

# Frequently Asked Questions

The Audiology Place is an independent hearing clinic in Sydney, based in Forestville on the Northern Beaches. We provide hearing care for all ages and all types of hearing concerns. Below you'll find answers to the questions we hear most often.

## **About The Audiology Place**

### **What is The Audiology Place?**

The Audiology Place is an independent audiology clinic providing hearing care across Sydney. We see patients of all ages, from 6 months through to older adults. The clinic is led by Dr Signe Steers, an audiologist with nearly 20 years of clinical experience and a Doctorate in Audiology from A.T. Still University in Arizona. Dr Steers also lectures in audiology at The University of Sydney.

### **What does "independent" actually mean?**

We have no ties to any hearing aid manufacturer. We don't receive sales targets or bonuses for recommending particular brands. This means every recommendation is based purely on what's right for you. If we suggest a hearing aid, it's because we believe it's the best fit for your hearing, lifestyle, and budget. If we don't think you need one, we'll tell you.

### **Who will I see at my appointment?**

All appointments are with a qualified audiologist who is trained in diagnosing and managing hearing loss and auditory processing disorders. If you have someone in mind, ask. All our Audiologists are university-trained allied health professionals who specialise in hearing and balance.

### **What ages do you see?**

Everyone. We describe our approach as "from twinkle to wrinkle." We test babies from around 6 months old using specialised paediatric techniques. We work with children, teenagers, adults, and older adults. Hearing concerns don't discriminate by age, and neither do we.

## **Appointments and What to Expect**

### **Do I need a referral to see you?**

In most cases, no. You can book directly. If you want to claim a Medicare rebate for your hearing test, you'll need a referral from your GP, ENT specialist, paediatrician, or

neurologist. If you're accessing the Hearing Services Program for subsidised hearing aids, we can help you with that. We can advise you on the best pathway when you call to book.

### **What happens at a first appointment?**

We start by talking. Your audiologist will take a detailed case history covering your hearing concerns, medical background, and lifestyle. Then we examine your ears using otoscopy to check for wax, infection, or other issues. After that, we carry out the appropriate hearing tests. Finally, we explain everything in plain English and discuss the next steps. You'll leave with a clear understanding of your hearing and a plan.

### **How long does a hearing assessment take?**

It depends on your history. All assessments are at least 60 minutes long, and some are 90 minutes for a full adult diagnostic assessment. This gives us time for a thorough case history, a complete battery of tests, and a proper discussion of results. Quick 15-minute screenings might tell you whether you have some hearing loss. They won't tell you why, where, how severe, or what else might be going on. We do things properly.

### **What tests might be done?**

That depends on your age and concerns. A complete assessment for adults typically includes otoscopy (visual examination of the ear), tympanometry (middle ear function), acoustic reflexes, pure tone audiometry (the "beep test" done properly across many frequencies), bone conduction testing, speech audiometry in quiet and in noise, and otoacoustic emissions to check inner ear function. When indicated, we also do extended high-frequency testing to catch early changes that standard tests miss.

### **Will the tests hurt?**

No. Hearing tests are non-invasive and painless. You'll wear headphones, listen to sounds, and tell us what you hear. Some tests don't even require you to respond at all. For children, we use play-based methods that keep them comfortable and engaged.

### **What should I bring to my appointment?**

Bring any previous hearing test results if you have them. Bring a list of medications. If you have a referral letter, bring that. If you already wear hearing aids or use earplugs, bring those too. And get your questions.

## **Adult Hearing Tests**

### **What are the signs I might need a hearing test?**

Turning the TV up louder than others find comfortable. Asking people to repeat themselves. Struggling to follow the conversation in cafés or restaurants. Feeling like people mumble. Missing parts of a conversation when you can't see the speaker's face. Tinnitus (ringing, buzzing, or humming in your ears). A blocked or full sensation in your ear. If any of these sound familiar, it's worth getting checked.

### **How is your hearing test different from a quick screen?**

A standard hearing screen takes 10 to 15 minutes and tests only a handful of mid-range frequencies, often in an open room with background noise. It might tell you that you have some hearing loss. It won't tell you why, where it is, how severe it is, or what to do about it. We dedicate 60 to 90 minutes to each assessment. We test more frequencies, including the extended high frequencies where early noise damage and age-related changes often appear first. We test speech understanding, not just tone detection. We test how you cope with background noise, which is usually a real-world problem.

### **I can hear OK in quiet. Why can't I follow a conversation in noisy places?**

This is one of the most common complaints we hear. Your pure-tone thresholds might appear normal or near-normal, but speech-in-noise testing often reveals the real issue. High-frequency hearing loss affects your ability to pick out consonants and distinguish similar words. Background noise makes this much more complicated. Testing speech in noise is part of every adult assessment we do.

