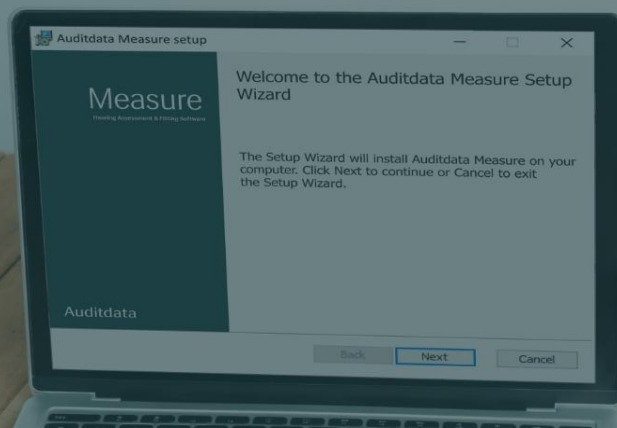


# Measure

# What's New

version 6.5.0



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# 1 Introduction

Measure 6.5.0 introduces a broad set of enhancements across Real Ear Measurements (REM), audiometry, speech, and tympanometry to support more efficient and clinically guided workflows. This release adds CROS/BiCROS verification in REM, support for the Ambient Noise Microphone V1.0, Automated BCL Audiometry, automated PTA-SRT agreement evaluation in Speech Audiometry, and integration with Path Medical nanoTymp for a more continuous tympanometry workflow. In addition, several usability improvements have been made, including activation date in device reports and a new NU6 word-list ordering option to support faster and more flexible speech testing.

## 2 REM CROS & BiCROS Verification

Measure 6.5.0 introduces **CROS/BiCROS verification in the REM module**.

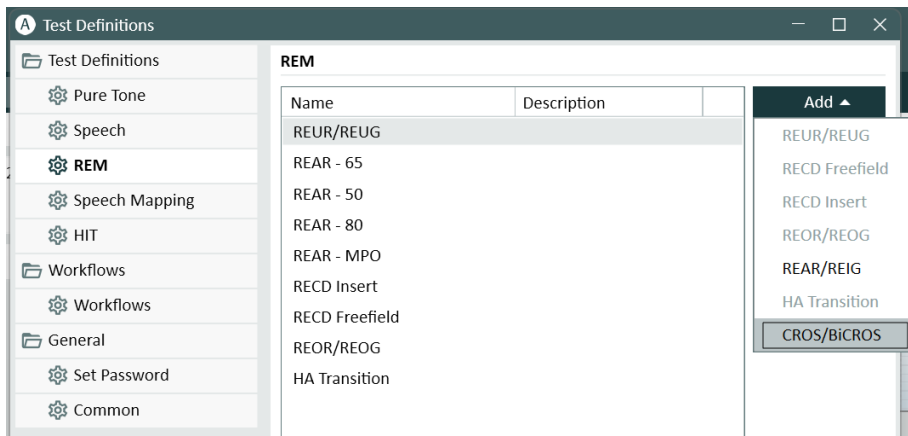
This workflow helps clinicians perform CROS/BiCROS verification in a consistent and guided way by comparing transmitted sound against a reference measurement taken on the hearing side.

To support this workflow, Measure provides:

