



Priority Rating Scale – Adult Audiology

Priority Level	Ideal Timeframe	Presenting Concerns/Diagnosis
1	Within 24 hours	Sudden onset of hearing loss/change in loss with or without vertigo (occurring within past 72 hours) e.g. Meniere’s Disease, viral infection, Meningitis ,or suspected retrocochlear pathology
		Recent head or ear trauma
	Within 2-4 weeks	Oncology or ototoxic monitoring
		Severe vertigo, severe dizziness with nausea/significant change in hearing in past 6 months
		New onset of unilateral hearing loss and/or unilateral tinnitus in past 6 months
		Pre or post-operative assessments for clients already on caseload
	Per Audiologist’s Recall note	Caseload clients needing reassessment (booked before child or adult Priority 2 referrals)
		Young adults with hearing aids fit through this clinic have hearing aid serviced and earmold repairs/replacements done as required through this clinic
2	Within 4-8 weeks	Pre-operative assessment for new referrals
		Recurrent or severe middle ear pathology
		Tympanic membrane perforation and/or ear drainage
3	Within 3 months	Post-operative assessment for newly referred client
		Adult referred by physician/ENT with other medical concerns
		Adults with intellectual disability requiring assessment
		Referrals from other specialist (SLP/OT/MH) where hearing is not the only concern
4	Only book P4 Adults after All C & Y P4’s have been booked	Concerns regarding gradual change in hearing/presbycusis
		Hearing or tinnitus concerns related to noise exposure
		Testing required as part of a “medical” where client declines Private Practice service
		Testing required for DVA/WCB where client declines Private Practice service
		Other – those not requesting testing not having higher priority