



Mesa Arista Cierra Sequel Endeavour

OPERATIONS MANUAL

Custom Instruments



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GENERAL

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Your completely-in-the-canal (CIC), in-the-canal (ITC), or in-the-ear (ITE) hearing instruments have been custom-made with electronic circuitry and controls to match your particular hearing requirements.

Your instruments may also be programmed to provide additional flexibility and control. These parameters have been set by your hearing care professional and/or the manufacturer and are not adjustable by the wearer.

This manual contains instructions for the three instrument styles shown here. Basic operating instructions are provided on the pages shown. To help you remember, mark the box next to your instrument style.

CIC
pages 2 - 11



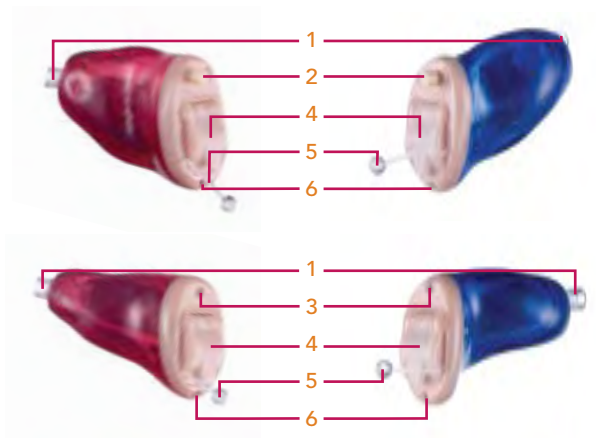
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YOUR CIC HEARING INSTRUMENTS



- 1 = RECEIVER OPENING
- 2 = MULTIMEMORY BUTTON (OPTIONAL)
- 3 = MICROPHONE SOUND INLET
- 4 = BATTERY COMPARTMENT
- 5 = REMOVAL HANDLE
- 6 = VENT (OPTIONAL)

Your custom CICs may contain a different combination of features and controls, depending on the specific model selected for you.

Each instrument can be identified by its serial number, located on the outside shell.

00-00000000
| |
YEAR SERIAL
MADE NUMBER



Left- and right-ear CICs are identified by their shell color or a color marking.



LEFT EAR



RIGHT EAR

CIC BATTERIES

It is very important to use the correct size and type cell for your instrument. CICs use a size 10A cell. Battery sizes can be identified by color code on the packaging. Size 10A battery packages have a yellow mark.



Because of their size, it's a good idea to change and replace batteries at a table or desk to reduce the risk of dropping the instrument or battery.

To insert or replace the battery, open the compartment by placing your fingernail under the edge of the swing-out door and gently pulling outward.



DO NOT open the battery door too far or damage is likely to occur.

On some instruments, an indicator tone will sound when the battery's voltage is low. It is suggested that you replace the battery when you hear the tone.



Existing batteries are removed by pushing the cell out the top of the fully opened door. **DO NOT** pull it out the side of the door.

Place the new battery in the compartment with the plus (+) sign facing up.



Close the battery compartment by swinging the door until it snaps shut. **NEVER FORCE THE DOOR SHUT.** This could result in serious damage. If the door will not close securely, check that the battery is placed properly in the compartment.

CIC INSERTION AND REMOVAL

Before placing your instruments into your ears, make certain the batteries are inserted properly and the battery doors are closed securely.



NEVER use the battery compartment door to insert or remove the instrument! Damage may occur, as the door is not designed to withstand the pressure.

To insert the CIC, hold it with the insertion/removal line between your thumb and forefinger, and with the microphone opening at the top of the instrument.



CIC INSERTION STEP 1

CIC INSERTION AND REMOVAL

Simply guide the instrument down into your ear canal until you feel resistance. Let go of the insertion/removal line.

Push the instrument in until it is resting comfortably inside your canal. To ease insertion, you may wish to pull down on your ear lobe with your other hand as you push.

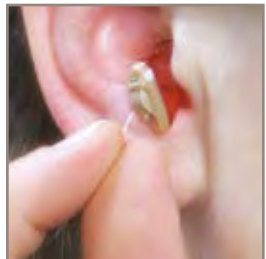
To remove your CIC, slowly and gently pull the insertion/removal line outward.



