

Audiology Clinic

650 Memorial Dr. Bldg 68, Pocatello, ID 83209

Phone: 208.282.3495 / Fax: 208.282.4571



**Idaho State
University**

Dear **Pet Owner**:

Your dog has been referred to receive a hearing test. The results of the tests performed will indicate whether or not a response is present. Your dog will receive an Auditory Brainstem Response (ABR). Note the ABR is sometimes referred to in the literature as a Brainstem Auditory Evoked Response (BAER) or Auditory Evoked Potential (AEP) test. The report of auditory health will be provided to you. We will be using very tiny subdermal needles placed in three (3) different locations on the dog. Foam ear inserts will be inserted into the ear canal being tested. This protocol may take up to 15 minutes per dog after which your dog can go home.

Your dog will simply lie on a small table or for large dogs on the floor, or gently restrained and rest during the procedure. The test requires the dog to stay relatively still so consult with your veterinarian regarding the necessity for sedation (a mild oral sedative). You will receive a report on the state of your dog's auditory health and any recommended follow-up appointments. At ISU Audiology all hearing screenings/ threshold estimations are always analyzed and confirmed by two (2) audiologists.

You understand that your dog's participation is voluntary and that you may withdraw your dog from the test at any time. You also understand that you remain responsible for your dog's health and behavior and that ISU will not be responsible for injuries to your dog or injuries.

DOG OWNER

Signed: _____

Name: _____

Date: _____

Owner Phone: _____