Living in a World of Swiss Cheese

By Karen Utter, HLA-WA President

According to recent statistics anywhere from 10-17% of our population has a hearing loss—the number one disability in the world. However, many people want to dismiss hearing loss as just a nuisance. This isn’t a good idea. We’ve heard the numbers in the news, that already one in five teens has a hearing loss due to noise. Over age 75 nearly 50% don’t hear well and if you reach 80 then it’s nearly 90% who will have a hearing loss. Seniors don’t have a corner on the hard of hearing market, but somehow the difficulties involved with not hearing well are too easily dismissed or discounted.

Hearing loss is just not a little loss of volume, like turning down the radio; it’s actually a loss of certain sounds or frequencies that make the understanding of speech difficult. Imagine reading a newspaper that has lots of holes in it like that darn Swiss cheese. You read clearly for a time and then something important is missing. You can’t really continue reading without that part so you meander on down the page to something else that may make more sense or you just put down the paper and decide you don’t really need that information.

Hearing loss, even if you are present in a group, may lead to a whole host of emotional issues including very real feelings of isolation or depression. If you don’t understand then it’s up to you to learn what to do to effectively communicate in all situations whether you use a hearing aid or not.

If you or a family member has a hearing loss then our chapter meetings can help with family communication and the rules that will make everyone’s life easier. Blaming others, turning up the volume, or just “tuning out” are temporary fixes to diminished hearing that will only get worse. Whether you are the speaker or the listener, each of us has to learn what works or the end result is social isolation.

See page 4 for information about HLA-WA chapter meetings.
Research Toward Curing and Preventing Hearing Loss in the 21st Century

By Diana Thompson

Dr. Edwin Rubel, Professor of Hearing Science and Founder of the University of Washington Virginia Merrill Bloedel Research Center, recently shared with the Hearing Loss Association of Bellevue Chapter information about research, focusing upon hair cell regeneration and hearing loss prevention. The Bloedel Center was founded in 1989 through a $5 million gift of the Bloedel family, donated in response to Professor Rubel's discovery of inner ear hair cell regeneration in birds. The Center's mission is the discovery of new knowledge about hearing, balance and related disorders, and application of these findings toward diagnostic methods and therapies.

Most hearing loss results from the death of hair cells, the receptors of the inner ear. Difficulties with balance are often attributable to the death of similar inner ear cells. Although most hair cell death is due to aging, noise exposure and certain common drugs can also cause hearing loss. Once hair cells in mammals die, there is no replacement, unlike birds and other vertebrates.

The UW team continues to be a leading center for research on hair cell regeneration and in 2011 spearheaded the formation of the Hearing Restoration Project, a consortium of 14 leading laboratories in the U.S. and Canada working together to create an actual "cure" for hearing loss through regeneration. Current research focuses on gene therapy, the stimulation of reproduction by existing surviving cells, and transplantation of stem-like cells.

While studies on humans are several years away, Dr. Rubel noted that due to recent exciting progress, the question is not IF we will regenerate hair cells in humans, but WHEN.

Dr. Rubel's latest passion is how to stop hearing loss from happening due to drug toxicity, noise and aging. It is well known that certain drugs, for example powerful antibiotics and platinum-based cancer drugs, cause hearing loss. Sadly, these drugs are extremely effective for their designed purposes and widely used. Recently, Dr. Rubel and his colleagues found a new class of drugs that actually protect against antibiotic-induced hearing loss.

Further research on pharmaceuticals is expected to increase understanding of the causes of hair cell death, discover additional drugs that protect hair cells from medications, and lead to greater knowledge of the role of genes.

More information about the Bloedel Center’s mission and current work is available at [http://depts.washington.edu/hearing](http://depts.washington.edu/hearing).

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Cherri Hoyden, Au.D.

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The Shots Not Heard
By Kate Johnston (Shared with permission from MOGIGRAPHIA)

Suppose you were at a mall, or any busy public place, and shots rang out. What would you do? You’d probably duck down first and look around later. Later is when you’d start feeling scared. You’d most likely know in which direction the sound of the shots came from, and you’d do your best to distance yourself from there. You’d try to be as quiet as possible, so as not to draw attention to yourself. You’d be watching other people, if you could see them.