CIC INSERTION STEP 2



CIC INSERTION STEP 3



CIC REMOVAL

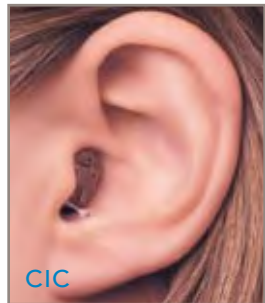
CIC ON, OFF AND VOLUME CONTROL

Your CIC is “on” any time a functioning battery is properly placed in the compartment and the battery door is closed.



To turn the instrument “off,” simply open the battery compartment door so the battery is no longer in contact with the internal components. This is recommended to preserve battery life any time your instrument is not in use.

Your CIC has been set to a specific volume level by your Hearing Professional. There is no volume control on the instrument. If you experience performance that is consistently too loud or too soft, please contact your hearing care professional for advice and adjustment.



CICs with a multimemory button let you select one of three settings for different listening situations.



When turned on, your instrument is most likely programmed for normal listening environments. The additional settings are accessed by pressing the button once to select memory two and twice to access memory three.

Pressing the button three times (or once from memory three) returns you to the first setting. Opening and closing the battery compartment will also reset to memory one.

Your Hearing Professional can provide additional information regarding use of the multimemory feature.

USING THE TELEPHONE

If wearing one instrument, you may find your unamplified ear adequate for phone conversations. If you are wearing two instruments or prefer listening with your amplified ear, your instrument may work best by holding the phone against your ear as you normally would.



Some models work best by holding the phone close to, but not fully covering, your ear. If you encounter feedback, tilt the phone receiver at an angle until the whistling stops. Experiment to find the best position.

Your hearing care professional can provide additional instructions and techniques for your specific instruments.

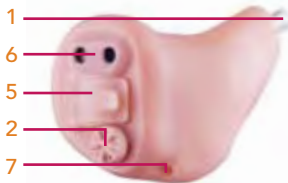
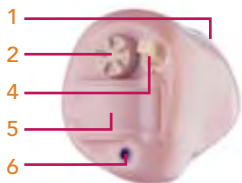
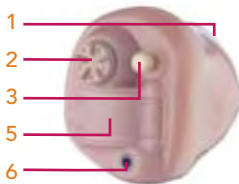
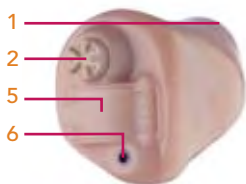


When the instrument is turned “on,” or when you use the telephone, you may hear a whistling noise known as feedback.

Feedback is caused by amplified sounds escaping from the ear and reflecting off your hand into the instrument’s microphone. It is more likely to occur during insertion, removal, and volume adjustment. It should cease when you move your hand.

If feedback persists after the instrument has been inserted correctly and the volume is set to a comfortable level, contact your hearing care professional.

YOUR ITC HEARING INSTRUMENTS



- 1 = RECEIVER OPENING
- 2 = VOLUME CONTROL (OPTIONAL)
- 3 = MULTIMEMORY BUTTON (OPTIONAL)
- 4 = TELEPHONE COIL SWITCH (OPTIONAL)
- 5 = BATTERY COMPARTMENT
- 6 = MICROPHONE SOUND INLET(S)
- 7 = VENT (OPTIONAL)

Your custom ITCs may contain a different combination of features and controls, depending on the specific model selected for you.

Each instrument can be identified by its serial number, located on the outside shell.

00-00000000
| |
YEAR SERIAL
MADE NUMBER



A red or blue bar or red/blue model and serial number type indicates right or left ear.

RED IS FOR **RIGHT** EAR, **BLUE** IS FOR **LEFT** EAR.

ITC BATTERIES

It is very important to use the correct size and type cell for your instrument. ITCs use a size 312 cell. Battery sizes can be identified by the color code on the packaging. Size 312 battery packages have a brown mark.



Because of their size, it's a good idea to change and replace batteries at a table or desk to reduce the risk of dropping the instrument or battery.

To insert or replace the battery, open the compartment by placing your fingernail under the edge of the swing-out door and gently pulling outward.



DO NOT open the battery door too far or damage is likely to occur.

On some instruments, an indicator tone will sound when the battery's voltage is low. It is suggested that you replace the battery when you hear the tone.



Existing batteries are removed by pushing the cell out the top of the fully opened door. **DO NOT** pull it out the side of the door.

Place the new battery in the compartment with the plus (+) sign facing up.



Close the battery compartment by swinging the door until it snaps shut.

