

# Transcript

## **Sofia**

Hi everyone. So today we'll be talking to an audiologist here in Toronto ON at the hospital for Sick Children. Her name is Dana, and she's so graciously agreed to sit down with us today and tell us a little bit about what a day in her life looks like as an audiologist. So. Hi, **Dana.**

## **Dana**

Hey.

## **Sofia**

Would you mind introducing yourself to our audience and sharing a bit about your background and experience in audiology thus far?

## **Dana**

Yeah, definitely. Yeah. My name is Dana. I'm an audiologist here at sick kids, and I've been working here for almost five years. And before that, I was working at another children treatment center in Ontario. And then before that was, I was working in Newfoundland and and. Really, my kind of my intro to audiology is that I also have hearing loss and I've actually come through the sick kid audiology department myself I think my first hearing test here was like at six months old and came through all the way to 18 and then from there I did my audiology degree in Halifax, NS at Dalhousie University and kind of went from there and I've always knew I wanted to be working with children. So it's really a. Really a great opportunity to dream come true, to be working with Parents and kids.

## **Sofia**

Is it amazing to see how many people go into the fields of audiology because of a personal connection that they have, whether they themselves have hearing loss, or know somebody with hearing loss? Did you find when you were doing your program about housing, were there a lot of people there that had that personal connection?

## **Dana**

Yeah, definitely so. It's a three-year program at Dalhousie, so you kind of get to know the other classes and I think the year above me and the year below me, there is at least one person with hearing loss and hearing aids as well. But really it's kind of interesting. The first year you always go around and kind of like ask like who? Like how people found this

profession and how they kind of found their way here. And usually people would be like oh. Yeah. Like a family member or someone that I know, like has hearing aid. And I just found it really interesting. Like, I went to a few appointments with them and then there is some people are kind of stumbled across it like very. Sporadically and they're just kind of like, oh, yeah. Like I kind of knew I wanted to go into the healthcare field and just they. Usually a lot of people, actually I think wanted to look into speech language pathology and then they kind of doubled across audiology like coincidentally and like, oh, like, this actually seems like. A better fit. But I say most people actually do have a personal connection, either a family member or friend, or either themselves as well.

**Sofia**

It's really cool. So I guess because you have that personal connection when you started your degree in audiology, you sort of knew what to expect as an audiologist did becoming an audiologist sort of meet your expectations of what that was going to look like. Or what were some things that you discovered that you didn't know beforehand?

**Dana**

I think actually it exceeded my expectations. I it's kind of funny. I knew I wanted to work with kids. I don't know if it was based on my experience as a kid or because I truly have never worked with children before. I started working with kids in this profession. Like, I didn't really do much of like, the summer camp, camp jobs or anything like that, but. I don't think I really knew what to expect. It really exceeded my expectations because I didn't really know what to expect with working with children in general and then working with this caseload, I was kind of just going off my personal experience,

**Sofia**

Yeah. So why don't you tell me a little bit about what a day in the life looks like for you?

**Dana**

Sure. Yeah. there's a lot of diversity in our our day-to-day like we see a lot of different populations. So what we see in our day-to-day different from what like a clinician in a private practice or even working with adults would see. So on average it depends on the type of kids we're seeing. That we can see up to anywhere from 4 to 7 kids a day, depending on the type of appointment. So. Sometimes it's all hearing aid kids and you'll just do the hearing test, the hearing aid stuff and everything like that. And sometimes it's a lot like we see a lot of, like diagnostic testing or do a lot of diagnostic testing where we're just trying to figure out if there's a hearing loss and they don't yet have hearing aids. sometimes we'll have a big mixture where we do like a hearing aid kid like, just a diagnostic hearing test or

we'll see like a baby where it's a longer appointment and then we'll sometimes have like, we also do vestibular testing. So sometimes we have one of those thrown in there and then I also work with the cochlear implant team. And sometimes there's also one of those appointments thrown into the day-to-day

**Sofia**

For sure. And you mentioned that you had experience working as an audiologist prior to, Sickkids. Was that in a different clinical setting?