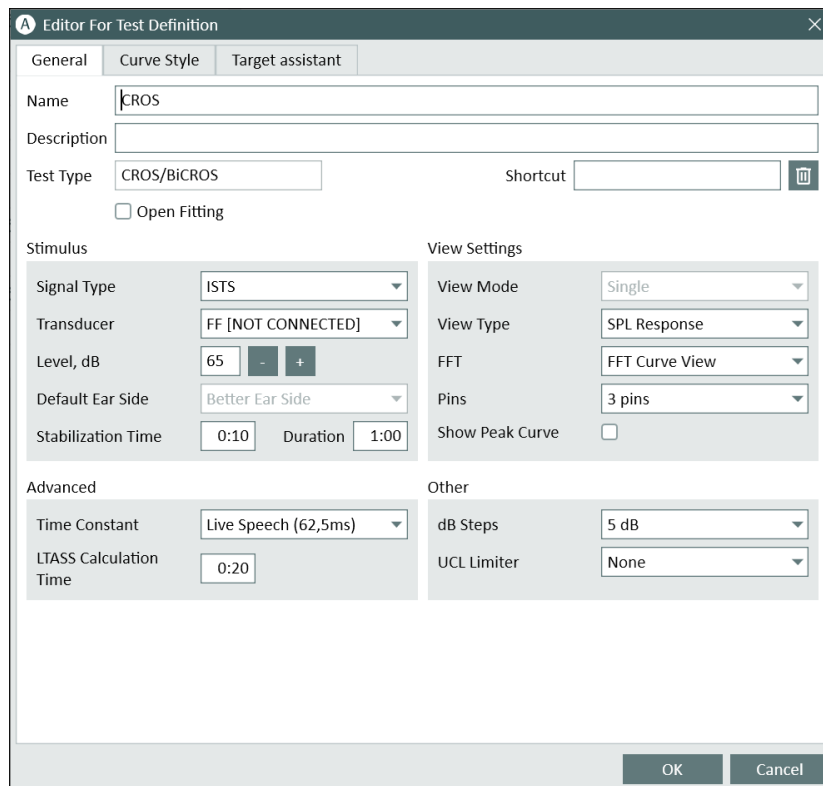
- a dedicated **CROS/BiCROS** REM test type
- automatic selection of the relevant side
- automatic speaker position guidance
- automatic microphone selection
- reuse of the first measurement as the reference for the second measurement
- Target Assistant highlights deviations between the two curves

To use this feature:

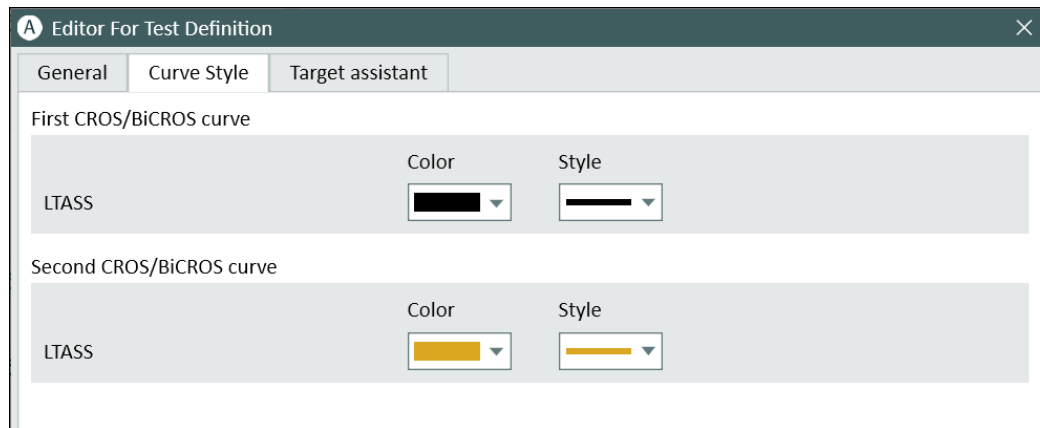
1. Go to **Tools > Test Definitions > REM** and add the **CROS/BiCROS** test type.