### **What happens if you find hearing loss?**

We explain the results clearly and discuss your options. These might include monitoring, lifestyle strategies, referral to an ENT specialist for any medical issues, or hearing aids if amplification would help. As an independent clinic, we can fit any brand of hearing aid and will recommend based on your hearing profile, lifestyle, and budget, not on what pays us the best margin.

## **Children's Hearing and Auditory Processing**

### **At what age can you test children's hearing?**

From around 6 months old. We use age-appropriate techniques that don't require a child to sit still and press a button. For babies and toddlers, we use Visual Reinforcement Audiometry (VRA), where the child learns to turn toward a visual reward when they hear a sound. For older children, we use Play Audiometry, which makes testing a game. We can also use objective tests, such as otoacoustic emissions (OAEs), that don't require any response from the child.

## **What signs might suggest my child has a hearing problem?**

Delayed speech or language development. Not responding when called. Frequently saying "what?" or "huh?" Turning up the TV or tablet. Struggling at school, particularly with following instructions. Behavioural issues that might actually be frustration at not understanding. A history of ear infections. Deafness in the family. If you're concerned, get it checked. Early intervention makes a significant difference.

## **My child's hearing test came back normal, but they still struggle to follow instructions. What's going on?**

This might be Auditory Processing Disorder (APD). Children with APD have normal hearing sensitivity, but their brains struggle to process and make sense of what they hear, particularly in noisy environments like classrooms. They may mishear words, constantly ask for repetition, seem to "zone out," or struggle with reading and spelling because they can't reliably distinguish speech sounds. APD affects around 3 to 5% of school-aged children.

## **What is APD testing?**

APD testing goes beyond standard hearing tests. We assess how well the brain processes auditory information using a battery of headphone-based tests and live voice assessments. A standard hearing test must be completed first to rule out hearing loss as the cause of difficulties. APD assessments are typically done from around age 7, when children are developmentally able to complete the test battery reliably.

## **Can you provide APD reports for schools?**

Yes. After assessment, we provide formal reports that can be shared with schools, speech pathologists, occupational therapists, paediatricians, or other specialists. These reports explain the findings and include recommendations for classroom accommodations and intervention strategies.

## **Can APD be treated?**

APD can't be "cured," but it can be managed effectively. Treatment typically involves a combination of environmental modifications (reducing background noise, using FM systems), compensatory strategies, and auditory training to strengthen the brain's processing abilities. Early intervention produces better outcomes.

## **Ear Wax Removal**

### **Do you remove earwax?**

Yes. We use microsuction, which is considered the gold standard for earwax removal. We also use irrigation (syringing) when appropriate, though this has evolved significantly from the old-fashioned technique many people remember.

### **What is microsuction?**

Microsuction uses a small, gentle suction device to remove wax under direct visualisation through a microscope or magnifying loupe. Nothing is put into your ear, only taken out. This makes it safe for people with perforated eardrums, grommets, or a history of ear surgery, as well as for those who've had problems with syringing in the past. You'll hear a suction sound during the procedure, but it's quick and doesn't hurt.

### **Is microsuction safe?**

Microsuction is one of the safest methods available. The audiologist can see precisely what they're doing throughout the procedure, which virtually eliminates the risk of pushing wax deeper or damaging the ear canal or eardrum. Unlike syringing, it doesn't introduce water into the ear, which matters if you have a perforation or infection risk.

### **What should I do before my wax removal appointment?**

Use wax-softening drops or spray for a few days before your appointment. We recommend CleanEars, an olive oil-based spray that's safe and easy to use. Softening the wax first makes removal easier, faster, and more comfortable. If you arrive with tough, dry wax, we may not be able to remove it all in one appointment.

### **How do I know if I need wax removal?**

Symptoms include a blocked or full sensation in the ear, muffled hearing, earache, itchiness, or tinnitus. That said, these symptoms can have other causes. An otoscopic examination will confirm whether wax is actually the problem. We check your ears at the start of every appointment.

### **Can I use ear candles or cotton buds instead?**

Please don't. Ear candles don't work and can cause burns or damage to the ears. Cotton buds push wax deeper into the canal, compact it against the eardrum, and can scratch or damage the delicate skin of the ear canal. If you have a wax problem, see a professional.

### **Can you remove wax from children's ears?**

Yes. We've had success removing wax from children using microsuction. It's gentler than syringing and can be done without putting anything into the ear, which children tend to tolerate better.

## **Tinnitus**

### **What is tinnitus?**

Tinnitus is the perception of sound in your ears or head when no external sound source is present. People describe it as ringing, buzzing, humming, hissing, clicking, or whooshing. It can be constant or intermittent, soft or loud, in one ear or both. Tinnitus affects 10 to 20% of the population at some point. For most people, it's mild. For some, it significantly impacts sleep, concentration, and quality of life.