**Dana**

Yeah, my first job was in a hospital setting in Corner Brook, NL, in Atlantic Canada and. It was a hospital setting, so it was a lot of diagnostic testing and they also have a hearing aid program out there that's really great. So a lot of diagnostic testing and hearing aids. But just because of the population that's out there, it the majority geriatrics like I did see children as well. But it was pretty few and far between that.

**Sofia**

MHM.

**Dana**

it was a hospital based job and then my job after that was at the Children Treatment Center in Oakville They work through the infant hearing program, so they do a lot of diagnostic testing and hearing needs for kids under 6. And then I came here.

**Sofia**

Great. And can you describe some of the differences between, you know, just for a lot of our master students who are doing their masters in audiology and are trying to decide whether they would want to work in a more hospital based setting or private practice based setting or even research institutions. What are some sort of the differences in terms of what audiologists are to do in those different settings?

**Dana**

Yeah. And I think there's a lot of different jobs that I think people aren't aware of within the field of audiology. I've never actually worked in private practice, but I say it's different in a sense that you do a lot of hearing aids. So those people are really up to date from like the latest hearing aid technologies. And they are very good They primarily see adults in private practice, so they are typically, you know, answering a lot of technology related questions because obviously adults are going to ask a lot of questions about what these devices can

do so it'll take less time to do a hearing test, but they do a lot of hearing aid work and they can kind of see many more patients than what a hospital setting could. In terms of hospital setting. It's more like diagnostic

### **Dana**

the other type of field within audiology is like also the manufacturer side of things. So there's like the product trainers, the people that work specifically with the manufacturer that will go and train people on their new devices and new hearing aids. They act as like a Technical Support. They're not doing necessarily as much clinical work with like patient facing clinical work but they're working with the clinicians who provide those devices and products to people. That involves like a lot of travel and some people I know a few people that do that job, but they really enjoy it There is also obviously the research side of things as well and the public policy side of things

### **Sofia**

So you know, you do a lot of diagnostic testing, but maybe you can elaborate more on the specific tasks that you would do each day. So when a patient comes in?

I know every single patient is different and it's really hard to sort of generalize, especially since you're seeing such different populations anywhere from infants to teenagers to younger children, and whether they have hearing aids, whether they're bilateral, unilateral or whatever it is. But what are some? So there's such a chain reaction

between the otolaryngologist and the technologists and the audiologist, everyone's just working together. So maybe if we could hone in a little bit on what is the specific tasks that an audiologist completes

### **Dana**

That's a really interesting thing for Pediatrics in particular because. Obviously, when children are learning how to speak, they need to be able to hear, and as they learn how to speak, they're imitating what they hear. So for a child with a speech delay and they, in order for the speech language pathologist to do their job and to help the child work on their speech. Bills are whatever they need to work on is that we need to make sure that they're able to hear all the sounds. we have to essentially figure out how well are they hearing in order for them to learn how to speak and then? And Toddlers and young children can be prone to ear infection. So in order for us to kind of manage the hearing side of things, sometimes the hearing can be fluctuating. If there's things like ear infections or there is ear pathology that is out of our scope of practice to kind of treat and manage in which where the. Total angle, it just will come into play and help manage sighted things and then we can

also do our job better and and make sure that we. Or. Amplifying or dealing with the hearing needs appropriately and then also from the same side of thing like the speech language pathologist can play a role there, because everything kind of interconnected in that in that.

**Sofia**

Way. Yeah. So I imagine there's just a lot of communication that needs to happen with everybody around the patients.

**Dana**

Of there's a lot of phone calls and emails that kind of go back and forth about a lot of different aspects to make sure that everyone doing their job and being connected and. Keeping up to date on whatever we. Thank you.