If you were hiding where you couldn’t see anyone, you’d be keeping an ear out for sounds to figure out what was going on. Footsteps, more shots, screams, barked orders from figures of authority, whispers. Hopefully, eventually you’d hear some sounds that told you it was safe to come out, stand up, and walk around again… you’d breathe a sigh of relief.

You’d tell the story to family and friends later. “I was at the other end of the mall,” you’d say. “It was scary, but I hid behind a thick pillar. I was lucky.”

But … what if you couldn’t hear, or heard imperfectly?

The day before the Sandy Hook school shootings, I was eating lunch with a few friends in a public mall. One woman noted that a busy mall just before Christmas would be an ideal place for shooting large numbers of people. She’d read the thing of people. She’d read the thing of people. She’d read the thing of people. She’d read the thing of people. She’d read the thing of people. She’d read the thing of people. She’d read the thing of people.

One of the newspaper reports about the Sandy Hook school shootings stated, “… as the horror unfolded, students and teachers tried to hide in places the gunman would not think to look. Teachers locked the doors, turned off lights, and closed the blinds. Some ordered students to climb under their desks. The teachers did not explain what was going on, but they did not have to. Everyone could hear the gunfire.” *

I thought, “Not everyone.” I wasn’t there but I wondered, “What if I’d been one of those kindergarteners?”

The problem with hearing loss is its invisibility.

I remember when I was working in a large office building. I heard stories from people about times when the power went out. My office had no windows. “If the lights ever go out,” I said, “please come get me.” I had to explain, probably for the umpteenth time, that if I can’t see, then I can’t hear.

The lights didn’t go out for a couple of years, but when they did, a friend remembered and came to get me. Would anyone else have come to get me? Eventually, I’m sure. When they realized I wasn’t where I should be. Or maybe I’d have stood in my doorway, calling out to anyone there to take me with them. I was relieved that I had told someone, and she remembered.

In the wake of all these public massacres, I’m going to have long talks with my friends, and family members. I’m urging everyone with a hearing loss to tell everyone around you what they’d like you to do in urgent conditions. If you’re a hearing person, ask your friends and family members who have hearing loss what they’d like you to do in urgent conditions.

It might save a life.


For more information on emergency preparedness, see HLAA’s information at http://www.hearingloss.org/content/emergency-preparedness
Let Them Hear Us!
By Cheri Perazzoli

When the Americans with Disabilities Act (ADA) passed in 1990, Seattle’s public places rushed to comply with the law by installing listening assistive systems. At the time, however, most facilities managers knew little about Hearing Assistive Technology (HAT), limited sources existed for advice on equipment and best practices, and there were few opportunities for people with hearing loss to voice their preferences. The result? Many venues purchased products that didn’t meet users’ needs, and those with hearing loss felt frustrated by not hearing well (if at all) or simply stayed away. Unfortunately, the same situation continues today at many locations. People who are hard of hearing often encounter one or more of the following impediments to participation in events:

• Lack of signage about available HAT and where to locate accessories
• Cumbersome procedures to secure equipment
• Outdated and/or nonworking equipment
• Untrained facilities staff

Unless venue managers hear from those of us who are hard of hearing, they may assume—incorrectly—there is no demand for hearing assistive technology.

BARRIER FREE ACCESS

New ADA 2012 Standards went into effect last year, requiring hearing aid compatibility, i.e., having a neck loop that works with FM or infrared systems. Many facilities need to upgrade their HAT to be compliant—and we who have hearing loss need to continually request this equipment.

Hearing Loops, also called induction loops, are permanent installations that offer barrier-free hearing access, especially for those with telecoils in hearing aids or cochlear implants. People with hearing loss who do not have hearing aids, or whose devices do not have telecoils, can use a loop receiver and headset. Universal loop receivers work in looped venues throughout the U.S. and Europe. Ideally facilities equipped with Hearing Loops provide receivers too, though individuals may choose to buy their own receivers for around $100.

