



Adelaide
HEARING

WHY CHOOSE ADELAIDE HEARING?

Adelaide Hearing is an independent audiology practice that is locally owned and operated, based in Adelaide.. With no ties to any hearing aid manufacturer, we offer completely unbiased device selection from all leading brands, providing evidence-based, patient-centric care, tailored to each individual's communication needs and lifestyle.

Our experienced clinical team consistently achieves excellent outcomes through diagnostic assessment, precise hearing aid verification, and ongoing support – without sales pressure.

With convenient locations in **Torrens Park** and **Fulham Gardens**, as well as regular visiting sites across Mount Barker, Stirling, Strathalbyn, Torrensville, Athol Park, Port Adelaide and Reynella, we are equipped to support your patients seamlessly.

- ✓ 100% independent
- ✓ Unbiased device selection from all major brands
- ✓ Clinicians with 30+ years combined experience
- ✓ State-of-the-art diagnostic and fitting facilities
- ✓ No-obligation 30-day hearing aid trials
- ✓ Free hearing tests and transparent pricing
- ✓ Same-week appointments and priority GP referrals
- ✓ Gentle microscution for ear wax removal

For professional, transparent, and highly effective hearing healthcare that your patients will thank you for, refer to Adelaide Hearing today via www.adelaidehearing.com.au or call us on **(08) 8357 2290**.

CONTACT US: 8357 2290



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EFFECTS OF UNTREATED HEARING LOSS

Untreated hearing loss is associated with:

- Increased risk of social isolation and depression
- Accelerated cognitive decline and higher dementia risk
- Reduced employment and income potential
- Greater incidence of falls (up to 3× risk)
- Listening fatigue and reduced quality of life

Early referral prevents irreversible consequences. The sooner intervention occurs, the better the outcomes for communication, mental health, and brain health.



WHEN TO REFER

CONTACT US: 8357 2290

- ☒ Patients reporting difficulty in background noise or group conversations
- ☒ Family members raising concerns about hearing
- ☒ Patients turning TV volume excessively high
- ☒ Any adult noticing gradual change in hearing





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TYPES OF HEARING LOSS

Hearing loss is classified as:

Conductive – middle or outer ear issue (wax, fluid, ossicular problems)

Sensorineural – cochlear or neural (age-related, noise exposure, ototoxicity)

Mixed – combination of both Auditory processing disorder – central

Early, accurate diagnosis improves outcomes and requires full audiological and tympanometric assessment – screening tests alone cannot reliably differentiate type or site of lesion.



WHEN TO REFER

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- ✓ Any suspected hearing loss not explained by obvious conductive cause
- ✓ Asymmetrical or unilateral loss
- ✓ Sudden or rapidly progressive loss
- ✓ Associated tinnitus or balance issues
- ✓ Paediatric patients or complex cases





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HEARING ASSESSMENT

Screening tests (e.g., whisper test, phone apps, or automated audiometry) indicate possible hearing loss but cannot:

- Determine type or configuration of loss
- Assess speech understanding in noise
- Identify retrocochlear pathology
- Provide data sufficient for hearing aid prescription

Adelaide Hearing's diagnostic assessment provides full air/bone conduction testing, speech discrimination in quiet and noise, tympanometry and detailed case history. Reports returned within 48 hours; pre-referral discussion always welcome.



If one of your patients is experiencing hearing loss, our **FREE** hearing assessments are easy to book.

WHEN TO REFER

CONTACT US: 8357 2290

- ☒ Any abnormal screening result
- ☒ Patient or family concern about hearing
- ☒ Asymmetrical tinnitus or hearing concerns
- ☒ Pre-employment or licensing requirements
- ☒ Complex medical history affecting ears





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MICROSUCTION & EAR WAX REMOVAL

Microsuction is the gold-standard method for ear wax removal, recommended by ENT specialists and the National Institute for Ear Care Excellence.

Performed under direct vision with a microscope and fine suction, it is safer, more comfortable, and more effective than syringing or irrigation – especially in patients with perforated eardrums, previous ear surgery, or active infection.



WHEN TO REFER

CONTACT US: 8357 2290

- ☒ Sudden hearing loss or muffled hearing suspected due to wax
- ☒ Failed over-the-counter drops or home irrigation
- ☒ History of ear surgery, perforation, or grommets
- ☒ Pain, discharge, or vertigo associated with blockage
- ☒ Patients requiring clearance prior to hearing aid fitting or audiological assessment





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DEMENTIA & HEARING LOSS

The 2020 and 2024 Lancet Commissions on dementia identified mid-life hearing loss as the largest modifiable risk factor for dementia, potentially contributing to ~8% of cases. Untreated hearing loss accelerates cognitive decline, increases social isolation, and elevates dementia risk by up to 5 times.

Early identification and effective management with hearing aids has been shown to significantly slow cognitive decline and reduce risk of depression, and improve quality of life.