**Sofia**

For sure. OK. So on a different note, in your experience, what are some challenges that you face as an audiologist and how do you overcome them?

**Dana**

The first thing that comes to my mind is kind of addressing this stigma against wearing hearing devices and hearing use, which it's interesting because obviously glasses are another type of like, assistive device and people are so willingly when they find out that they can't see, they're like, Oh yeah, like, I'll get glasses. For contacts and it's just such an easy solution, but it's interesting that now. Like when you identify hearing loss and you're like, oh, like we need hearing aids. Like, you'll some people, you'll get, like, push back and like, oh, no, like, I like, we don't need those or like that stigma against wearing hearing needs, which I actually think it's improving It's much more technologically advanced and smaller, but it doesn't seem to be as much of A burden, but I think it still not quite at the level. of acceptance as like glasses are

**Sofia**

That's really interesting. So how much of your job would you say is that sort of, you know, educating piece, educating families, educating teens, kids on the importance of?

**Dana**

Oh, I say like a good chunk of my day-to-day spend counseling. Even this morning I had an hour booked for one of my patients and I think I spent 15 minutes doing actual hearing tests and about 45 minutes talking about and counseling about the benefits of hearing aids

and the technology and The cost benefit analysis, essentially of wearing hearing aids versus not we kind of forget that not everyone has the same base level of knowledge, And I think also that kind of runs into the stigma where it's like. You tend to say hearing aid and people imagine like the giant like devices that used to be and don't realize that there's been a lot of improvement, but. I think. It's just remembering that a lot of people don't have the same knowledge, and even though what we think might be common sense, just because we're so immersed in this world is we have to. Remember. That we our job and our our role in this healthcare system is to kind of make sure that they have all the information so they can. Choose whether or not. Or try to believe it's the best decision for them, but it's hard to know that or do that if they don't have all the knowledge around the devices and it can be completely new to them so.

**Sofia**

Yeah, that's so true. It's easy for people like us who came up in this kind of program and whose parents are very well informed. And you're an audiologist now, so you're clearly always thinking about hearing. And it's easy to forget that people don't actually realize. What a hearing aid looks like what it is. What it does?

**Dana**

Yeah. And like I think especially because the technology is advanced so well. So like all often say to team, you should be like, well, you can stream directly to the hearing aid and not usually like kind of convince them they're like, oh, so I don't need headphones anymore. And I'm like, no, like, you really don't like you have essentially headphones all the time. If you want to stream music or whatever.

There's other things, but usually that's like a good, enticing point to be like. Oh, yeah, like, this is one really cool feature that can draw people in and they just wouldn't know that if you don't tell them.

**Sofia**

Mm-hmm. So moving a bit to cochlear implants, I would wonder what is the most common concern that comes from families when when a cochlear implant is recommended to their child?

**Dana**

You know what? I'm actually quite new on the cochlear implant team, but I think some of the things I've observed. That. People are very concerned because it is a surgery. And is the. I think the physical act of also like putting their child under for this big surgery and it's a

big decision. People get nervous that. What? Like if it if it? Like if they're seeing a little bit of benefit. From the hearing needs. They're a little bit nervous to lose that when you do the surgery, not knowing what's coming and it's hard to know what to expect. I think with the cochlear implant, until you actually see the progress that as they go.

And with hearing aids, what? What would you say is the biggest concern? For families or some of the biggest concerns.

### **Dana**

I think it depends on the age, but I think the biggest concern for a lot of families is that especially for school age children is that. The actual physical appearance of them and people are understandably worried that it will kind of. Make them more. Apparent or obvious, and they they don't obviously know and want their child to be like picked on or anything. But I think for a lot of my families it's like. The. Actual. Seeing the devices on on their head, and I think until they're able to see. The benefits of it, which is a lot faster, it's hearing like you can put it on and immediately notice the change in their listening behaviors. So I think a lot of people worry about the social ask. Of the the hearing aid and the social emotional side of things.

