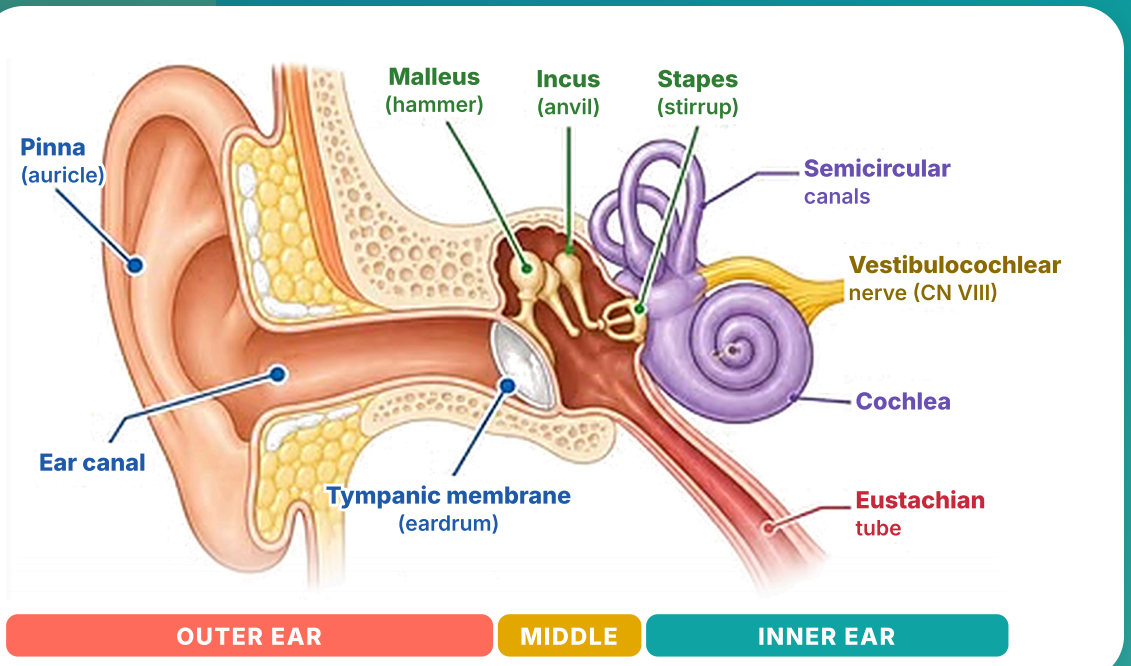
APPROACH EDUCATION
Making Education Approachable, No Matter the Learner.

Free Edition
ALL AGES • FAMILIES & INDIVIDUALS

FREE EDITION

All About My Hearing

A Plain-Language Guide to Hearing, Audiograms, Technology, Communication, and Rights, from Infancy to Adulthood



The Ear | Degree of Hearing Loss | Reading an Audiogram | Who's Who in Hearing Care

Free Edition • For families and individuals of all ages

START HERE

Welcome

This guide explains the words, tests, technology, and laws that come with being Deaf or hard of hearing, or with loving someone who is.

Who this guide is for

- Parents and caregivers of a **baby, child, teen, or adult**
- Teens and adults learning about **their own** hearing
- Grandparents, relatives, and anyone on the support team

Throughout this guide, "the person" means whoever you're learning about, whether that's your child or yourself.

A note on language

People use different words: *Deaf, deaf, hard of hearing, hearing loss, hearing difference*. This guide uses several. The best words are the ones the person chooses for themselves. Spoken language, ASL, and using both are all valid, complete paths to communication.

> *Across every age, the goal is the same: **full access to language and information**, and gradually building the person's ability to explain their needs and get access anywhere.*

Where are you right now? Check what's true today.