NEVER FORCE THE DOOR

SHUT. This could result in serious damage. If the door will not close securely, check that the battery is placed properly in the compartment.

ITC INSERTION AND REMOVAL

Before placing your instruments into your ears, make certain the battery is inserted properly and the battery door is closed securely.



NEVER use the battery compartment door to insert or remove the instrument! Damage may occur, as the door is not designed to withstand the pressure.

To insert the ITC, hold the instrument between your thumb and forefinger with the volume control toward the top of your ear. The battery compartment should be facing away from your ear canal. Then gently insert the instrument into your ear canal.



ITC INSERTION

There are two methods of removing the ITC from your ear. One way is by using your finger to gently massage the area behind your ear lobe. The soft pressure should work the instrument out of your ear.



ITC REMOVAL OPTION 1

The other method is to reach into the ear with the thumb and forefinger, and gently pull the instrument out.



ITC REMOVAL OPTION 2

ITC ON, OFF AND VOLUME CONTROL

The volume control of your ITC enables you to turn the instrument "on" and "off," as well as adjust the amount of amplification provided by the instrument.



Your instruments are ready for use when a functioning battery is properly placed in the compartment and the battery door is closed.

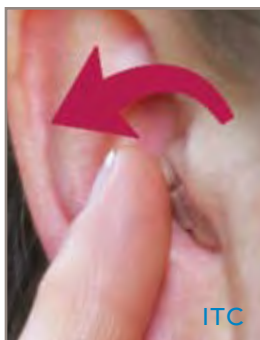


To turn the instrument "on," use your fingertip to rotate the volume control forward, toward your face. You should feel it "click" on if the instrument was correctly turned off. To make sounds louder, continue to rotate the control forward, toward your face.



ON / LOUDER

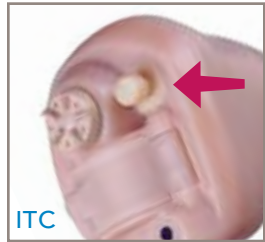
To make sounds softer, use your fingertip to rotate the control toward the back of your head. To turn the instrument "off," rotate the control further backwards, until you feel it "click" and the control no longer turns.



SOFTER / OFF

ITC MULTIMEMORY SETTINGS

ITCs with a multimemory button let you select one of three settings for different listening situations.



When turned on, your instrument is most likely programmed for normal listening environments. The additional settings are accessed by pressing the button once to select memory two and twice to access memory three.

Pressing the button three times (or once from memory three) returns you to the first setting. Opening and closing the battery compartment will also reset to memory one.

Your Hearing Professional can provide additional information regarding use of the multimemory feature.

Your hearing instruments may have directional microphones to help improve understanding in noisy situations like restaurants, large crowd events, parties and other environments where high levels of distracting noise surround you.



When the directional mics are automatically activated, or activated by pushing the button, sounds that occur directly in front of you will become more audible, while sounds coming from other directions will be reduced.



When your instruments are in the directional mode, it is especially important that you directly face those you are listening to, and keep them in your direct line of sight.

USING THE TELEPHONE

If wearing one instrument, you may find your unamplified ear adequate for phone conversations. If you are wearing two instruments or prefer listening with your amplified ear, your instrument may work best by holding the phone against your ear as you normally would.



Some models work best by holding the phone close to, but not fully covering, your ear. If you encounter feedback, tilt the phone receiver at an angle until the whistling stops. Experiment to find the best position.



Effective telephone use with hearing instruments varies with the amplifier in your instrument. Those with either an automatic or manually switched telecoil enable you to comfortably use the tele-phone without removing your instrument. The induction coil amplifies the naturally emitted signal from the phone receiver.



Instruments with the automatic telecoil will automatically activate when a properly equipped phone receiver is placed near the ear. Manually switched telecoils are activated by moving the switch to the "on" position.

Your hearing care professional can provide additional instructions and techniques for your specific instruments.