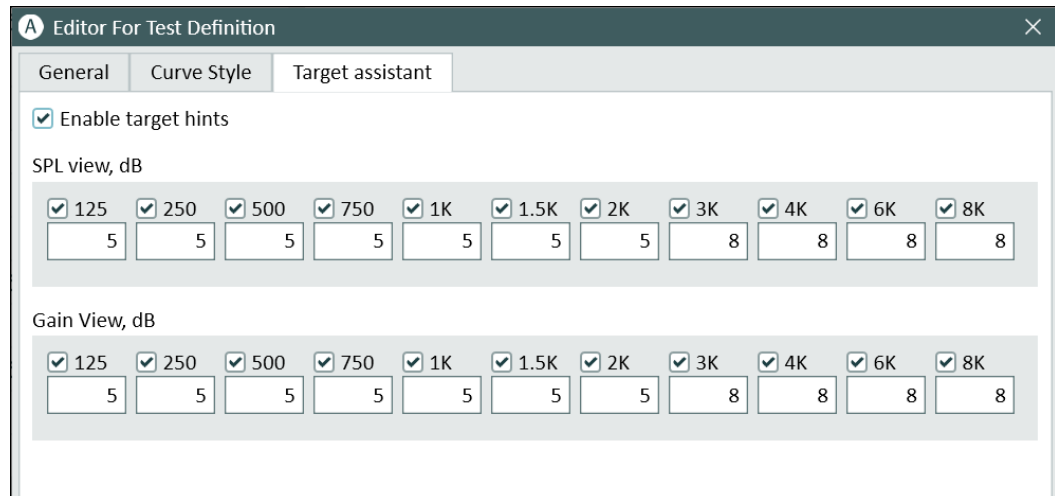
2. Set up test definition as needed.
  - a. Some **General** settings, such as *Default ear side*, *View mode*, *Stabilization time*, *duration*, and *LTASS calculation time*, are disabled because they are automatically defined based on the first measurement.



- b. In **Curve Style**, you can customize the CROS/BiCROS curve style and colors.



- c. In the **Target assistant** tab, you can enable target hints for chosen frequencies.



3. Restart the software to apply changes.
4. Open the patient record and assign **CROS** or **BiCROS** to the patient's **non-hearing ear** in **Hearing Instrument Description**.

### Workflow Summary

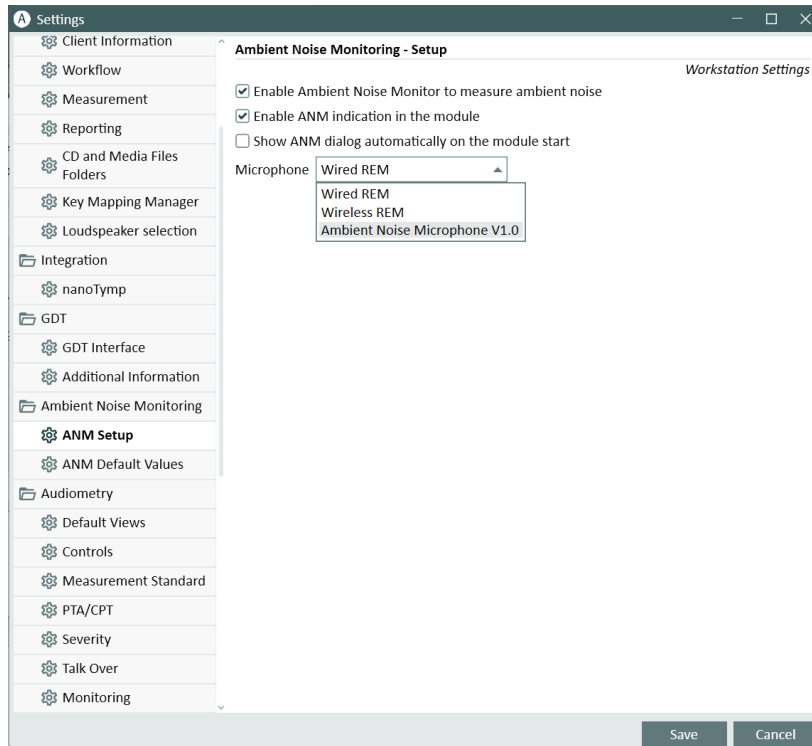
1. (*BiCROS only*) Perform standard hearing aid fitting.
2. Perform first measurement (reference).
3. Perform second measurement (via CROS/BiCROS).
4. Compare curves and adjust if needed.

Detailed instructions are also available in the **User Manual**.

## 3 Ambient Noise Monitoring: Support for Ambient Noise Microphone V1.0

Measure 6.5.0 adds support for the **Ambient Noise Microphone V1.0**, a new external microphone from Auditdata designed for clinics that do not use REM systems but still require reliable ambient noise monitoring during audiometry.

Once connected, the microphone appears in Device Management and can be selected as the input source for ambient noise monitoring at **Settings > ANM Setup > Microphone**.