### **What causes tinnitus?**

Tinnitus isn't a disease itself but a symptom. The most common cause is hearing loss, whether from ageing, noise exposure, or other factors. When the ear sends less information to the brain, the brain sometimes "turns up the gain" and creates phantom sounds. Other causes include ear wax blockage, ear infections, certain medications, head or neck injuries, jaw problems, and high stress levels. Sometimes there's no identifiable cause.

### **Can you help with tinnitus?**

Yes. We offer specialised tinnitus consultations and management. There's no universal cure for tinnitus, but there are many effective ways to reduce its impact. Treatment is highly individual. The first step is a comprehensive hearing and tinnitus assessment that includes pitch and loudness matching, masking tests, and questionnaires to understand how tinnitus is affecting your life.

### **How is tinnitus treated?**

Management typically involves a combination of approaches. Education and counselling help you understand the mechanisms behind tinnitus, which reduces anxiety and allows the brain to start tuning it out. Sound therapy uses gentle background sounds to blend the tinnitus into a more comfortable backdrop. If you have hearing loss, properly fitted hearing aids often reduce tinnitus by restoring ambient sound. Lifestyle factors like sleep, stress, caffeine, and hydration can also play a role. The goal is to reduce the intrusiveness and distress of tinnitus, even if it doesn't go away completely.

### **Do hearing aids help with tinnitus?**

Often, yes. Many modern hearing aids include built-in tinnitus sound therapy features like white noise, pink noise, ocean sounds, or fractal tones. More importantly, simply restoring the sounds you've been missing reduces the brain's need to "fill in gaps" with phantom sounds. For many patients, properly fitted amplification is the single most effective step toward relief.

## **When should I see a doctor about tinnitus?**

See your GP or an ENT specialist promptly if your tinnitus is new and only in one ear, pulsing in time with your heartbeat, accompanied by sudden hearing loss, dizziness, or balance problems, or associated with ear pain or discharge. Sudden hearing loss, in particular, is a medical emergency requiring urgent attention.

## **Hyperacusis and Misophonia**

### **What is hyperacusis?**

Hyperacusis is abnormal sensitivity to everyday sounds. Things like a ticking clock, a ringing phone, or laughter can feel uncomfortably loud or even painful. This isn't about sounds that are actually loud, but normal sounds that the brain perceives as too intense. Hyperacusis usually reflects an issue in how the brain's auditory processing pathways handle sound, not damage to the ear itself.

### **What is misophonia?**

Misophonia is a strong emotional reaction to specific sounds, regardless of their loudness. Common triggers include chewing, sniffing, pen clicking, throat clearing, tapping, and other repetitive human-made sounds. The reaction can include anger, anxiety, disgust, or a powerful urge to escape. Misophonia is about specific sounds and the emotional response they provoke, rather than sound volume.

### **Are hyperacusis and misophonia the same thing?**

No. They can occur together, but they're different conditions. Hyperacusis is about sound intensity across many types of sounds. Misophonia is about emotional reactions to specific trigger sounds. Both affect how the brain processes sound rather than how the ears detect it.

### **Can hyperacusis and misophonia be treated?**

Yes. Treatment typically involves education about how the central auditory system works, sound therapy using neutral background sounds to reduce sensitivity, and psychological support to address the anxiety and distress that often accompany these conditions. Avoiding trigger sounds seems logical, but it usually makes things worse. The goal is to retrain the brain's response to sound. Both conditions can improve significantly with the right approach.

## **Hearing Aids**

### **Do you sell hearing aids?**

We fit hearing aids, yes. But "sell" isn't quite the right word. We're not a retail operation with sales targets. We fit a wide range of hearing aid brands and styles, and we recommend based on your hearing test results, communication needs, lifestyle, cosmetic preferences, and budget. As an independent clinic, we can fit virtually any brand available and will suggest what's actually best for you.

### **How do you choose the right hearing aid?**

It starts with the hearing test. Your audiogram tells us what amplification you need and across which frequencies. Then we talk about your life. Do you struggle most in noisy restaurants? Need to stream work calls? Want something invisible? Need rechargeable batteries? Prefer technology you can adjust via an app? The "best" hearing aid is the one that matches your hearing profile, fits comfortably, integrates into your daily life, and is fitted properly using real measurements.

### **What is Real Ear Measurement?**

Absolute Ear Measurement (REM) uses a small probe microphone placed in your ear canal to verify that your hearing aids are delivering exactly the right amount of amplification at each frequency. Every ear canal is different in shape and size, which affects how sound behaves. REM ensures your aids are actually doing what they're supposed to, not just being programmed based on averages. It's the gold standard for fitting verification, and we do it for every fitting.

