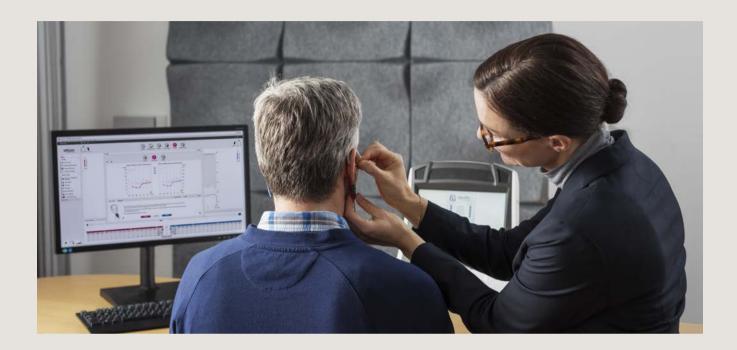# REM AutoFit with Verifit® *LINK*

REM AutoFit with Verifit® *LINK* just got even faster[1]

Increase efficiency, maintain control

REM AutoFit with Verifit*LINK* in Genie 2 just got even faster, due to the added support of simultaneous binaural measurements. Now the automatic target matching sequence at 3 levels can be completed in under 2.5 minutes[1].

REM AutoFit with Verifit*LINK* enables you to achieve the numerous benefits[2-5] of real ear verification conveniently, accurately[6] and efficiently[6] by communicating with your Verifit1* or Verifit2 using Audioscan's Verifit*LINK* communication protocol. This enables you to automatically measure, adjust and verify the hearing aid output to the Verifit's targets with the single click of a button. Furthermore, now the process is even quicker in Genie 2 | 2019.2[1], where binaural measurements can be performed simultaneously when used with Verifit2**.

As before, you maintain full control over the fitting with the option to manually fine-tune and verify to further personalize the fitting to the client. By streamlining the workflow, automatically matching target, automatically

running open fit equalization and muting hearing aids when doing so, REM AutoFit with Verifit*LINK* offers a more convenient and efficient[5] fitting experience for your patients than conventional REMs. This can help to free up valuable time for things such as more patients or counseling and validation which can further help to reduce return visits[4].

* S/N 2070 and higher
** With Verifit2 software 4.18 or later

Benefits for your business

- Convenience – no need for you to control two systems simultaneously – Genie 2 communicates with Verifit for you by entering audiometric results, adjusting gain and muting instruments during open fit equalization.

- Efficiency – the automatic verification process is quicker than the conventional manual verification process[6]

- Accuracy – the automatic match to target is consistent with a conventional manual approach[6]

- Improved self-perceived benefit with hearing aids, satisfaction with HCP and loyalty to HCP[5] (compared with no verification)

- Significant time and cost savings thanks to reduced return visits (compared with no verification), especially if combined with validation[4]

- Demonstrate best practice and clinical excellence to differentiate from competing HCPs and solutions which do not include verification as standard

Benefits for the client

- Comfortable fitting with quick verification and time for counselling and validation

- Optimum hearing aid benefit through verified fitting[2, 3]

- Reduced need for return visits (compared with no verification) – especially if combined with validation[4]

Introducing the adapted REM AutoFit workflow for Verifit

- Automatic and manual fine-tuning and measurement

- Offers both on-ear and text-box-based measurement

- Automatic muting on open fit calibration

- Single-click measurement, automatic adjustment and verification (monaural or binaural)

- Simultaneous binaural measurements with Verifit2** including Audioscan's Binaural Sound Field Assist

- Speech Intelligibility Index and Percentile Analysis

- Guided workflow

- Live display of measurements relative to target

Note: Speak to your Oticon representative, Audioscan distributor, or see the "REM AutoFit with Verifit®*LINK* Quick Guide" to find out how to set up and use REM AutoFit in Genie 2 with Verifit. See the "REM AutoFit Quick Guide" to find out how to set up and use REM AutoFit in Genie and Genie 2 with other REM systems including Interacoustics, MedRx, Otometrics, Auditdata and Sivantos.

** With Verifit2 software 4.18 or later

References

1. Rumley & Crowe, Oticon Whitepaper, 2019

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3. Abrams HB, Chisolm TH, McManus M, McArdle R. Initial-fit approach versus verified prescription: Comparing self-perceived hearing aid benefit. J Am Acad Audiol. 2012;23(10):768-778.

4. Kochkin S. MarkeTrak VIII: Reducing patient visits through verification and validation. Hearing Review. 2011;18(6):10-15.

5. Amlani AM, Pumford J, Gessling E. Improving patient perception of clinical services through real-ear measurements. Hearing Review. 2016;23(12):12-21.

6. Folkeard P, Pumford J, Abbasalipour P, Willis N, Scollie S. A comparison of automated real-ear and traditional hearing aid fitting methods. Hearing Review. 2018;25(11):28-32.

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