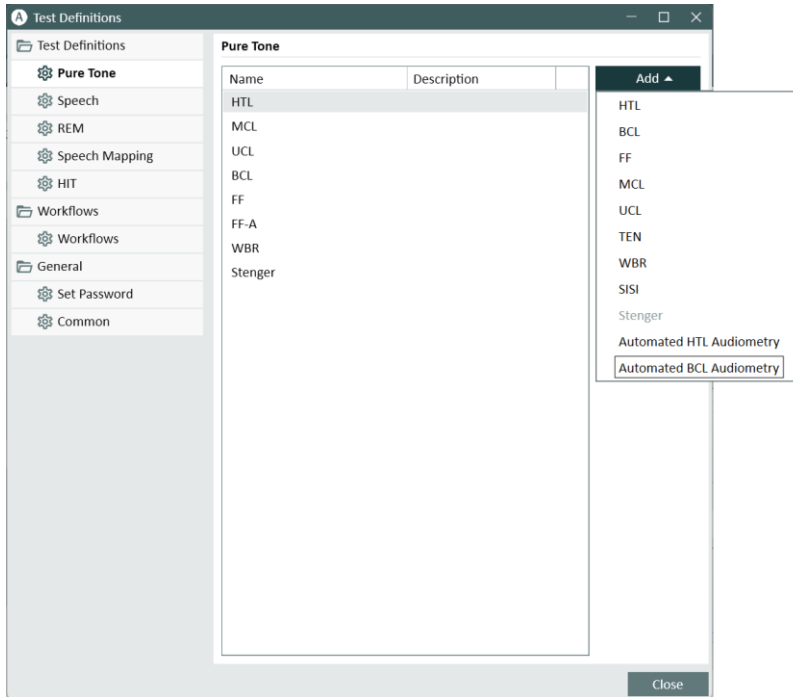


## 4 Automated BCL Audiometry

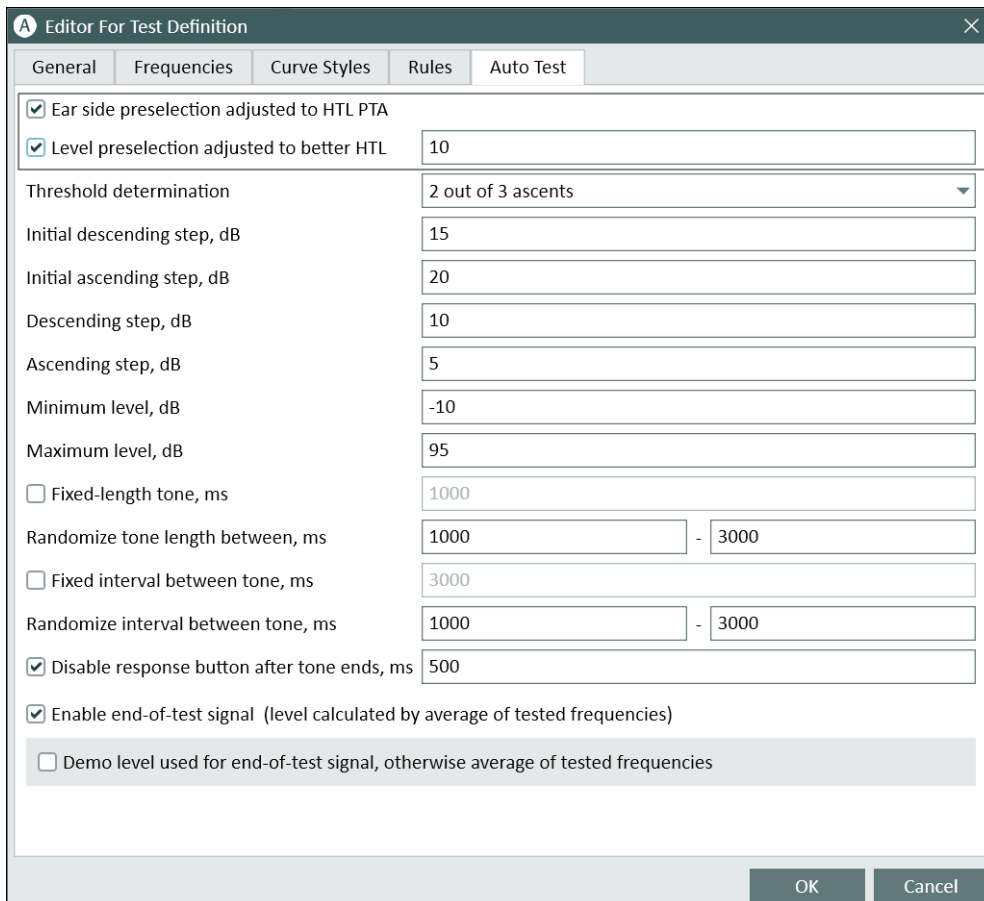
**Automated BCL Audiometry** is introduced in this release as a major enhancement to automated audiometry workflows. This functionality enables audiologists and other Hearing Care Professionals to perform reliable bone-conduction testing safely and efficiently, while reducing test time and variability. By automating key decision points, Automated BCL Audiometry frees audiologists to focus on diagnosis, interpretation, and patient care rather than routine test setup.

