Bone Anchored Implant Candidacy:

Bone anchored implants and bone anchored hearing aids are designed for two specific patient populations:

- Patients with chronic middle ear disease that is resistant to further medical or surgical intervention or patients with congenital malformation of the outer and/or middle ear (ex. atresia and microtia).
- Patients with profound, unilateral sensorineural hearing loss with normal hearing in the unaffected ear (also known as “single sided deafness”).

In general, patients who benefit from a bone anchored hearing aid experience an increased awareness to sounds in their environment, an enhanced ability to locate sound sources and an improved ability to hear and understand speech.

To be considered for bone anchored technology, all patients must go through a hearing aid trial in which they wear a bone anchored hearing aid on a soft headband for no less than 2 weeks in a variety of settings (home, work and school).

If patients receive benefit from the hearing aid, they are referred to the surgeon for a medical assessment prior to implant surgery.

All patients need to commit to the required time and training to become an effective bone anchored hearing aid user.

The Implant Surgical Procedure and Healing Process:

The implant procedure is approximately one-hour in length and is considered a minor surgery requiring only local anesthetic. An incision is made behind the outer ear and a 4mm titanium implant is drilled into the temporal bone of the skull. An abutment is attached that protrudes through the skin and allows the user to connect the sound processor to the implant. Sutures are used to close the incision and the surgical site is bandaged for approximately one week. Pain is typically managed by Tylenol (with codeine).

Healing takes approximately 6-8 weeks to allow the incision to fully close and for the bone of the skull to grow around the implant. Patients report mild pain from the site for approximately one week. Daily cleaning of the surgical site is required once the bandage is removed in order to prevent infection. There is a 10% of infection following surgery which is treated by topical or oral antibiotics. Some patients take time off from work or school for one week following surgery, but it is not required.

Once the surgical site has fully healed, patients are scheduled with the audiologist for the activation and initial programming of their sound processor.

Financial Impact Post-Surgery:

There are no up-front costs to patients who proceed with bone anchored implant surgery as Manitoba Health covers the surgical procedure, internal implant and the first external sound processor.

Patients (of all ages) are responsible for the upgrade costs of their sound processor when it requires replacement ($5,000).

Patients who are not surgical candidates but wish to use the hearing aid with a headband are responsible for all costs associated with the purchase of their sound processor and accessories.

I have read and understand the above information and accept responsibility for all associated costs of device replacement:

______________________________    __________________________
Patient (or patient’s guardian)      Date