- [ ] We have a copy of the most recent audiogram
- [ ] I know who is on the hearing care team
- [ ] I know which school or workplace supports apply
- [ ] The person can describe their hearing in their own words
- [ ] I understand what the audiogram shows
- [ ] Communication at home works for everyone
- [ ] We know who to call for device repairs
- [ ] We're connected with other DHH families or adults

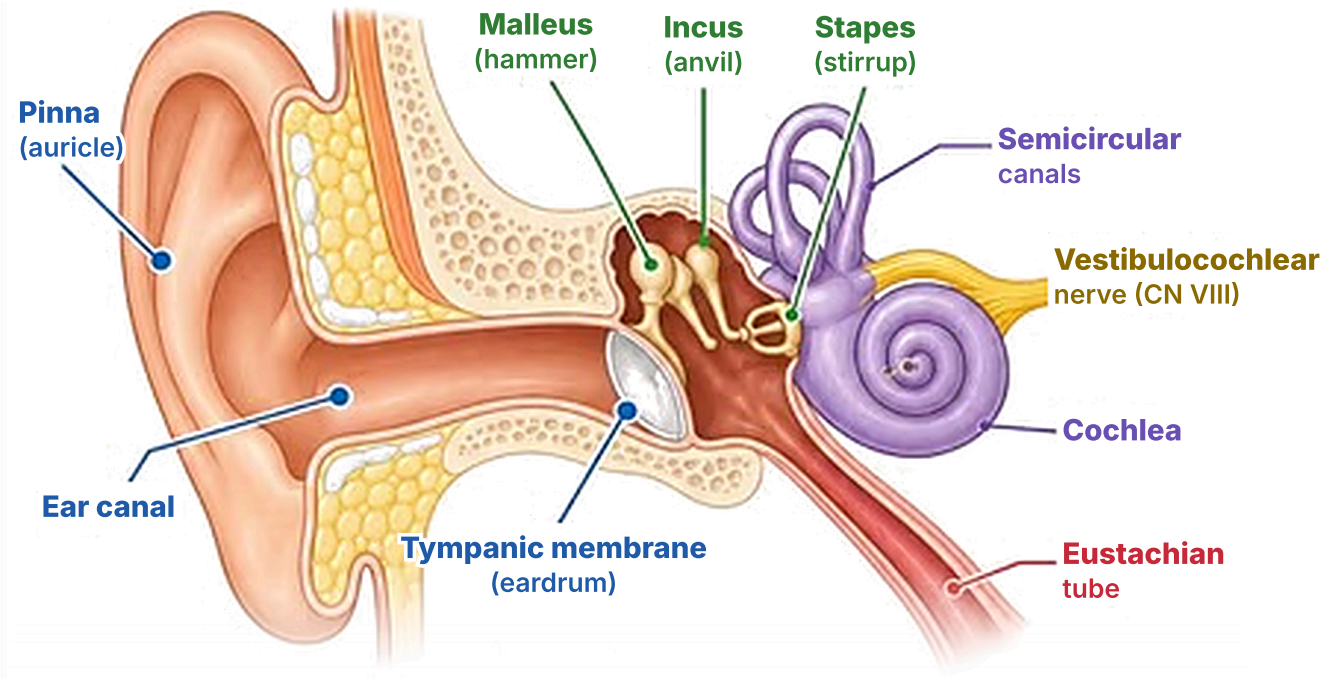
What I most want to learn from this guide:

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HEARING BASICS

The Ear & How Hearing Works

Sound travels through three parts of the ear before the hearing nerve carries it to the brain.



