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amplification status, the research methods, or outcome measures used.

Data Collection

Results of the literature search produced the following types of articles consistent with the previously mentioned selection criteria: 1 single-subject (alternating treatment) combined with survey research, 1 single group pre-post test combined with survey research and 1 case study.

Results/Discussion

Tharpe, Ricketts and Sladen (2003) used a singlesubject with alternating treatments combined with survey research method to examine the advantages and disadvantages of FM fitting strategies for pediatric listeners aged 5 to 11. This was achieved by objectively measuring speech perception in a soundbooth using the Hearing in Noise Test for Children (HINT-C) at different azimuths (angles) in a fixed background noise (65dBA SPL). The children's performance was also subjectively evaluated by the classroom teacher using the SIFTER, a 15 item rating scale used to assess educational performance in areas of academics, attention, communication, classroom participation and behavior. The children were also asked to subjectively evaluate their performance when using the FM system using a questionnaire designed in house for the purpose of this study.

Researchers recruited 14 children with minimal to mild permanent hearing loss. All participants had normal cognitive function as was determined by their school placement and parental report. The children were tested in an unaided condition to establish a baseline measure, and three FM conditions: (1) monaurally with an open mold, (2) monaurally with a skeleton mold, (3)

were randomly fit with one of two brands of FM systems (Phonic Easy Listener or Telex Sound Enhancement System).

Results of the FM Evaluation Questionnaire showed that 14 of the 18 children evaluated achieved an overall rating of "some improvement" or higher. A matched paired t-test was performed on the results of the pre-trial objective measures. SRT results indicated an improvement in speech perception in 14 of the 20 children. The t-test was calculated to be t(18) = -7.06, indicating a significant improvement. WRS results indicated a significant improvement only when the aided results were compared to the S:N of 0 unaided condition. The t-test was calculated to be t(18) = 4.32. Results of the pre-trial SIFTER indicated that 79% of the children met the criteria for audiological monitoring