### **Sofia**

So do you think having gone through the program yourself and being a hearing aid user has given you? Maybe not an edge, but how do you think it's helped you to be a better audiologist?

### **Dana**

Oh, definitely, definitely I. I don't tell all my families that I wear hearing aids, but what I noticed a lot of the times is that. Families that I think are having a little bit more of a trickier time accepting the hearing needs become more aware of looking at other people's ears. So like I'll have families that I've seen a handful of times, it's only they'll be like, oh, you wear hearing aids. I'm like, oh, yeah, they're like, we just noticed them and like, they're kind of pointed out that way and they'll be like, oh, that's so interesting. Like it does, I think. Gives. It gives me like an edge like you said, like I think it's only worked to my benefit in this field because I think they can see like, oh, she wears hearing aid, then she's still able to, you know, like have a career in this type of field or have a career in this hospital. And. Do well and like I think for the families that I. Don't tell and they kind of come to that on their own realization. They're like, oh, like she's doing so well. Kind of thing. And like, I would have never have known that she wore hearing aids, which is what some families will say, but it definitely does give me a little bit of a counseling edge.

**Sofia**

You see, when parents find this out, do you see sort of an immediate shift in? Sorry, there's a they're literally landing right now. That's crazy. I've never actually seen it happen.

**Dana**

Yeah, this is a great view of the.

**Sofia**

Because you know. The this hospital is the only one of all of the hospitals in this area with a helicopter pad so. So the people that come to like Mount Sinai or Princess Margaret or TGH, they land here and then they they go to the dull hospital. Through the tunnels.

**Dana**

I did not know that.

**Sofia**

Yeah. It's so crazy.

**Dana**

But it's. Obviously I've never. I've only been in this building like, twice. I didn't realize it's such a good view.

**Sofia**

It's like Grey's Anatomy.

**Dana**

That's cool.

**Sofia**

, let me try that again. So once parents find out that you were a hearing aid, do you see an immediate shift in terms of hope for their child's future or?

**Dana**

Use. Yeah. They'll usually ask a few questions about kind of like my experience with them and. They definitely, I think get more. Like hopeful, I think in a sense, because I think you're when you're telling someone that there's a hearing loss or anything like. It kind of zones in for some family. Family goes or something wrong with my child, but it doesn't always have to be like a negative thing. And it I think can be really empowering for parent to see,



especially when it's like a baby or a toddler or someone that hasn't quite. Growing up to be like a kind of a functioning child or whatever in the environment or about the wrong word. When they're still so young that they haven't quite seen much of their growth and development, but it becomes. More hopeful because then they can see all like my child can kind of continue like a normal life. Like quotations like a typical life without any concerns. And I'll often tell people about being legal like they can really do whatever they want to do with their life. And if they don't, it's not going to be because of the hearing.

**Sofia**

MM. Yeah, it's always difficult when parents hear the news, their mind automatically goes into thinking that somehow. Their life is going to be different than it could have been.

**Dana**

Yeah. And it's truly like, you know, you can put the devices on in the morning and if they're a good hearing aid user, you could forget about them until they go to sleep and you can kind of continue on and go to school, do sports, do activities and you could. Really, truly forget about them until you have to take them off for the end of.

**Sofia**

Ray.

**Dana**

The.

**Sofia**

Day. And what about your patients themselves? Your pediatric patients, do they ever? Care to know that you also have hearing aids? Does that impact them in any? Way.

**Dana**

I mean some of them find out, like, coincidentally, they'll just like notice. I think they do enjoy seeing that and depending on the age of the child as well, like, I find that like the early school age. When they tell their kids they've been like going out, like **Dana** wears hearing aids, the kids will kind of will be at that age being like, oh, like, that's really interesting. Like, I have to see them. Like, we'll compare, like, and they'll be like, oh, like, you're their pink. And I'm like, yeah, I'm. I'm like, what colors are you working like, they'll. It will be kind of interesting to see, like, engage with them in that way because I don't know how many people they run into that also have hearing aids and. I think it's a. Kind of a fun little

bonding moment. Yeah. To give them that opportunity to kind of show off their devices, but someone else that also has them.