Hearing Loops in the auditoriums at Bellevue Arts Museum and the Bellevue College Carlson Theater offer accessible presentations and performances. Attend the museum’s free First Friday Lectures and the Bellevue College spring production of Little Shop of Horrors. Residents of Horizon House, Mirabella and Park Shore regularly enjoy programs in their looped auditoriums. The Anacortes City Hall recently installed a Hearing Loop, and numerous churches offer looped spaces and feature events such as Kirkland’s Northlake Unitarian social justice movies.

People with hearing loss must advocate together to make our presence known. Here’s how:

• Choose hearing accessible events and mark the dates on your calendar.
• Invite others and attend as a group.
• Plan ahead. You may need to call the venue and arrive early to secure equipment. If you have a neck loop of your own, take it since there may be none available at the venue.
• Talk to staff and facility managers about the equipment, signage, check-out procedure, and how the equipment worked for you.
• Show your appreciation by saying “Thank you!” in person, with a letter, with a review, FaceBook post—and most of all with your repeat patronage.

Where do you go for date night or special birthday? Are the locations hearing accessible? Which venues have assistive listening systems? How do you know? Would you choose to patronize a hearing accessible venue over one that is not accessible? Our decisions today directly impact our choices tomorrow. Patronize hearing accessible venues!

Cheri Perazzoli
is the
Director of Advocacy,
Hearing Loss Association of Washington and Founder-Director of Let’s Loop Seattle.

Email: LoopSeattle@gmail.com

Loop Access need folks to make up an Access team for the following:

• Work with the Seattle Library to provide hearing access in its meeting rooms
• Attend public policy meetings for people with disabilities in neighborhoods and cities
• Coordinate with other HLA-WA members to attend hearing-accessible events
• Choose a specific location and work with the owner/manager to increase hearing access
• Create a hearing-access video and/or presentation
• Write grants to fund increased hearing access
• Help with HLA-WA and Let’s Loop Seattle’s PR and publications
Chapter News

**BELLEVUE**—2nd Sat. 1:00 pm;  
Lake Sammamish Foursquare Church, Rm. 104,  
14434 NE 8th St. Bellevue  
Hearing assistance: amplification, FM, induction loop, real-time captioning  
Bev: zbev@msn.com or 253-631-3141 or  
BellevueHLA@comcast.net

**EAST JEFFERSON CO.**—4th Mon. 1:00 pm;  
Port Townsend Community Ctr;  
620 Tyler St., Port Townsend  
Hearing assistance: amplification, FM  
Emily: 360-531-2247 or mandelbaum@olympus.net  
Meetings are held during months of Sept.—Oct. and Jan.—May.

**RENTON**—2nd Fri. 12:30 pm;  
Renton Senior Ctr,  
211 Burnett Ave. N., Renton  
Hearing assistance: amplification  
Glenda: philiofam@juno.com or 253-631-2345 (evenings).

**HLA in SEATTLE**—2nd Tues. 7:00 pm.  
Aljoya Conference Room  
450 NE 100th St., Seattle  
Hearing assistance: Amplification, FM, CART (real time captioning)  
Karen: 206-817-3213 (voice msg. or text), 425-742-3228 or  
SeattleHLA@gmail.com

**SPOKANE**—2nd Sat. 9:30 am.  
Spokane Hearing Loss Center,  
1206 N Howard Spokane  
Hearing assistance: amplification, loop  
Deanna: 509-893-1472 or hlaspokane@gmail.com

**TACOMA**—2nd Sat (alters with CI support);  
meets in Feb, Apr, June, Sep, Nov, Dec 9:30 am, TACID,  
6315 S. 19th St., Tacoma.  
Hearing assistance: amplification, FM, real-time captioning  
Gerry: 253-686-1816 or Penny pallen@hearingloss-wa.org

**WHATCOM CO.**—3rd Sat. 9:30 am;  
Christ The Servant Lutheran Church,  
2600 Lakeway Dr., Bellingham  
Hearing assistance: amplification, FM, and captioning at selected meetings  
Don: 360-647-6728 or dongischer@comcast.net

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**What’s Happening?**

**Bellevue Chapter**
Dr. Henry Ou from The Bloedel Research Center, will be speaking at HLA of Bellevue on May 11th.

**East Jefferson Co. Chapter**
On Feb 25th an audio induction loop specialist/installer will be the speaker.

**Tacoma Chapter**
Join us in April, as we explore aural rehabilitation and speech-reading with Lisa Illich, M.C.S.D., CCC-A, Lecturer/Clinical Supervisor at the University of Washington Speech and Hearing Clinic.