Configure automated tests in **Tools > Test Definitions > Pure Tone > Add**, and select:

- **Automated HTL Audiometry** (air conduction)
- **Automated BCL Audiometry** (bone conduction)



Automated BCL Audiometry follows the standard automated audiometry structure (*General, Frequencies, Curve Styles, Rules, Auto Test*).



To support bone-conduction workflows, the following dedicated settings are available in the **Auto Test** tab:

- **Ear-side preselection:** The default ear is automatically adjusted based on the HTL pure-tone average (PTA), supporting initiation of testing on the poorer-hearing side in line with clinical practice.
- **Level preselection:** The starting level is automatically adjusted based on the better HTL. Configuration supports absolute reset, relative reset, and adjustment with a configurable increment to ensure clinically appropriate starting levels across frequencies.
- **End-of-test signal:** Can be enabled so the end-of-test signal level is automatically calculated according to the average of tested frequencies, or configured so the end-of-test signal level is the same level used when the end-of-test signal was demonstrated.

### Bone-conduction automated testing behavior

Automated BCL testing reflects clinical bone-conduction workflow requirements:

- Testing is performed **one ear at a time**.
- The system does **not automatically switch ears** during bone-conduction testing.
- To test the opposite ear, the clinician must reposition the BC transducer, select the other ear, and start the automated test again.

This behavior aligns with clinical requirements for bone-conduction transducer placement and does not affect the user interface or overall test configuration.

As part of this update, **Automated Audiometry** has been renamed to **Automated HTL Audiometry** in Test Definitions to clearly distinguish automated air-conduction and bone-conduction test types.

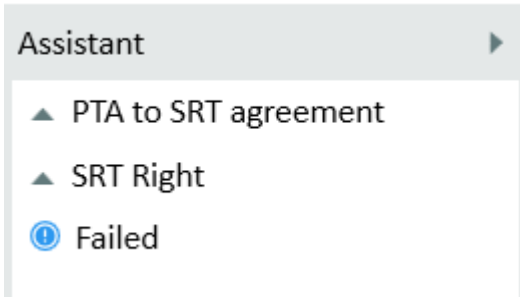
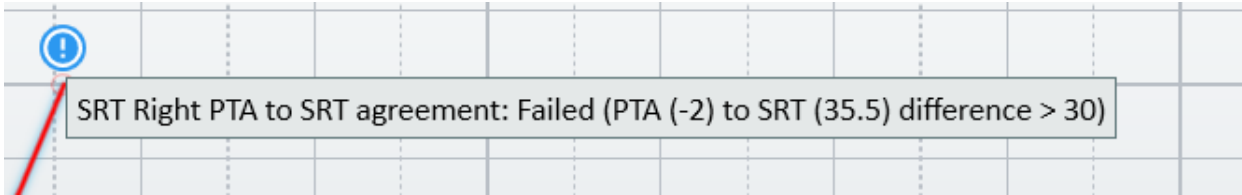
## 5 PTA-SRT Agreement

Measure 6.5.0 introduces automated PTA-SRT agreement evaluation within Speech Audiometry.

