 95.

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If the rating determined above is "0" but there is a decibel loss of at least 50 decibels at 4000 htz in both ears, then a hearing loss rating of "1" is assigned.

Table 9.1 - Hearing Loss Impairment Table

Worse Ear

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Better Ear

Table 9.2 - Other Impairment - Otitis Media/Otitis Externa (Otalgia/Otorrhea) and Eustachian Tube Dysfunction

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Only one rating may be given from **Table 9.2** for each entitled condition. If more than one rating is applicable for an entitled condition, the ratings are **compared** and the **highest** selected.

Each bullet (•) represents one criterion. In order for a rating to be established for **Table 9.2**, only one criterion must be met at a level of impairment for that rating to be selected.

Table 9.2 - Other Impairment - Otitis Media/Otitis Externa (Otalgia/Otorrhea) and Eustachian Tube

Dysfunction

Rating	Criteria
Nil	 One episode of otitis media/otitis externa (otalgia/otorrhea) treated successfully with no recurrence; or One episode of eustachian tube dysfunction treated successfully with no recurrence.
Two	 Intermittent symptoms of otitis media/otitis externa (otalgia/otorrhea) requiring periodic treatment; or Interm ittent symptoms of eustachian tube dysfunction requiring periodic treatment.
Five	 Continuous symptoms of otitis media/otitis externa (otalgia/otorrhea) requiring ongoing treatment; or Continuous symptoms of eustachian tube dysfunction requiring ongoing treatment.

Table 9.3 - Other Impairment - Tinnitus

Only one rating may be given from **Table 9.3**. If more than one rating is applicable, the ratings are **compared** and the **highest** selected.

Modified: February 2019

Each bullet (•) represents one criterion. In order for a rating to be established for **Table 9.3**, all criteria designated beside each bullet (•) must be met.

Table 9.3 – Other Impairment - Tinnitus

Rating	Criteria
Nil	Occasional tinnitus, present less than once a week affecting one or both ears.
One	Occasional tinnitus, present at least once a week affecting one or both ears.
Three	Intermittent tinnitus, present daily, but not all day long, affecting one or both ears.
Five	Continuous tinnitus, present all day and all night, affecting one or both ears, but does not require use of a masking device.
Ten	Continuous tinnitus, present all day and all night, every day, affecting one or both ears, and requires a masking device and/or prescribed medication.

Table 9.4 - Other Impairment - Vertigo/Disequilibrium

Only one rating may be given from **Table 9.4**. If more than one rating is applicable, the ratings are **compared** and the **highest** selected.

Modified: February 2019

Each bullet (•) represents one criterion. In order for a rating to be established for **Table 9.4**, all criteria designated beside each bullet (•) must be met.

Table 9.4 - Other Impairment - Vertigo/Disequilibrium

Rating	Criteria
Nil	Past history of vertigo/disequilibrium, but no current symptoms.
Five	 Intermittent symptoms of vertigo/disequilibrium with or without objective findings such as nystagmus and ataxia, and Activities of daily living are performed without assistance.
Ten	 Symptoms of vertigo/disequilibrium are present on a daily basis with supporting objective findings such as nystagmus and ataxia; and Usual activities of daily living are performed without assistance although activities requiring balance and precision, such as bike riding, climbing ladders, etc., cannot be performed.
Thirty	 Symptoms of vertigo/disequilibrium are present on a daily basis with supporting objective findings such as nystagmus and ataxia; and Activities of daily living cannot be performed without assistance, but remains able to walk short distances and perform simple self care activities such as eating, washing face and hands, and simple household duties such as dusting, sweeping floor.
Sixty	 Symptoms of vertigo/disequilibrium are present on a daily basis with supporting objective findings such as nystagmus and ataxia; and Activities of daily living such as washing face, brushing teeth, combing hair cannot be performed without assistance. Can no longer walk even short distances without assistance.
Eighty-five	 Symptoms of vertigo/disequilibrium are present on a daily basis with supporting objective findings such as nystagmus and ataxia; and Activities of daily living must be performed by caregiver; and Member/Veteran/Client is confined to home and premises.

Steps to Determine Hearing Loss and Ear Impairment Assessment

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- **Step 1:** Determine total Decibel Sum Hearing Loss (DSHL) for each ear.
- Step 2: Determine the rating from Table 9.1(Loss of Function Hearing Loss).
- **Step 3:** Determine the Quality of Life rating.
- **Step 4:** Add the ratings at Step 2 and Step 3.

This is the Disability Assessment for hearing loss.

- **Step 5:** Determine the rating from **Table 9.2** (Other Impairment Otitis Media/Otitis Externa (Otalgia/Otorrhea) and Eustachian Tube Dysfunction).
- **Step 6:** Does the Partially Contributing Table apply? If **yes**, then apply to rating at Step 6.
- **Step 7:** Determine the Quality of Life rating.
- **Step 8:** Add the ratings at Step 7 and Step 8.

This is the Disability Assessment for otitis media/otitis externa (otalgia/otorrhea) and eustachian tube dysfunction.

- Note: If more than one entitled condition requires assessment from Table 9.2, Steps 6 10 must be repeated.
- **Step 9:** Determine the rating from **Table 9.3** (Other Impairment Tinnitus).
- **Step 10:** Does the Partially Contributing Table apply? If **yes**, then apply to rating at Step 11.
 - **Step 11:** Determine the Quality of Life rating.
 - **Step 12:** Add the ratings at Step 12 and Step 13.

This is the Disability Assessment for tinnitus.

- **Step 13:** Determine the rating from **Table 9.4** (Other Impairment Vertigo/Disequilibrium).
- **Step 14:** Does the Partially Contributing Table apply? If **yes**, then apply to rating at Step 16.
- **Step 15:** Determine the Quality of Life rating.
- **Step 16:** Add the ratings at Step 17 and Step 18.

This is the Disability Assessment for vertigo/disequilibrium.