**Whatcom Co. Chapter**
Whatcom Co.HLA elected Don Gischer, President; Pam Spencer, Vice President; BJ Sherwood, Treasurer; and Jeff Bergman, Secretary at the January meeting. Bert Lederer and Jennifer Bergman were elected to the Executive Committee.

**HLA in Seattle**
HLA now offers Seattle meetings in the evening to accommodate people of all ages who work or attend classes during the day. Visitors are always welcome! Hope to see you soon!

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Implant Corner:
Valentine’s Day Update
By Susan Vincent

On Valentine’s Day, 2012, I had my first cochlear implant evaluation, in which I just barely missed qualifying for an implant, but was scheduled to have another evaluation in July. Tina Worman, my audiologist, told me that people wanted to know what happened next! I decided it’s time to write the sequel.

Since the criteria for the implant is much more stringent at age 65, if I were to have surgery, I needed to have it before November or I wouldn’t qualify. With my current hearing, even using an FM system in addition to my hearing aids, I had to rely heavily on lip reading. I had difficulty understanding conversation in even mildly noisy situations. I was “hearing” as much with my eyes as with my ears. If I couldn’t see you talking, I probably wouldn’t understand what you were saying. The fact was, my world was shrinking. I worried about how I would manage when my hearing loss nibbled away more and more of my ability to interact with others. But I had also heard about some drawbacks of cochlear implants. Results varied greatly from person to person. Some people reported that people sounded robotic or even like cartoon characters. Of course, no surgery is without risks, either. I had a lot to think about. Dr. Rubinstein scheduled a second evaluation for me for July 3rd. That gave me time to think things through.

I needed more information. I used the Internet to learn more about implants and surgery and watched video clips showing activation. I started going to CI meetings in addition to HLAA chapter meetings. When I asked people there about implants, they told me what recovery from surgery was like, that it was important to do auditory training, and about some problems they had encountered. But what I noticed most was that all the people I talked to seemed really happy! It seemed to me that any problems I might encounter with an implant couldn’t compete with the problems I was having by being essentially deaf. By July, my ambivalence was gone. I had reached the conclusion that there were no guarantees in life. Even marriage has no written guarantee — only the promise of wonderful possibilities. I was finally ready. Tina Worman gave me my second CI evaluation. I thought I was doing pretty well. Maybe I wouldn’t qualify! Tina came in the booth smiling. “You scored 60% exactly!” I had just made it.

Dr. Rubinstein, my CI surgeon, informed me of the risks. I had a 1 in 10,000 chance they would nick a nerve and I would have facial paralysis. But those are pretty slim odds. Besides, I know someone at work who has facial paralysis. People still like her! There was a 1 in 50 chance that within five years I could develop an infection that would require treatment. But I felt that I had a greater chance of being hit by a car because I didn’t hear it coming”. He scheduled surgery for August 20.

The implant was activated and mapped a week later. It was strange at first. When my husband talked, his voice sounded normal. But the sounds that I hadn’t been able to hear before sounded like static. I was excited because that meant that the implant was picking up sound, then passing it along to my brain, which in effect said, “Hey, I haven’t heard that for quite a while, what is it, the letter s, perhaps? I’ll just put static in there until I can sort it out.” It was easier for me to understand my husband, knowing that the static noise was probably an s, th, or sh.