When an SRT (50%) result and a Pure Tone Average (PTA) are both available, the system automatically compares the two values and displays an indication if the difference exceeds a defined limit. This supports quick clinical validation of speech results against tonal findings and strengthens quality control within the testing workflow.

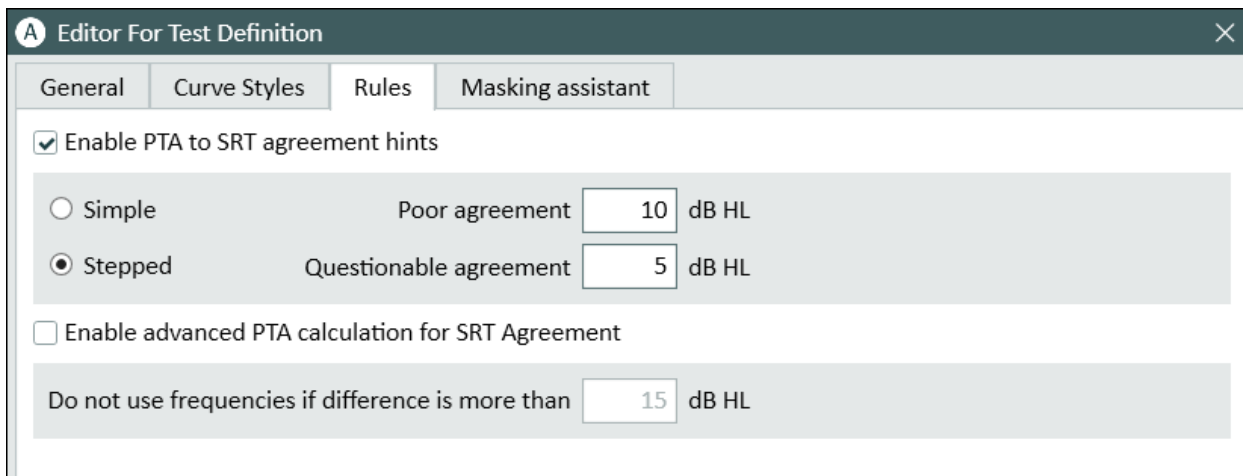
The agreement indication appears:

- Above the **50% SRT point** in Graphical View
- In the **Assistant panel** in both Graphical and Numeric views



### Configuration

Configure PTA-SRT Agreement in **Tools > Test Definitions**, open the **SRT test type (SRT type = SRT)**, and go to the **Rules** tab.



In the Rules tab:

1. Select Enable **PTA to SRT agreement hints** (default: Off).
2. Select the agreement approach:
  - a. **Simple**
    - Set **Poor agreement** (dB HL)
    - Range: **1–30, integers only**
    - Default: **10 dB HL**
  - b. **Stepped**
    - Set **Questionable agreement** and **Poor agreement** (dB HL)
    - Range: **1–30, integers only**
    - Defaults: **5 dB HL** (Questionable) and **10 dB HL** (Poor)
    - **Questionable must be at least 1 dB lower than Poor**

- **Advanced PTA calculation for SRT Agreement** is an optional refinement for steeply sloping/rising audiograms.
  - When selected, the “**Do not use frequencies if difference is more than**” field becomes editable (default **15 dB HL**, range **10–25**, integers only)
  - Frequencies exceeding the defined adjacent difference are excluded from the PTA calculation — for agreement purposes only. The PTA displayed in Audiometry remains unchanged.
  - When enabled, advanced PTA is shown in the application.

## 6 Tympanometry: nanoTymp integration

Measure 6.5.0 introduces integration with **Path Medical nanoTymp**, enabling a continuous tympanometry workflow directly from within Measure.

You can launch nanoTymp from the **Tympanometry module**, perform tympanometry and supported reflex measurements, and return to Measure with the session saved automatically. The patient context is transferred from Measure/NOAH, so no patient selection or manual storage is required in nanoTymp. This supports a continuous appointment flow (e.g., **Otoscscopy > Tympanometry > Audiometry**) without closing Measure or manually transferring data.