**Sofia**

Mm-hmm.

**Dana**

It's kind of kind of cool.

**Sofia**

We're sure. And like you said, they're so unnoticeable now with the way they're manufactured that we probably run into so many people every day and just don't even notice.

**Dana**

Yeah, totally, totally.

**Sofia**

OK. So patient care is clearly central to audiology. You said he spends the majority of your time counseling. Do you, could you explain? Why patient interactions are so crucial to audiology?

**Dana**

I mean, I think it's like any healthcare relief, but you need to kind of factor that relationship in order to have them trust the recommendation that you're giving them is. Legitimate like some like. UM. Like you want to be sure, I think as a person going to an appointment, being like we want to be able to trust this person, that they're going to guide me in the way that it's actually going to better my life or better my child's life. But in order to do that, you. Have to kind. Of take the time to kind of get to know the child or the family and. They'll figure out what their concerns are, so it is. Definitely a very patient. Center family centered type of profession, especially working with Pediatrics.

**Sofia**

And because you're working with Pediatrics, I'm curious about what the most common sort of complaints are around wearing their devices. What's?

**Dana**

Like from their kids or the parents?

**Sofia**

And both.

**Dana**

OK. Well, you know what I get along in the summer that their ears get sweaty and their ear molds get a little bit itchy, but unfortunately that's kind of unavoidable with this humidity. Trying to think about it.

Speaker

Uh.

**Sofia**

Please wonder if you've ever had any personal experience, either yourself or from hearing from patients about the whole hearing fatigue phenomenon.

**Dana**

Yeah, yeah, I believe it and like, honestly. I'm all for children taking breaks from their hearing. I truly believe that there is such a thing as like hearing fatigue and I think it does take a lot of energy sometimes to. Be out in the world depending on the environment, because the hearing aids do amplify everything, so it's not like it's necessary. Really filtering out a lot of the background noise at times, like you could still be in noisy situations and don't drag a little bit and you could still be using a lot of energy in those environment to listen. And I even like myself like I'll like sometimes I'll be out and about and in noisy environments and I'll get home and like take them out for like. Half an hour and I think that's totally OK and I will tell some of my patients that. As well, but. Knowing that they're good hearing user and we'll put them back on like, I think it's totally OK to take breaks every so often. So I totally think the hearing fatigue is a real.

**Sofia**

Yeah, for sure. I agree. Over the years of living meeting. Other while I work cochlear implants, so meeting other cochlear implant users, we all have that same sort of shared experience in which the 2nd we get home, the device is coming off and unless we are. Needing to have a conversation with someone, it'll be off for the rest of the evening just because of that. There's just this. Sensation that happens when you take it off after having had a full day of wearing it, that you're able to really just sort of relax your brain and and not have to work because like you said, even if you're in quiet environments, it still requires a lot of brain energy to keep hearing because you're hearing. Small noises, which are still things your brain has to recognize and just possibly ignore, so definitely agree.

**Dana**

Yeah, definitely. Yeah, definitely. But you know you have to be like a little bit careful with who you tell that recommendation to because some, obviously some parents will run with it or some kids will run to. Being. Like, oh, like David told me that I didn't have to wear my. Devices at home. I'm like, no, that's. Not true, but you you can take.

**Sofia**

I can. A break, but you should put them back on. I can imagine. I also. I guess it makes a big difference when you're in that learning. Area to yeah. Of.