As time went by, the static gradually became the various soft high pitch sounds. Gradually I became able to hear other sounds: our microwave does indeed buzz, and apples make such a lovely crisp sound when sliced. Leaves and plastic sacks rustle. I discovered that our emergency whistle that I didn’t take hiking last summer has now repaired itself. Even our cat has benefited. She can just meow instead of standing hopefully by her dish. More importantly, I can have conversations in the car without waiting for a stoplight.

I am now using a CD for auditory rehabilitation. It helps my brain remember the sounds that my ear used to be able to hear. It also helps me re-learn to listen. My brain has been filling in the most likely word for me, but now I have to listen and choose the correct sound. It’s been years since I’ve actually heard some of those sounds. I am improving a little every day. I am very thankful for the amazing technology. I’m grateful to Dr. Rubinstein, who performed the surgery and for the encouragement and support of the HLAA, Tacoma chapter. Possibilities are indeed becoming realized. Amazing!
**King County to Offer Smart911**

*By Greg Bawden, Battalion Chief with Duvall King County Fire District 45*

King County and all public safety dispatch centers in King County are working to implement a new program that allows residents to provide "critical lifesaving data" to 911 in the event of an emergency call. This web-based application, called Smart911, is a privately run service that is used by some 911 dispatch centers across the country.

If you are registered with Smart911 and need to call 911 in an emergency, King County public safety dispatch centers will be able to see information you have chosen to enter about any special medical needs, disabilities, and sensory challenges.

The service is free, and they advertise that it is 100% private and secure. King County dispatch centers are working to implement this system by the end of 2012 and encourage residents to enter information into the database now.

Residents can go to the Smart911 web site (the link is below) and set up their profile.

Some people may feel this system is intrusive or an invasion of privacy, but participation is voluntary. For more information see [https://www.smart911.com/](https://www.smart911.com/).

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**CI Support Groups**

**North Sound:** Combined meetings with HLA Whatcom County, 3rd Saturday, 9:30 a.m.–11:30 a.m. Christ the Servant Lutheran Church, 2600 Lakeway Dr., Bellingham. FM, real-time captioning, amplification. Refreshments. Contact Bert: bertleederer@msn.com or 360-319-4540(V).

**South Sound:** 2nd Saturday 10:00 a.m.–12:00 p.m. Meets Jan, Mar, May, July, Oct. TACID, 6315 S. 19th St., Tacoma. Hearing assistance: amplification, FM, real-time captioning. Refreshments. Contact Christine to be added to email list: christine@cs-dhhrs.com or phone 253-256-4690 for info.

**Katherine Bouton: Life After Deaf: The Hidden Disability of Hearing Loss**

Bouton will be speaking downstairs at Seattle Town Hall (1119 Eighth Avenue) on Wednesday, March 6, 2013, 7:30–9:00 p.m. Tickets are $5 at [www.townhallseattle.org](http://www.townhallseattle.org) or 888/377-4510 and at the door beginning at 6:30 p.m. Real Time Captioning (CART) and Hearing Loop furnished as a courtesy by Hearing Loss Association of Washington. For accommodation or to request an interpreter please call 888/377-4510.

Bouton will also speak at the Bellevue Art Museum auditorium on Friday, March 8, 2013, 6:30 p.m. For accommodation or to request an interpreter please call Cheri Perazzoli at 425-785-4904.
Washington’s 600,000+ Veterans Face Challenges of Hearing Loss

By Hilary Hilscher (First of a three part series)

When Scott Bally went through basic training at Fort Lewis in the early ’70s, he and other trainees were issued earplugs. “But we were actively discouraged from wearing them,” he said. “They came in a small plastic case with a chain that we hung on our belt loops.”

“‘Real’ men didn’t use them,” he continued. “Many suffered irreversible hearing loss from long-term exposure to weapons fire, and sustained high-decibel noise from helicopters, tanks, and generators. Bally spent three years in the military at Walter Reed Army Hospital in an aural rehabilitation program primarily for officers.

“There was great resistance to recognizing hearing loss as a service-related condition, especially for GIs,” said Bally, who now serves as advisor to the Hearing Loss Association of America.

