



# Understanding Your Audiogram

## LABWORX OCCUPATIONAL HEALTH RESOURCES

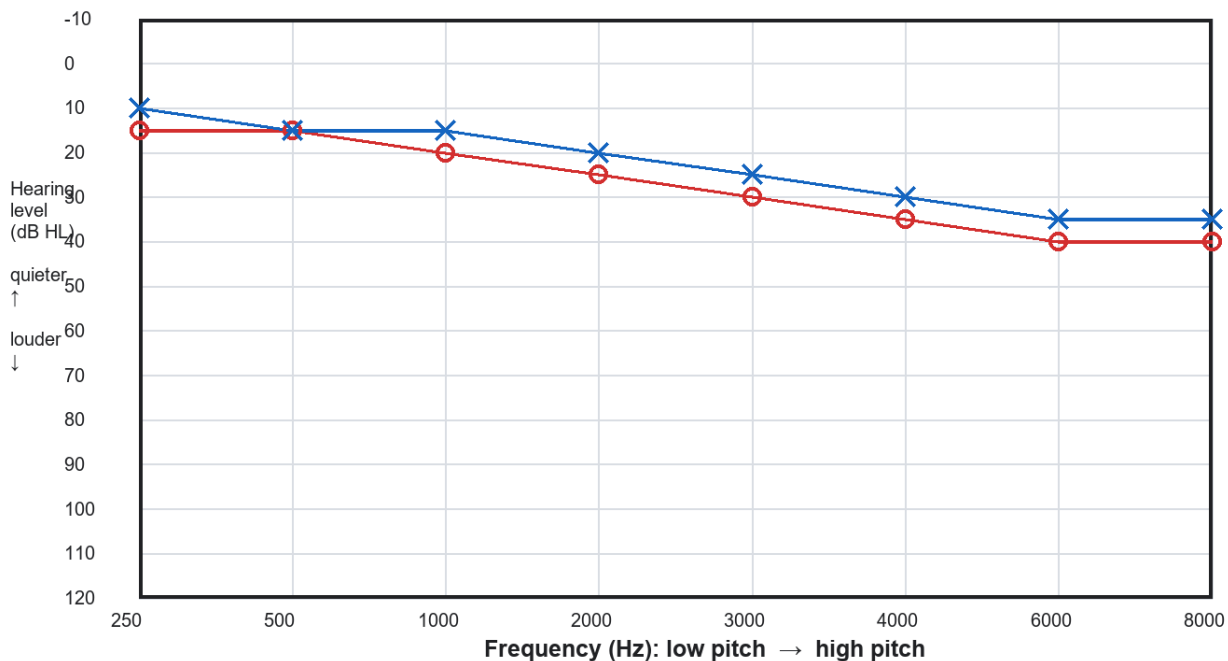
An audiogram is a chart of the softest tones you responded to at different pitches. It is one part of a hearing evaluation and should be interpreted with your test provider or qualified hearing professional.

### How to read the chart

**Across the top: pitch.** Frequency is measured in hertz (Hz). Lower frequencies are lower-pitched sounds; higher frequencies are higher-pitched sounds.

**Down the side: loudness.** Hearing level is shown in decibels hearing level (dB HL). Softer levels are near the top. Points farther down indicate that a louder tone was needed for a response.

**Symbols: each ear.** Common air-conduction symbols are O for the right ear and X for the left ear. Your report may use additional symbols depending on the test method.



*Illustrative example only - not an individual's test result.*

### What the test can show

**Air conduction** measures responses through headphones or insert earphones and reflects the overall hearing pathway.

**Bone conduction** uses a small oscillator placed behind the ear to help a hearing professional identify where a hearing difference may arise. Bone-conduction symbols vary by ear and masking condition.



## Common descriptions of hearing loss

| Type                 | Plain-language description                                                                                                                                                 |
|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Sensorineural</b> | Usually involves the inner ear or auditory nerve and is often permanent. Possible causes include aging, noise exposure, genetics, illness, injury, or certain medications. |
| <b>Conductive</b>    | Occurs when sound is reduced or blocked in the outer or middle ear. Causes and treatment vary; some conditions may be temporary or medically treatable.                    |
| <b>Mixed</b>         | Includes both sensorineural and conductive components.                                                                                                                     |

## Degree of hearing loss

**Degree labels are descriptive ranges, not diagnoses.** Classification systems vary among organizations and clinicians, and an individual's ability to understand speech is not predicted by a single number.

| Description                 | Approximate range                 | What it may mean                                                                                        |
|-----------------------------|-----------------------------------|---------------------------------------------------------------------------------------------------------|
| <b>Within normal limits</b> | approximately -10 to 20 dB HL     | Soft sounds are generally detected within the expected adult range.                                     |
| <b>Mild</b>                 | approximately 21 to 40 dB HL      | Quiet speech and soft environmental sounds may be missed, especially with distance or background noise. |
| <b>Moderate</b>             | approximately 41 to 70 dB HL      | Conversational speech and many everyday sounds may be difficult to hear without support.                |
| <b>Severe</b>               | approximately 71 to 95 dB HL      | Communication often requires substantially louder speech, visual cues, and/or hearing technology.       |
| <b>Profound</b>             | approximately 96 dB HL or greater | Very loud sounds may be faint or inaudible; communication needs vary widely.                            |

## Why the shape matters

Hearing levels may differ across frequencies. A person may detect lower-pitched sounds but miss higher-pitched speech details, or the reverse. This can make speech audible but unclear, especially in background noise.

## What happens after an occupational hearing test

- Review the results and any written notification provided by your employer or test provider.
- Continue using hearing protection correctly whenever required.
- Ask whether follow-up, retesting, or referral is recommended.
- Seek prompt medical care for sudden hearing loss, severe dizziness, ear drainage, intense ear pain, or other urgent symptoms.

This guide is educational and is not a diagnosis, treatment recommendation, or substitute for evaluation by an audiologist, physician, or other qualified professional. Occupational-program decisions remain the employer's responsibility under applicable requirements.

Regulatory reference: OSHA 29 CFR 1910.95 (Occupational Noise Exposure). Accessed September 2026: <https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.95>