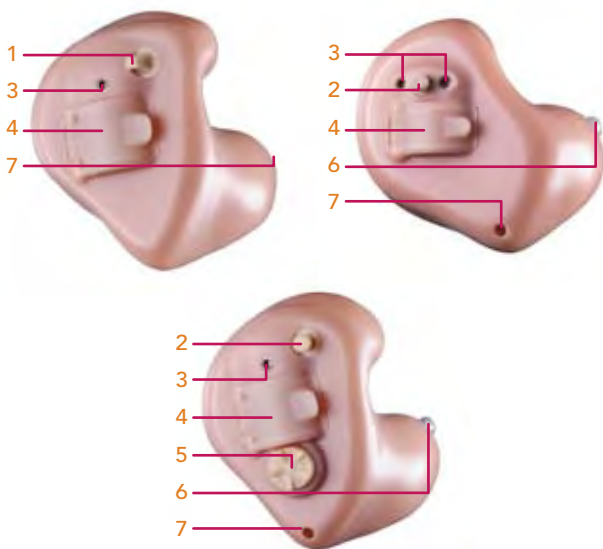


As you adjust the volume when the instrument is turned on, or when you use the telephone, you may hear a whistling noise known as feedback.

Feedback is caused by amplified sounds escaping from the ear and reflecting off your hand into the instrument's microphone. It is more likely to occur during insertion, removal, and volume adjustment. It should cease when you move your hand.

If feedback persists after the instrument has been inserted correctly and the volume is set to a comfortable level, contact your hearing care professional.

YOUR ITE HEARING INSTRUMENTS



- 1 = TELEPHONE COIL SWITCH (OPTIONAL)
- 2 = MULTIMEMORY BUTTON (OPTIONAL)
- 3 = MICROPHONE SOUND INLET(S)
- 4 = BATTERY COMPARTMENT
- 5 = VOLUME CONTROL (OPTIONAL)
- 6 = RECEIVER OPENING
- 7 = VENT (OPTIONAL)

Your custom ITEs may contain a different combination of features and controls, depending on the specific model selected for you.

ITE IDENTIFICATION

Each instrument can be identified by its serial number, located on the outside shell.



A red or blue bar or red/blue model and serial number type indicates right or left ear.

RED IS FOR **RIGHT** EAR, **BLUE** IS FOR **LEFT** EAR.

It is very important to use the correct size and type cell for your instrument. ITEs use a size 13 cell. Battery sizes can be identified by the color code on the packaging. Size 13 battery packages have an orange mark.



Because of their size, it's a good idea to change and replace batteries at a table or desk to reduce the risk of dropping the instrument or battery.



To insert or replace the battery, open the compartment by placing your fingernail under the edge of the swing-out door and gently pulling outward.

DO NOT open the battery door too far or damage is likely to occur.

ITE BATTERIES

On some instruments, an indicator tone will sound when the battery's voltage is low. It is suggested that you replace the battery when you hear the tone.



Existing batteries are removed by pushing the cell out the top of the fully opened door. **DO NOT** pull it out the side of the door.

Place the new battery in the compartment with the plus (+) sign facing up. Close the battery compartment by swinging the door until it snaps shut. **NEVER FORCE THE DOOR SHUT.**



This could result in serious damage. If the door will not close securely, check that the battery is placed properly in the compartment.

Before placing your instruments into your ears, make certain the batteries are inserted properly and the battery doors are closed securely.



NEVER use the battery compartment door to insert or remove the instrument! Damage may occur, as the door is not designed to withstand the pressure.

To insert, hold the instrument between your thumb and forefinger with the volume control toward the bottom of your ear. The battery compartment should be facing away from your ear canal. Then gently insert the instrument into your ear canal.



ITE INSERTION STEP 1

ITE INSERTION AND REMOVAL

Gently rotate the instrument until it is comfortably set inside the bowl of your ear. Pull your earlobe down slightly and press on the instrument to ensure it is firmly in place.

To remove your ITE, grasp the instrument with your thumb and forefinger, and gently rotate it as you pull outward.



ITE INSERTION STEP 2



ITE REMOVAL

The volume control of your ITE enables you to turn the instrument "on" and "off," as well as adjust the amount of amplification provided by the instrument.



Your instruments are ready for use when a functioning battery is properly placed in the compartment and the battery door is closed.



ITE ON, OFF AND VOLUME CONTROL

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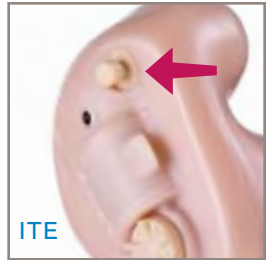
ON / LOUDER

To make sounds softer, use your fingertip to rotate the control toward the back of your head. To turn the instrument "off," rotate the control further backwards, until you feel it "click" and the control no longer turns.



