

# CLEANING AND CHECKING A HEARING AID

There are three types of hearing aids:

- The newest and smallest (ITC) fit into the ear canal and are not visible, and do not interfere with normal activities. They do require manual dexterity to operate, change batteries, and insert. The function is also affected by the presence of wax in the ears.
- The second hearing aid fits into the external ear (ITE) and allows for more adjustment. It is more powerful and provides for a wider range of hearing loss. This is the most common type of hearing aid.
- The third type is a behind the ear type and is connected by a short clear, hollow plastic tube to an ear mold inserted into the auditory canal. This is used for clients with limited manual dexterity and progressive hearing loss.

## PURPOSE

Maintain hearing aid or correct the function of the hearing aide.

Facilitate client participation through ability to hear.

Promote self care.

## APPLIES TO

- Registered Nurses
- Licensed Practical/Vocational Nurses
- Therapists
- Other (Identify): \_\_\_\_\_

## EQUIPMENT/SUPPLIES

- Hearing aid and batteries.
- Soap and water.
- Petroleum jelly.

- Pipe cleaner.
- Bush and/or wax loop.
- Cotton tipped applicators.
- Towel and washcloth.
- Container for storage.
- Clean gloves.

## PROCEDURE

1. Determine the client's ability to perform procedure and teach as necessary.
2. Have client remove hearing aid if able.
3. Wash hands. Refer to the Hand Washing procedure. Put on gloves.
4. Check batteries if hearing aid not functioning.
  - a. Turn volume on high.
  - b. Cup hand over ear mold
  - c. If no sound is heard, replace batteries (usually need changing weekly if worn daily).
5. Remove ear mold from the receiver before cleaning: *do not immerse the receiver in the water.*
6. Wash ear mold with soap and water, a pipe cleaner or brush may be used to clean the holes in the hearing aid. Dry thoroughly.
7. Examine cord for breaks.
8. Reconnect receiver to dry ear mold.
9. Before inserting ear mold, check outer ear and clean as necessary.
10. Hold the aid so that the bore is at the bottom, insert the bore into the ear first, pull up and back on the outer ear and push the aid until it is snugly in place.
11. Bring the cannula of the BTE up and over the ear to prevent kinking.
12. Turn receiver switch to ON.
13. Assist client to adjust volume control.

14. If whistling or feedback noises occur, check for tightness of fit--probably not inserted properly.
15. When hearing aid not in use, place in container.

### **DOCUMENTATION GUIDELINES**

1. Document in the clinical record:
  - a. Procedure and client ability to assist.
  - b. Hearing level when aid is on.
  - c. Any instruction given and response to teaching.
  - d. Any pertinent findings observed and reported to the physician.

### **RELATED PROCEDURES**

None.