

Screening Technique	Advantages	Disadvantages
Pure Tone Screening	<ul style="list-style-type: none"> • Extensively used for over 60 years • Selected personnel (e.g., nurses, speech pathologists) have experience in conducting pure tone hearing screening. • Equipment (screening audiometer) is usually available. • Valid results for most school age children age > 6 years old. 	<ul style="list-style-type: none"> • Not feasible for preschool and some young school age children. • Results are dependent on student motivation, cognitive function (e.g., attention, memory), and development status. • Requires a quiet test setting (influenced by ambient noise). • Language factors may influence student's understanding of instructions and the task. • Requires 4 to 5 minutes of test time. • Does not differentiate middle ear versus inner ear dysfunction (not site specific). • Some children with inner ear dysfunction will pass pure tone hearing screening.
DPOAEs	<ul style="list-style-type: none"> • No behavioral response required. • Not seriously influenced by ambient noise. • Reliable and valid at all ages, including for early preschool children. • Brief test time (usually < 1 minute for each ear) • Test technique is easily applied with minimal training. • Highly sensitive to middle ear and inner ear (outer hair cell) dysfunction. 	<ul style="list-style-type: none"> • Does not assess neural pathways; Children with auditory neuropathy may pass hearing screening with DPOAEs. • Does not detect hearing loss resulting from rare isolated inner hair cell dysfunction. • Not widely used for hearing screening of school age children.

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Tympanometry	<ul style="list-style-type: none"> • No behavioral response required. • Not influenced by ambient noise. • Reliable and valid at all ages, including for early preschool children. • Highly sensitive to middle ear dysfunction. • Brief test time, usually < 1 minute for each ear. • Test technique is easily applied with minimal training. • Detects all degrees of sensory hearing loss with a protocol that includes appropriately low stimulus intensity levels and rigorous analysis criteria. 	<ul style="list-style-type: none"> • Not a measure of hearing. • Does not provide information about inner ear function.