## **UNIVERSITY COLLEGE LONDON**

University of London

## **EXAMINATION FOR INTERNAL STUDENTS**

For The Following Qualification:-

B.Sc.

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**BSc Audiology: Auditory Rehabilitation** 

COURSE CODE : A	UDLS008
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UNIT VALUE : 0.50

DATE : 16-MAY-05

TIME : 14.30

TIME ALLOWED : 2 Hours

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**TURN OVER** 

# AUDLS008: Auditory Rehabilitation

Sections A and Section B carry equal marks and should be given equal time.

### Section A

Answer ONLY <u>four</u> questions from Section A, each question is worth an equal number of marks.

- 1) Discuss the uses of venting and varying sound bore dimensions in ear mould technology.
- 2) What is meant by the term 'real ear measurements'? Briefly outline the role of real ear measurements in auditory rehabilitation.
- 3) Briefly describe Class A and Class B amplifiers. Discuss their respective advantages and disadvantages.
- 4) Describe the basic components of a hearing aid test box and explain how this may be used to measure the properties and characteristics of a hearing aid.
- 5) Describe the basic features of an electret microphone. Briefly discuss the features and properties of directional microphones.
- 6) Outline the TTSA guidelines to GPs and audiologists for direct referrals to local Audiology Departments for the provision of hearing aids.

#### **Section B**

Answer ONLY two questions from Section B, each question is worth an equal number of marks.

- 1) Discuss the use of compression systems in hearing aids.
- 2) Compare the relative benefits and disadvantages of the different types of hearing aid available for rehabilitation.
- 3) A 65 year old gentleman has been referred to his local Audiology Department for the provision of hearing aids. His audiogram is shown below. His primary complaint is that he can no longer follow conversation in group situations, and often experiences difficulties hearing the television at home.

	250Hz	500Hz	1000Hz	2000Hz	4000Hz	8000Hz	
Right (a/c)- dBHL	10	10	30	50	70	70	]
Left (a/c)- dBHL	10	10	25	45	65	65	
Bone- dBHL		15	25	50	65		].

Discuss your audiological management of this patient.