Fortunately, views have changed in some important ways since then, according to Cmdr. Glen Rovig, Staff Audiologist at the Bremerton Naval Hospital, whose practice serves retired Vets within a 75-mile radius. “Men and women now get hearing tests upon entering and leaving the military, and it’s much easier for Vets to get hearing aids.”

The U.S. Dept. of Veterans Affairs provides state-of-the-art diagnostic and treatment services, including hearing aids, to eligible Veterans.

“We provide the help they need in a timely way,” said Emily Hanson, Audiology Manager for the VA’s Puget Sound Health Care System with clinics in Seattle, Tacoma and Mt. Vernon.

“In FY 2012, our 21 audiologists served nearly 16,500 Vets in Northwest Washington, Walla Walla, Spokane, and Vancouver,” said Dr. Kyle Dennis in the VA’s Audiology & Speech Pathology National Program Office. “Professional, prompt hearing support is one way we, as a nation, say ‘Thank you’ to our military men and women,” he continued.

Though preventing hearing loss is a military priority, it’s still an uphill battle, say audiologists.

Troops in combat don’t like to wear hearing protection for fear of not hearing orders or warning sounds. Ambushes and roadside bombs happen too quickly to don earplugs, and sounds may be too loud to muffle anyway.

“As part of our testing, we always ask about past noise exposure,” Hanson said. “We don’t ask specifically if they used hearing protection.”

Unless their hearing loss was sudden and serious, Veterans, like their civilian counterparts, may take a long time—typically five to seven years—to become aware of and admit to being hard of hearing, and finally seek help.

Upcoming articles will focus on hearing technology, personal stories, and resources. HLAA offers Veterans free one-year memberships; targeted information; and sessions during the annual convention, held this year in Portland, OR, which will feature a symposium by the National Center for Rehabilitative Auditory Research. Look for more convention news on page 9 of this issue and in the next HLA-WA newsletter.

Helpful Resources:

U.S. Dept. of Veterans Affairs at http://www.va.gov
VA Puget Sound Health Care System at http://www.pugetsound.va.gov/services/audiology.asp
Hearing Center of Excellence at http://hearing.health.mil/
HLAA memberships for Veterans of Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF), email: membership@hearingloss.org.
Swedish Audiology Services

We offer a full range of testing and treatment options for those with hearing-related problems and balance disorders, from infant through geriatric populations. Our audiologists work closely with otolaryngologists and neurootologists within the Swedish network if a medical evaluation is warranted.

Services include:
- Hearing aid fitting and rehabilitation
- Bluetooth streaming options and assistive listening devices
- Cochlear implant services and research
- Bone anchored implant services (Bahá)
- Comprehensive diagnostic testing including electrophysiologic evaluation, ABR and vestibular testing

Locations:
- **Center for Hearing & Skull Base Surgery**
  Swedish Neuroscience Institute
  500 17th Ave., Suite 520
  Seattle, WA 98122
  T 206-215-4327

- **Swedish Otolaryngology-Audiology**
  Seattle
  600 Broadway, Suite 230
  Seattle, WA 98122
  T 206-215-1770
  Ballard clinic opening Spring 2013

- **Minor & James Audiology**
  Seattle
  516 Minor Ave., Suite 160
  Seattle, WA 98104
  T 206-622-9916

www.swedish.org/audiology

**Keynote Speaker, Howard Weinstein, Inventor of Solar Ear**

Howard's keynote speech will take place during the Opening Session, Thursday, June 27, 5 p.m. - 6:30 p.m.

**Research Symposium, Latest Developments in Hearing Rehabilitation Research**

The highly anticipated Research Symposium which will be presented by research audiologists from the VA National Center for Rehabilitative Auditory Research (NCRAR) located at the Portland VA Medical Center.

- Diabetes and Hearing Loss: Current Findings and Thoughts
- Approaches to Tinnitus Management
- Approaches to Auditory Rehabilitation

A limited number of scholarships will be awarded to first time convention attendees who reside in the state of Washington. HLA-WA especially hopes to attract young adults to join us at the HLAA Convention. For more information, contact HLA-WA@hearingloss-wa.org
From The Washington Office of the Deaf and Hard of Hearing

Since September 30, 2012, television programs shown with captions must be captioned when shown online as well. Right now, this covers only prerecorded programs. This requirement will be applied to live programming beginning March 30, 2013. In the meantime, the FCC has revised its disability access complaint form (Form 2000-C) to include data about Internet or IP captioning complaints. This is an important implementation of The 21st Century Communications and Video Accessibility Act (CVAA).