**Dana**

Yeah, definitely. Definitely in the first, like, early school years, toddlerhood and babyhood, too, like it when the parents are still kind of in control, it's still important to wear them. Like all waking hours. But I think when you become like a teenager and a little bit more self aware and can self regulate a little bit. I think it would be OK to take breaks. Because I think that like you can treat a. Teenager like an adult and. Sometimes you can't expect adult to wear devices and whatnot for all hours of the day for the exact same reason you said, but it's sometimes just you need that little bit of a. Brain break, yeah.

**Sofia**

So just a few more questions about like the future. So how do audiologists stay up to date with advancements in audiology, given how many new products and new features are released every year?

**Dana**

Yeah, definitely. Product updates come very quickly. Very often I think we're really lucky here. The kids that we have, the manufacturers come to us and they present whatever new update or new product that they have, which is really convenient for us and I believe a lot of the private practice in other hospitals will do the same that they'll arrange these visits. To kind of keep everyone up to date. But then there's also like a lot of opportunity to go to conferences or even like afternoon. Like webinars and or like stuff like that. Like there's a lot of opportunities now to do things virtually, especially since the pandemic. But there is always opportunity through the various like organizations like the Canadian Academy of Audiology or Speech Language. Audiology Canada or? Looking for SEC speech or speech? Language. Audiology Canada. They're always emailing out, like different opportunities to go tune into a webinar and it's maybe just one hour on a random day. And then there's conferences that can be a couple days or one day. There's a lot of opportunities out there

to kind. Of keep up to date. The water is the new. Stuff, and especially for larger centers sometime. Only one person go to a certain event and like they can come back and kind of spread the word among all of us, which is really, really useful. But there's a lot of opportunities to kind of stay up to date.

**Sofia**

Yeah, it sounds like it's kind of even up to the product. The company, the brand companies themselves to sort of show the clinical world what they've what they've designed and how that will impact them.

**Sofia**

That makes sense. OK. So given our world of technology and AI and everything, that is sort of coming up every single day, what emerging trends or technologies do you see shaping the future of audiology or how do you think? Archaeology will be affected.

**Dana**

Well, we kind of already started to see with AI like there's some. I think one or two manufacturers that are starting to kind of incorporate more AI into their hearings, which I don't fully understand any more questions beyond that. But I think what we'll start to see more often and you'll you can already see a little bit now is that more kind of general. Umm. Tech companies, I think, are going to start developing hearing aids like I think I heard like A and I don't know if it actually something in the works or if it's out or. Where where they are in the process but like I pretty sure that like Apple is thinking of like developing some sort of a hearing device. And I think companies like that are think are going to be dabbling a little bit more in. Hearing aid type devices, whether or not it's something that we could actually program in our clinic, but. I think stuff like that will start popping up more because especially now like AirPods are huge and also it's like wireless like devices are becoming so big that it's not out of the norm to have something in your ear. So I think. That will be an interesting advancement for us for like the general term of like over the counter hearing you and like you can walk into a store and buy hearing aids like that. Will be interesting with like the mixture of like AI kind of wrapped in there too.

**Sofia**

Mm-hmm.

Speaker

But.

**Dana**

You know, with predict from that but.

**Sofia**

Mm-hmm. And you obviously worked through the pandemic, so I also wonder what did sort of working as an oncologist, remote look like, was it effective, do you think? It's possible for there to be a world where patients don't need their audiologists to program their devices. Or do you think that? That's just not possible.