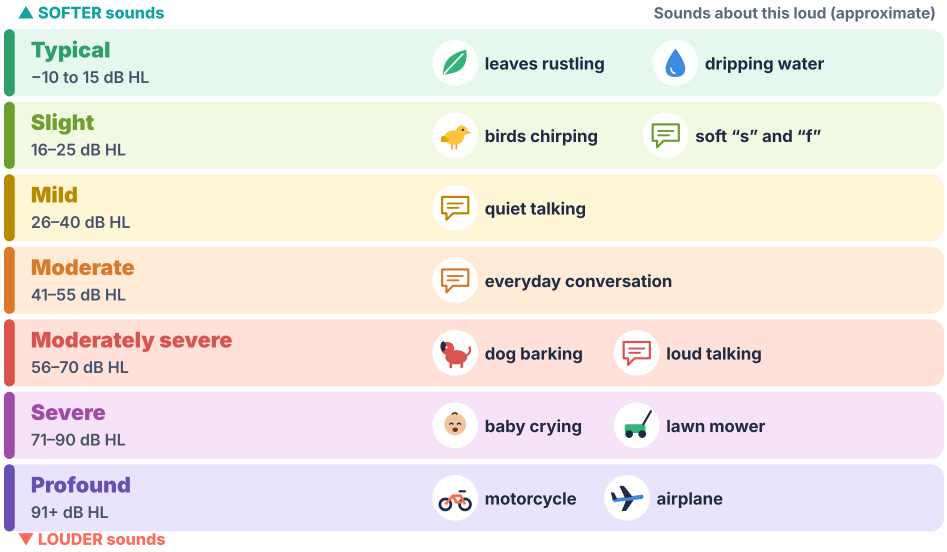
Part	Includes	What it does	When it's different
Outer ear	Pinna, ear canal	Collects sound and sends it to the eardrum.	Wax, infections, or an ear canal that didn't fully form (atresia) can block sound.
Middle ear	Eardrum, malleus, incus, stapes, Eustachian tube	Changes sound waves into vibrations and boosts them.	Fluid, infections, or eardrum or bone differences can cause **conductive** differences, which are often medically treatable.
Inner ear	Cochlea, semicircular canals	Hair cells in the cochlea change vibrations into nerve signals. The canals help with balance.	Hair-cell differences cause **sensorineural** differences, which are usually permanent.
Nerve & brain	Vestibulocochlear nerve (CN VIII), auditory cortex	Carries signals and makes sense of them.	Signal-timing differences can cause **auditory neuropathy (ANSD)**.

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HEARING BASICS

Degree of Hearing Loss

Degree describes how loud sounds need to be for a person to detect them **without** hearing technology. It's described for each ear, using ranges from the American Speech-Language-Hearing Association (ASHA).



Degree	dB HL	Possible impact on speech access without hearing devices
Typical	−10 to 15	Typically hears all the speech sounds of conversation.
Slight	16–25	May miss soft or distant speech and quiet sounds like “s,” which marks plurals and possessives. Estimated to miss up to about 30% of conversation without devices.
Mild	26–40	May miss soft speech, word endings, and short words like “the” and “a.” Estimated to miss about 35–60% of speech without devices.
Moderate	41–55	May miss up to about 80% of conversation without devices; does best face-to-face, up close, in quiet.
Moderately severe	56–70	Likely to miss most or all conversation without devices.
Severe	71–90	Conversational speech is not accessible without devices; visual language and/or cochlear implants are often used.
Profound	91+	Misses speech and nearly all environmental sounds without devices; many people use ASL, cochlear implants, or both.

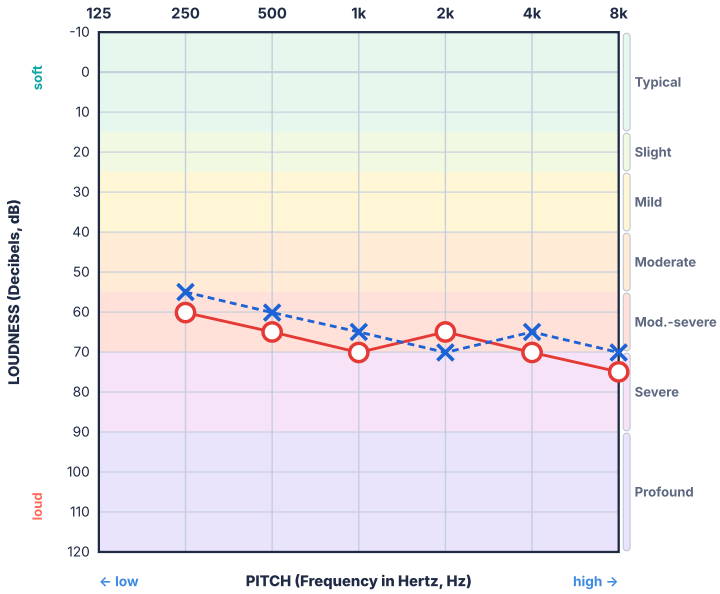
Degree isn't everything. Noise, distance, pattern, and technology all change what a person hears. Ask about both **unaided** and **aided** results.