SOFTER / OFF

ITEs with a multimemory button let you select one of three settings for different listening situations.



When turned on, your instrument is most likely programmed for normal listening environments. The additional settings are accessed by pressing the button once to select memory two, and twice to access memory three.

Pressing the button three times (or once from memory three) returns you to the first setting. Opening and closing the battery compartment will also reset to memory one.

Your hearing care professional can provide additional information regarding use of the multimemory feature.

DIRECTIONAL MICROPHONES

Your hearing instruments may have directional microphones to help improve understanding in noisy situations like restaurants, large crowd events, parties and other environments where high levels of distracting noise surround you.



When the directional mics are automatically activated, or activated by pushing the button, sounds that occur directly in front of you will become more audible, while sounds coming from other directions will be reduced.



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If wearing one instrument, you may find your unamplified ear adequate for telephone conversations. If you are wearing two instruments or prefer listening with your amplified ear, your instrument may work best by holding the phone against your ear as you normally would.



Some models work best by holding the phone close to, but not fully covering, your ear. If you encounter feedback, tilt the receiver at an angle until the whistling stops. Experiment to find the best position.



USING THE TELEPHONE

Effective telephone use with hearing instruments varies with the amplifier in your instrument. Those with either an automatic or manually switched telecoil enable you to comfortably use the telephone without removing your instrument. The induction coil amplifies the naturally emitted signal from the phone receiver.



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Your hearing care professional can provide additional instructions and techniques for your specific instruments.



As you adjust the volume when the instrument is turned on, or when you use the telephone, you may hear a whistling noise known as feedback.

Feedback is caused by amplified sounds escaping from the ear and reflecting off your hand into the instrument's microphone. It is more likely to occur during insertion, removal, and volume adjustment. It should cease when you move your hand.

If feedback persists after the instrument has been inserted correctly and the volume is set to a comfortable level, contact your hearing care professional.

BATTERY WARNING

Because batteries can vary in size and performance, your hearing care professional is your best source for lifespan estimates and verification that you are using the proper size and type.



WARNING:

**HEARING INSTRUMENT BATTERIES ARE
DANGEROUS IF SWALLOWED.**

**National Button Battery
Ingestion Hotline (202) 625-3333**



Upon removal from your hearing instrument, dispose of spent battery cells immediately in the proper waste or recycling receptacle.

To help prevent the accidental ingestion of batteries, keep them out of the reach of children.

Always check your medication before ingesting – batteries have been mistaken for pills.

Never put batteries in your mouth for any reason, as they can easily be unintentionally swallowed.

Instrument Care

Do your best to keep your hearing instrument clean at all times. Heat, moisture and foreign substances can result in poor performance.

- Clean daily over a soft cloth to prevent damage from a fall to a hard surface
- Use a cleaning brush to clean debris from around the microphone, receiver and the battery compartment
- Never use water, solvents, cleaning fluids or oil to clean your instrument

Your hearing care professional can provide further information on additional maintenance procedures for your hearing system if needed.

Helpful Hints

- When not wearing your hearing instruments, open the battery door to allow any moisture to evaporate
- When not in use, remove the batteries completely; place your hearing system in the storage container and store:
 - In a dry, safe place
 - Away from direct sunlight or heat to avoid extreme temperatures
 - Where you can easily find them
 - Safely out of reach of pets and children
- Do not take apart your hearing instruments or insert the cleaning tools inside them

Service and Repair

If, for any reason, your hearing system does not operate properly, do NOT attempt to fix it yourself. Not only are you likely to violate any applicable warranties or insurance, you could easily cause further damage.

Should your hearing system fail or perform poorly, check the guide on the next page for possible solutions. If problems continue, contact your hearing care professional for advice and assistance. They are able to solve many common problems right in their office or clinic.

Troubleshooting Guide

| SYMPTOM | POSSIBLE CAUSES | SOLUTIONS |
|--------------------------------|---|---|
| Not Loud Enough | Low battery | Replace battery |
| | Wax or debris in the microphone or receiver | Clean both microphone and receiver with brush |
| | Hearing change | Contact your hearing care professional |
| Inconsistent Performance | Low battery | Replace battery |
| Unclear, Distorted Performance | Low battery | Replace battery |
| | Defective hearing instrument | Contact your hearing care professional |
| Dead | Low battery | Replace battery |
| | Wax or debris in the microphone or receiver | Clean both microphone and receiver with brush |
| | Defect hearing instrument | Contact your hearing care professional |

Your hearing care professional will recommend an appropriate schedule to help you adapt to your new hearing system. It will take practice, time and patience for your brain to adapt to the new sounds that your hearing system provides. Hearing is only part of how we share thoughts, ideas and feelings. Reading lips, facial expressions and gestures can help the learning process and add to what amplification alone may miss.

