

ESRT protocol in Custom Sound® Pro 7.0



When clinically appropriate, electrically evoked stapedius reflex thresholds (ESRT) may be utilized as an objective measure for cochlear implant programming. Research supports using postoperative ESRTs for MAP verification.¹⁻⁶ Cochlear recommends combining ESRT with behavioral loudness scaling to determine upper stimulation levels.



Absence of ESRT response does not indicate a device issue or inability to hear.

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Record ESRT thresholds

Utilize Hughson-Westlake method for threshold detection

- Present stimulation (2–3 beeps) in ascending steps
- Initial step size of 10 Current Level until response obtained
- Reduce step size to 5 Current Level to threshold seek
- Responses may be observed as a positive or negative time-locked deflection
- If stimulation elicits a response, document threshold and proceed to the next electrode

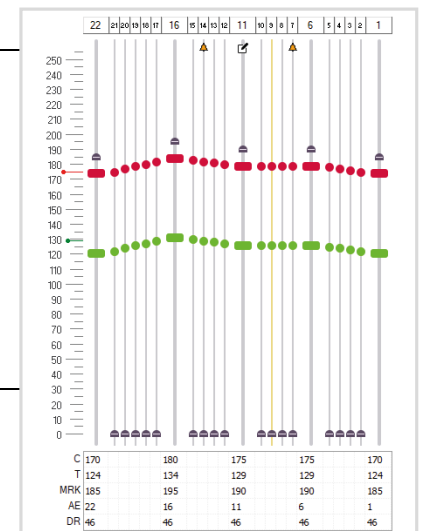
Additional considerations

- Increase pulse width
- Change probe tone frequency (226 Hz, 678 Hz, 1000 Hz)
- The probe tip must maintain a hermetic seal without clinician support. Change probe tip or utilize Otoform as needed.
- In case of a hyper-compliant tympanogram and excessive artifact:
 - Increase probe tone frequency
 - Adding positive pressure manually (up to +50 daPa) may help stabilize the tympanic membrane for recording

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Displaying thresholds in Custom Sound® Pro 7.0

- Manually enter ESRT thresholds by adding values in the objective marker section found in the data grid on the Set Levels screen



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Globally adjust C-levels

- Maintain profile and adjust C-levels to a level that is perceived as “loud” for the recipient
- Beware of upper stimulation levels exceeding ESRT or upper stimulation levels that are unusually low
- An appropriate dynamic range for 40 to 60 Current Level should be maintained

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4. Messersmith, J., Entwisle, L., & Stout, A. (2002). Electrically evoked stapedial reflex threshold: A procedure. *Perspectives of the ASHA Special Interest Groups*, 9(3), 4-11.
5. Pitt, C., Munoz, K., Schwartz, S., & Kunz, J. (2020). The long-term stability of the electrical stapedial reflex threshold. *Otology & Neurotology*, 42, 188-196.
6. Wolfe, J., & Kasulis, H. (2008). Relationships among objective measures and speech perception in adult users of the Hi Resolution Bionic Ear. *Cochlear Implants International*, 9(2), 70–81.
7. Wolfe J, Gilbert M, Schafer E, Litvak LM, Spahr AJ, Saoji A, Finley C. (2017) Optimizations for the electrically-evoked stapedial reflex threshold measurement in cochlear implant recipients. *Ear Hear*, 38(2), 255-261.

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