Sources: ASHA degree ranges; impact estimates as summarized in Hearing First (2026), citing ANSI S3.5 (1997), KIPA (n.d.), and Sapp et al. (2023). Sound examples are approximate.

AUDIOGRAMS

How to Read an Audiogram

The audiogram charts **thresholds**: the softest sounds heard at each pitch, tested one ear at a time in a sound booth.



Example: moderately severe, both ears
Notice that the right (O) and left (X) ears are similar, but not identical at every pitch.

Reading a threshold: If the O at 500 Hz sits at 65 dB, the right ear hears 500 Hz sounds at 65 dB or louder, but not sounds softer than that.

Remember: Right = Red, Left = Blue.

Common symbols

O	Right ear, earphones, no technology
<	Right ear, bone conduction
S	Sound field: speakers, both ears together
↓	Arrow: no response at that level
X	Left ear, earphones, no technology
>	Left ear, bone conduction
C	Tested with cochlear implant(s)
[ ] △ □	Masked results (other ear kept busy)

Pitches tested: usually 250 to 8000 Hz, the range that covers speech. **Loudness:** −10 dB HL (very soft) at the top to 120 dB HL (very loud) at the bottom. Symbols vary by clinic, so check the key on the report or ask the audiologist.

Sources: Hearing First (2026); ASHA audiogram conventions.

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YOUR TEAM

Who's Who in Hearing Care

The professionals you may work with, and what each one does.

Who	What they do
Audiology	The health-care field focused on hearing and balance.
Audiologist (Au.D.)	Tests hearing and balance, explains results, and fits, programs, and verifies hearing aids, CI processors, bone-conduction devices, and remote microphones. *Pediatric audiologists* specialize in children.
Educational audiologist	Works with schools on classroom listening, remote microphones, and room acoustics.
ENT / Otolaryngologist	A medical doctor and surgeon for the ear, nose, and throat. Diagnoses and treats medical ear conditions (infections, fluid, eardrum problems), places ear tubes, and performs cochlear implant and bone-anchored device surgery.
Otologist / Neurotologist	ENTs with extra training in the ear and related nerves; often lead implant teams.
Pediatrician / primary care	Coordinates care, screenings, and referrals.
Genetic counselor / geneticist	Helps families explore possible genetic causes, if they want to.
Early intervention provider	Supports families of children from birth to age 3, often at home (IDEA Part C).
Speech-language pathologist (SLP) / LSLS	Supports language and communication. LSLS-certified specialists focus on listening and spoken language.
Teacher of the Deaf (TOD / TDHH)	A certified teacher specializing in the education of DHH students.
Interpreter / transliterator	Provides access between ASL (or another mode) and spoken English.
Deaf mentor / Deaf role model	Shares ASL, Deaf culture, and lived experience with children and families.
VR counselor & disability services	Support job training (Vocational Rehabilitation) and college accommodations.

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About Approach Education

Approach Education creates thoughtful, accessible learning resources for learners of every ability and communication style, and for the families and professionals who support them. **Also in this series:** *All About My Hearing*, Elementary (K–5) and High School (9–12) Student Workbooks.

Website: _____

Want more?

The complete Parent & Caregiver Edition (26 pages) also includes: Hearing Happens in the Brain, Type & Pattern of Hearing, Speech Sounds on the Audiogram, Understanding the Hearing Report, Daily Listening Check: The Ling Six Sounds, Hearing Technology Overview, Building Independence with Technology, Communication & Language at Home, Identity, Belonging & Well-Being, Support at Every Age, and more.

Find it at: _____

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