Please review the following simple communication tips:

For You

- Move closer to and look at the speaker
- Sit face-to-face in a quiet room
- Try different locations to find the best place to listen
- Minimize distractions
- Background noises may be frustrating at first; remember, you have not heard them for a while

TIPS FOR BETTER COMMUNICATION

- Let others know what you need; keep in mind that people cannot “see” your hearing loss
- Develop realistic expectations of what your hearing instruments can and cannot do
- Better hearing with hearing instruments is a learned skill combining desire, practice and patience

For Your Family and Friends

Your family and friends are also affected by your hearing loss. Request that they:

- Get your full attention before beginning to speak
- Look at you or sit face-to-face in a quiet room
- Speak clearly and at a normal rate and level; shouting can actually make understanding more difficult
- Rephrase rather than repeat the same words; different words may be easier to understand
- Minimize distractions while speaking

The following additional information is provided in compliance with U.S. Food and Drug Administration (FDA) regulations:

WARNING TO HEARING AID DISPENSERS. A hearing aid dispenser should advise a prospective hearing aid user to consult promptly with a licensed physician (preferably an ear specialist) before dispensing a hearing aid if the hearing aid dispenser determines through inquiry, actual observation, or review of any other available information concerning the prospective user, that the prospective user has any of the following conditions:

- i. Visible congenital or traumatic deformity of the ear.
- ii. History of active drainage from the ear within the previous 90 days.
- iii. History of sudden or rapidly progressive hearing loss within the previous 90 days.
- iv. Acute or chronic dizziness.
- v. Unilateral hearing loss of sudden or recent onset within the previous 90 days.
- vi. Audiometric air-bone gap equal to or greater than 15 decibels at 500 Hertz (Hz), 1,000 Hz and 2,000 Hz.
- vii. Visible evidence of significant cerumen accumulation or a foreign body in the ear canal.
- viii. Pain or discomfort in the ear.

Special care should be exercised in selecting and fitting a hearing aid whose maximum sound pressure level exceeds 132 decibels because there may be risk of impairing the remaining hearing of the hearing aid user.

IMPORTANT NOTICE FOR PROSPECTIVE HEARING AID USERS.

Good health practice requires that a person with a hearing loss have a medical evaluation by a licensed physician (preferably a physician who specializes in diseases of the ear) before purchasing a hearing aid. Licensed physicians who specialize in diseases of the ear are often referred to as otolaryngologists, otologists, or otorhinolaryngologists. The purpose of the medical evaluation is to assure that all medically treatable conditions that may affect

hearing are identified and treated before the hearing aid is purchased.

Following the medical evaluation, the physician will give you a written statement that states that your hearing loss has been medically evaluated and that you may be considered a candidate for a hearing aid. The physician will refer you to an audiologist or hearing aid dispenser, as appropriate, for a hearing aid evaluation.

The audiologist or hearing aid dispenser will conduct a hearing aid evaluation to assess your ability to hear with and without a hearing aid. The hearing aid evaluation will enable the audiologist or dispenser to select and fit a hearing aid to your individual needs.

If you have reservations about your ability to adapt to amplification, you should inquire about the availability of a trial-rental or purchase-option program. Many hearing aid dispensers now offer programs that permit you to wear a hearing aid for a period of time for a nominal fee after which you may decide if you want to purchase the hearing aid.

Federal law restricts the sale of hearing aids to those individuals who have obtained a medical evaluation from a licensed physician. Federal law permits a fully informed adult to sign a waiver statement declining the medical evaluation for religious or personal beliefs that preclude consultation with a physician. The exercise of such a waiver is not in your best health interest and its use is strongly discouraged.

CHILDREN WITH HEARING LOSS. In addition to seeing a physician for a medical evaluation, a child with a hearing loss should be directed to an audiologist for evaluation and rehabilitation since hearing loss may cause problems in language development and the educational and social growth of a child. An audiologist is qualified by training and experience to assist in the evaluation and rehabilitation of a child with a hearing loss.

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