### **What funding options are available for hearing aids?**

There are several pathways. The Commonwealth Government Hearing Services Program (HSP) provides subsidised or fully funded hearing aids to eligible pensioners, veterans, and some other groups. The National Disability Insurance Scheme (NDIS) may cover hearing aids for eligible participants. Private health insurance may provide rebates depending on your policy. Workers' compensation schemes cover work-related hearing loss. Many people also pay privately, either because they don't qualify for subsidised programs or because they want access to premium technology. We can guide you through the options.

### **How much do hearing aids cost?**

It varies enormously depending on the technology level, features, and funding pathway. Through the HSP, eligible pensioners and veterans can receive fully subsidised devices at no cost, or contribute toward more advanced technology. Private hearing aids range from around \$2,000 to over \$8,000 per pair for premium models. We're transparent about costs and will give you a precise quote before you commit to anything.

### **How long does it take to get used to hearing aids?**

Expect several weeks to a few months. Your brain has been working with reduced sound input, possibly for years, and needs time to adjust to hearing more. At first, your own voice may sound odd, background sounds may seem loud, and speech might feel different. This is normal. Follow-up appointments allow us to fine-tune settings as you adapt. Most people find that with patience and consistent use, hearing aids become comfortable and natural.

### **What if I bought my hearing aids elsewhere?**

In many cases, we can assess and reprogram existing devices, depending on the brand, age, and whether we can access the programming software. Bring them in, and we'll take a look.

### **Workplace and Occupational Hearing**

#### **Do you provide workplace hearing tests?**

Yes. We offer both in-clinic and mobile on-site audiometric testing for businesses. This includes Clause 58-compliant assessments for workers exposed to hazardous noise, pre-employment baseline testing, and ongoing monitoring.

#### **What is Clause 58?**

Clause 58 of the NSW WHS Regulation requires employers to provide audiometric testing for any worker who frequently wears hearing protection because their noise exposure exceeds the standard. Workers need a baseline test within 3 months of starting in a noisy role, then repeat testing at least every 2 years. This applies to manufacturing, construction, transport, waste management, brewing, road crews, and many other industries.

#### **What's included in a workplace hearing test?**

Each worker receives otoscopy (ear examination), pure tone audiometry across frequencies affected by workplace noise, and an individual audiogram. If ears aren't in a testable condition due to wax or infection, we'll advise on next steps rather than produce invalid results. We provide a summary report for WHS record-keeping and can align with your internal reporting formats.

#### **Do you come to us, or do workers come to you?**

Either. We run industrial audiometry in our quiet suite in Forestville and also offer on-site mobile testing across Sydney and surrounding areas for businesses where bringing workers to the clinic isn't practical. Contact us to discuss your specific requirements.

### **Funding and Costs**

### **How much does a hearing test cost?**

Fees depend on the type and length of assessment. A standard adult hearing test differs in cost from a full tinnitus consultation or an APD test battery. We provide a precise quote when you book. Medicare rebates apply in some circumstances if you have a referral from your GP, ENT, paediatrician, or neurologist. Contact us for specific pricing.

### **Can I claim on Medicare?**

In certain situations, yes. Medicare rebates for hearing assessments are available when referred by a medical practitioner. This includes evaluations requested by GPs (including through Chronic Disease Management Plans), ENT specialists, neurologists, and paediatricians. The rebate covers part of the cost, not the full fee. Medicare does not directly cover hearing aids, but other funding pathways do.

### **What government programs are available for hearing aids?**

The main program is the Hearing Services Program (HSP), which provides subsidised hearing services and devices to eligible Australians. Eligibility includes Pensioner Concession Card holders, Department of Veterans' Affairs cardholders, people under 26, Aboriginal and Torres Strait Islander adults with hearing loss, and some others. Through the HSP, you may receive fully subsidised hearing aids or a contribution toward more advanced technology. The HSP does not cover ear wax removal, tinnitus management, or balance assessments.

### **Do you accept private health insurance?**

We don't process private health claims directly, but you can claim rebates through your health fund if your policy covers audiology services or hearing aids. Check with your fund for details of what's covered.

## **Booking and Contact**

### **How do I book an appointment?**

You can book by phone on (02) 9315 8327, through our website contact form, or by email. When you call, we'll discuss your concerns and recommend the most appropriate appointment type.

### **Do I need to do anything before my appointment?**

If you're coming for wax removal, use softening drops for 3 to 4 days beforehand. For all appointments, bring any previous hearing test results, your referral letter if you have one, a

list of medications, and your current hearing aids or earplugs if applicable. Try to arrive a few minutes early so we can start on time.

**What if I need to cancel or reschedule?**

Please give us as much notice as possible so we can offer the appointment to someone else. Contact us by phone or email if your plans change.

**Still Have Questions?**

If you haven't found the answer you're looking for, get in touch. We're happy to help.

**The Audiology Place**

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