WHEN TO REFER

CONTACT US: 8357 2290

- ✓ Patients ≥55 years with any reported hearing difficulty
- ✓ Family concerns about hearing or early memory issues
- ✓ Patients with diagnosed mild cognitive impairment or early dementia
- ✓ When noticing increased TV volume, frequent repetition requests, or withdrawal from conversation





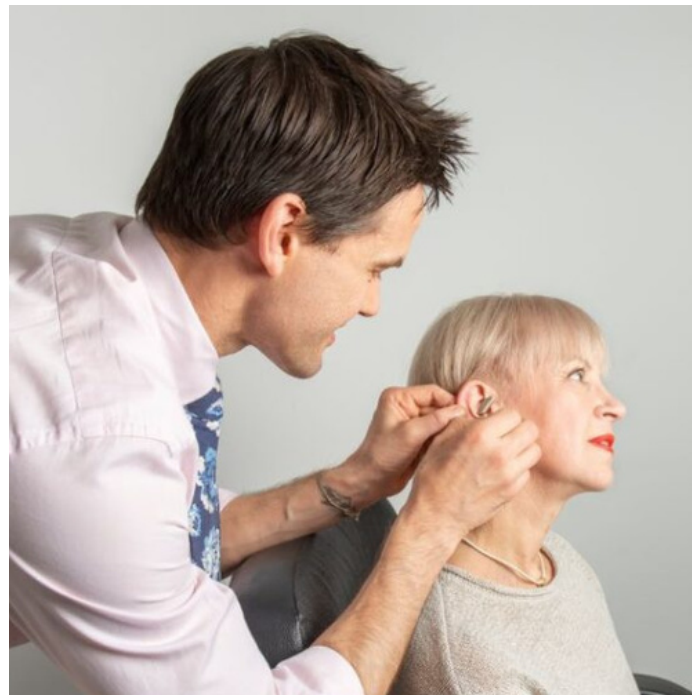
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BENEFITS OF WEARING HEARING AIDS

Modern hearing aids provide:

- Significantly improved speech understanding in noise
- Reduced listening effort and fatigue
- Better quality of life and social engagement
- Preservation of cognitive function (ACHIEVE study)
- Reduced risk of depression and social isolation
- Better balance and reduced fall risk

We offer **no-obligation 30-day hearing aid trials**. As an independent clinic, we select and fine-tune devices from all leading manufacturers to achieve the best individual outcome.



WHEN TO REFER

- ☒ Confirmed hearing loss on screening or diagnostic testing
- ☒ Patients expressing frustration with communication
- ☒ Family concerns about withdrawal or misunderstanding
- ☒ Patients with tinnitus (aids often provide substantial relief)

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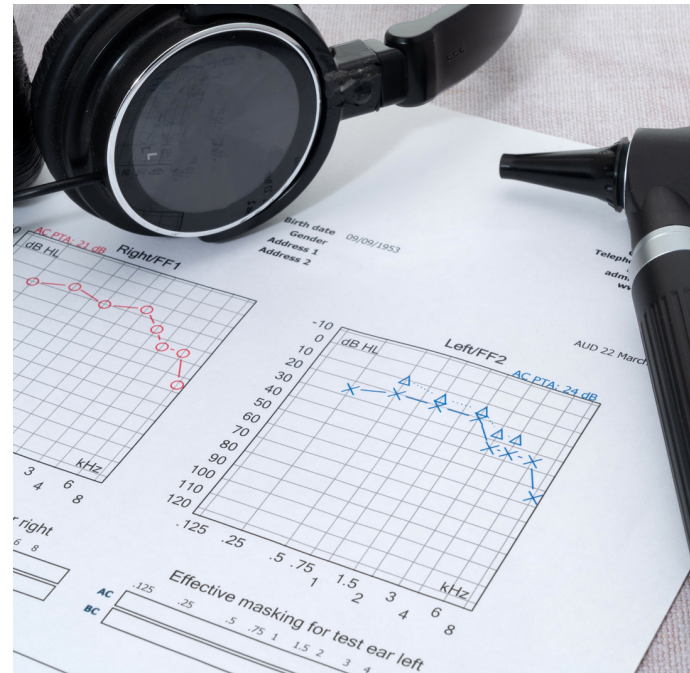
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UNDERSTANDING AUDIOLOGY REPPORTS

A comprehensive audiology report includes:

- Pure-tone thresholds (air/bone conduction)
- Speech detection and discrimination scores (quiet and noise)
- Tympanometry and acoustic reflexes
- Clinical impressions and specific management recommendations

We use plain-language summaries and traffic-light highlighting for rapid GP review, with clear referral reasoning and recommended action, PLUS pre-referral discussion and same-week reporting.



WHEN TO REFER

- ✓ Screening test suggests possible hearing loss
- ✓ Asymmetrical hearing loss or sudden change
- ✓ Poor speech discrimination disproportionate to pure-tone loss
- ✓ Tinnitus, vertigo, or otalgia requiring full diagnostic work-up
- ✓ Patients requiring medical clearance prior to hearing aid prescription