Next time you see a television program on the Internet that is not captioned when it should be, all you have to do is go to https://esupport.fcc.gov/ccmsforms/form2000.action?form_type=2000C and fill out the form to submit.

Thank You HLA-WA Donors and Sponsors!

Your donations help us fund projects that benefit people with hearing loss. We are especially grateful for our newsletter advertisers in this issue: Cherri Hoyden, Au.D., CCC-A; Cochlear Americas; University of Washington Speech and Hearing; Listen for Life Center at Virginia Mason; Washington Relay and Swedish Audiology Services. Paid advertising helps us provide outreach newsletters to clinics, and hospitals, and to be distributed at health fairs.

Did you know you can make regular United Way contributions to HLA-WA because we are a 501(c)(3) organization? Check to see if your employer has a matching gifts program and double your donation!

Moving? Each newsletter return costs HLA-WA $1.10. Please help us keep our costs down by letting us know when you move. Send us an e-mail or fill out the form on the back of this newsletter. Choosing the option to receive the newsletter by email also helps HLA-WA reduce costs.

Things Hard of Hearing People Should Not Do
By Lou Touchette

- DO NOT clip fingernails in church or theaters. Clippers do make sounds!
- DO NOT place hearing aids, batteries etc. in shirt pockets. They can fall into the toilet when you lean over to flush.
- DO NOT place hearing aids on a bedside table if you have a dog. They love to chew on them.
- If you do not understand someone, DO NOT nod your head like you do!
- DO NOT leave hearing aids where children can reach them. Batteries do not digest!
- DO NOT leave home without extra batteries. God forbid, you could end up in a hospital.

Need Assistance Processing Phone Calls?

The Washington Relay Service can help you make a convenient connection. Washington Relay is a free service provided by the Washington State Office of the Deaf and Hard of Hearing (ODHH) ensuring equal communication access to the telephone service for people who are deaf, deaf-blind, hard-of-hearing and speech-disabled.

For more information:
Call 800-422-7930 (Voice/TTY)
Visit www.washingtonrelay.com

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Executive Committee 2013

- President: Karen Utter, Edmonds 206-817-3213
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- Kate Johnston, Bellevue

Sound Waves is a quarterly publication of the Hearing Loss Association of Washington (HLA-WA), 4820 156th PL, SW, Edmonds, WA 98026-4846. Newsletters are published August, November, February, and May and can be downloaded free from http://www.hearingloss-wa.org. To receive a copy by US Mail, there is a $10.00 subscription fee (see back of this newsletter for information). Sound Waves is now available in color at the HLA-WA website. The new online format allows for live linking to email addresses and online resources in articles.

We welcome your articles, letters, and notices of coming events. Articles may be abbreviated due to space constraints. Opinions expressed in this newsletter are not necessarily those of HLA-WA or HLAA. Mention of goods or services does not mean endorsement, nor does exclusion suggest disapproval. Any portion of this newsletter may be reprinted or disseminated, as long as credit is given to the individual author or to this publication. We encourage health and service professionals to make copies available to their clients. Please contact us about advertising rates. Questions about this newsletter may be emailed to editor@hearingloss-wa.org. Deadlines for submissions are April 1, July 1, October 1 and January 1.
Sound Waves

Spring 2013

A quarterly publication of the
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Mission Statement:
To open the world of communication to people with hearing loss
by providing information, education, support and advocacy.

Subscription/membership

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Membership in the Hearing Loss Association of America (HLAA) is $20 student, $35 single, $45 family, $60 professional. Membership includes the award-winning bi-monthly magazine Hearing Loss, special convention rates, and discounts on a variety of products. Join/renew here (or online at www.hearingloss.org).

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