**Dana**

Yeah, I think we're kind of in a unique scenario for the pandemic because being outside. But we our clinic was still open. So we are still seeing like urgent cases and we're seeing kids from. Outside of the Toronto region that couldn't go to see an audiologist closer to home because that clinic was closed due to the pandemic. So we. Were. Still seeing quite a number of kids coming through, so I think what has been interesting in terms of the remote side of things is that we're realizing that there are opportunities. Not necessarily. To do all of the hearing aid and cochlear implant that remotely, but you can, we've been doing like a little bit of like remote cochlear implant programming and like stuff like that for families that don't live close by. So like if they're the. If they live like up north or something and it's difficult for them to come down, they started doing that remote mapping through the pandemic and it kind of stuck around for a few locations just because it saves so much travel time and so much of the hassle. And then I think also we've. For our vestibular clinic here, it's the kids that we've incorporated. Like a virtual visit before the kids come. In for their. Type thing to do all the case history and that was something that we started with the pandemic that worked really, really well and it saves us a lot of time when they actually come in that we can spend an hour talking about. Their dizziness or balanced concerns and kind of get all that case history information and then it helps us kind of triage and kind of be more organized when they come in to do the testing. We don't have to ask as many questions and but not so that was something that we started doing with the pandemic that we kind of. Captain, our. In our clinics today and it's been working really well and we probably wouldn't have started doing that without the pandemic. So interesting.

**Sofia**

Yeah, that's really cool. Yeah. I would be curious to see how a remote mapping would would.

**Dana**

Work. I haven't done one myself, but. UM. Couple of my colleagues have done a few and it's been really successful. I think it does require some. Shipping of like laptops for you

need obviously the software, but I think it has worked out for the cases that we've needed it for and obviously you can't do it for everyone and like they're never going to be day where audiology is fully a remote job like we still can't do our hearing tests and our diagnostic testing remotely so. There's always going to be an aspect where you're going to be in person.

Speaker

And.

**Dana**

Not remote, fully remote.

**Sofia**

Because I guess when you're doing a hearing test, if it's coming from the computer, it's not true.

**Dana**

Yeah. And like you have to be able to kind of calibrate and control the volume a little bit and a little bit hard to do that remotely like I think there could potentially be a way to test older children and adults that can kind of do the more conventional hearing test. Through, like raising their hand or pressing a button, there possibly could be a way to rig that remotely, but I'm not even too sure, but I think for Pediatrics or we're always going to be in person and.

**Sofia**

Yeah, that makes a lot of sense, especially for all of the infants you see and and like people coming in through the infant program and the. Babies that are just being diagnosed, if I can't. Imagine how you're to do a hearing test.

**Dana**

Yeah, like there's always and there's so much equipment, too, right, that we have to make sure that certain pieces of equipment during the right plays and it's like if you're doing that remotely like how are we getting that equipment to? The patient or the baby or whoever it is. So there's always going to be some doctors that can't be controlled by like the family, but they don't know how. To and they wouldn't know how to like. You wouldn't expect them to know how to do certain things and put things filling in the ears and. They were trained to do. Before we wrap up, do you have any final thoughts or maybe any advice you would like to share for any aspiring audiologists?

**Dana**

I mean, I'm a little bit biased, but I think this is a great field. Umm. No, I think it's really interesting. I think it's a really for people that want to be in healthcare and like patient facing, I think it's really, really great like I. I had never had to work on a weekend or evening and and again. This is my clinic in general, but a lot of clinic don't like are strictly like the nine to five type. Of thing. And it's a kind of a nice perk to be able to work with in healthcare and be able to kind of. Help families and children in this way and but they'll be able to have a good work life balance, which I think is not always possible in different areas of healthcare. And I mean I can never do shift work and I don't ever have to do shift working in this in this field which I think is really great but. I think that's definitely a perk.

**Sofia**

Yeah, for sure. When people think of healthcare, they think of long hours. They think of, you know, overnight shifts and things like that. So the audiology definitely seems like a very nice consistent schedule to have.

**Dana**

Yeah, I know it's definitely a. Perk I tell a lot of people that. They're kind of. Playing out different options but but no, it's a great field. I find it really.

**Sofia**

Fascinating. It's amazing. I'm glad. After all these years, you still still finding so much joy in the field of audiology and given your personal experience as well. Well, thank you so much for being on here Here podcast.

**Dana**

No, I I truly do love it.

**Sofia**

We really appreciate it and for sharing your story.

**Dana**

Ohh thank you so much.