### *How it works*

1. Open the **Tympanometry module** in Measure.
2. Select **nanoTymp Measurements**.
3. Measure launches the nanoTymp application with the active patient context.

Within nanoTymp you can:

- Perform the **cavity check** using calibration cavities.
- Run **Tympanometry** (select ear and start measurement).
- Perform **Reflex measurements**.

When you close nanoTymp:

- The session is automatically transferred and stored in Measure.
- A new session appears in the **Tympanometry module history**.
- Results (curves and tables) can be reviewed and printed directly from Measure.

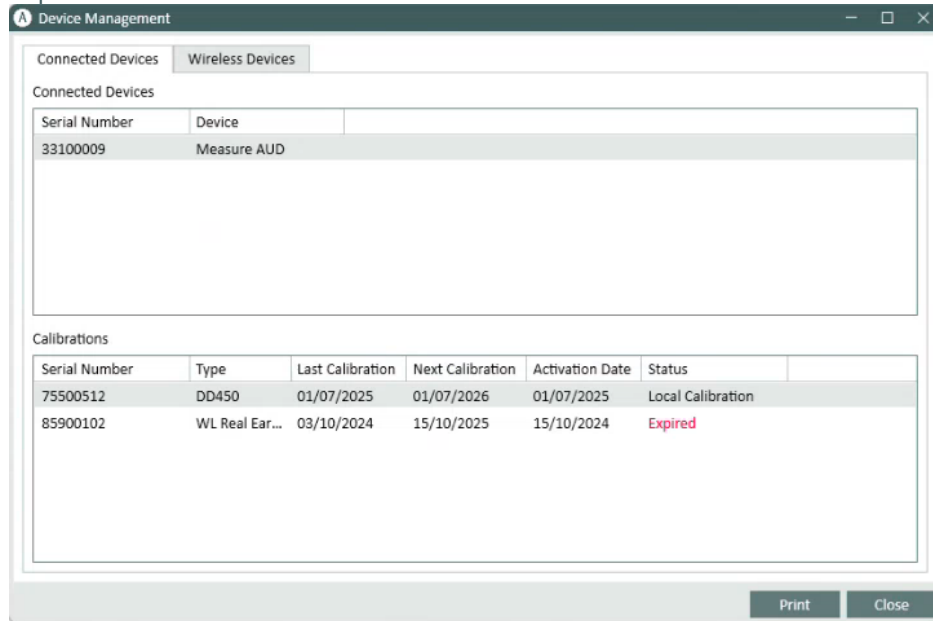
Before using the integration, ensure that:

- nanoTymp software v1.0.0.956 or higher is installed on the same PC as Measure.
- nanoTymp integration is enabled in Settings > Integrations.
- The nanoTymp device is connected to the PC via USB.

# 8 Improvements

## Device activation date included in reports

When printing from **Device Management**, the activation date is now included in the printed report.



Report now includes activation date when printing information for connected devices & transducers.

**Connected Devices Information Report**  
11/12/2025

**Connected Devices**

Serial Number	Device
33100009	Measure AUD

**Calibrations**

Serial Number	Type	Last Calibration	Activation Date	Next Calibration	Status
75500512	DD450	01/07/2025	01/07/2025	01/07/2026	Local Calibration
85900102	WL Real Ear Probe	03/10/2024	15/10/2024	15/10/2025	Expired

## NU6 word lists sorted by difficulty

A new CD scheme, "NU 6 ordered by difficulty," was added, allowing clinicians to stop the test after 10, 25, or all 50 words for a quicker, more flexible test.

# 9 Release Notes

## Dependencies

This version requires NOAH 4.7 or later, with NOAH 4.16 or later recommended for security enhancements. To use the Primus Panel under Auditbase System, Auditbase version 4.17.01 or higher is required.

## Installation

The uninstallation of the previous version is done automatically.

To upgrade to Measure 6.5.0:

1. Run the set-up file: **Setup\_Measure\_6\_5\_0.exe**.
2. Follow the instructions on the screen.

# 10 Support

For further information, please visit [www.auditdata.com](http://www.auditdata.com).