



Dr. S. R. Chandrasekhar Institute of Speech and Hearing
(A unit of Bangalore Speech and Hearing Trust)
(A project of LIONS club of Bangalore East)
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Email: dr.srcish@gmail.com Web: www.speechear.org
B++ accreditation by NAAC



3.2.1 The Institution has created an ecosystem for innovations including Incubation Centre and other initiatives for creation and transfer of knowledge

The institute has established a comprehensive ecosystem fostering research and innovation. It provides an ideal environment and essential infrastructure for conducting research, actively encouraging faculty to propose research and CSR projects to organizations like Tech Mahindra and SBI, facilitated through the research cell of Bangalore Speech and Hearing Research Foundation. Faculty and student research proposals are reviewed by the Research Technical Committee and Ethical Committee, ensuring adherence to the Institutional Code of Ethics while assessing proposals for quality, relevance, and impact. An in-house biostatistician further supports research endeavors by providing expert guidance on data analysis and study design.

Faculty are also encouraged to collaborate with other universities for pursuing PhDs, with 8 staff members currently enrolled. Collaborative research with national institutions and hospitals includes projects such as neonatal hearing screening. The institute supports staff and students by financially assisting their participation in national and international workshops, seminars, guest lectures, and conferences. Faculty and students are also encouraged to publish original research papers in indexed journals. Awareness programs on early identification and intervention for speech, language, and hearing disorders are regularly conducted for college students and the general public using our Mobile bus which has facilities to conduct free screening camps. Most hearing awareness programs leverage an in-house developed mannequin named 'KARNA,' inspired by Dr. Billy Martin's 'Jolene' from the "Dangerous Decibels" program. KARNA effectively demonstrates harmful listening levels of personal listening devices (PLDs), raising awareness among students about the risks of high-volume music. Students are provided with hands-on opportunities to use state-of-the-art portable diagnostic instruments such as Flexible Endoscopic Evaluation of Swallowing (FEES), Otoacoustic Emissions (OAE), and automated Auditory Brainstem Response (ABR) devices.

A FEW GLIMPSES OF PUBLIC SCREENING CAMPS IN THE MOBILE BUS FOR FREE SCREENING OF SPEECH AND HEARING DISORDERS



Koratagere, Karnataka, India
Koratagere Main Road, Koratagere,
Koratagere, 572129, Karnataka, India
Lat 13.522235 Long 77.240213
10/01/2025 11:28 AM +0530





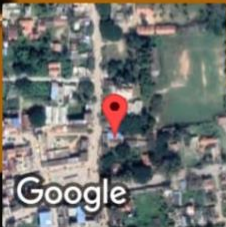
GPS Map Camera



Mandya, Karnataka, India
SH47, Shankar Pura, Mandya, Karnataka 571402, India
Lat 12.535238°
Long 76.879558°
30/07/23 12:41 PM GMT +05:30



GPS Map Camera



Besagara Halli, Karnataka, India
JXQV+MQ5, Besagara Halli, Karnataka 571419, India
Lat 12.639138°
Long 76.994363°
31/07/23 11:41 AM GMT +05:30




 **GPS Map Camera**



Google

Besagara Halli, Karnataka, India
JXQV+MQ5, Besagara Halli, Karnataka 571419, India
Lat 12.639193°
Long 76.994353°
31/07/23 11:43 AM GMT +05:30




 **GPS Map Camera**



Google

Jadigenahalli, Karnataka, India
Hoskote Malur main Rd, 3R4X+PJ9, Jadigenahalli, Karnataka 562114, India
Lat 13.056579°
Long 77.848978°
24/08/23 11:05 AM GMT +05:30



 **GPS Map Camera**



Google

Bengaluru, Karnataka, India

2nd Cross, Magadi Main Rd, 6th Block, Police Quarters, Rajajinagar, Bengaluru,
Karnataka 560023, India

Lat 12.9745°

Long 77.561981°

20/08/23 09:32 AM GMT +05:30



 **GPS Map Camera**



Google

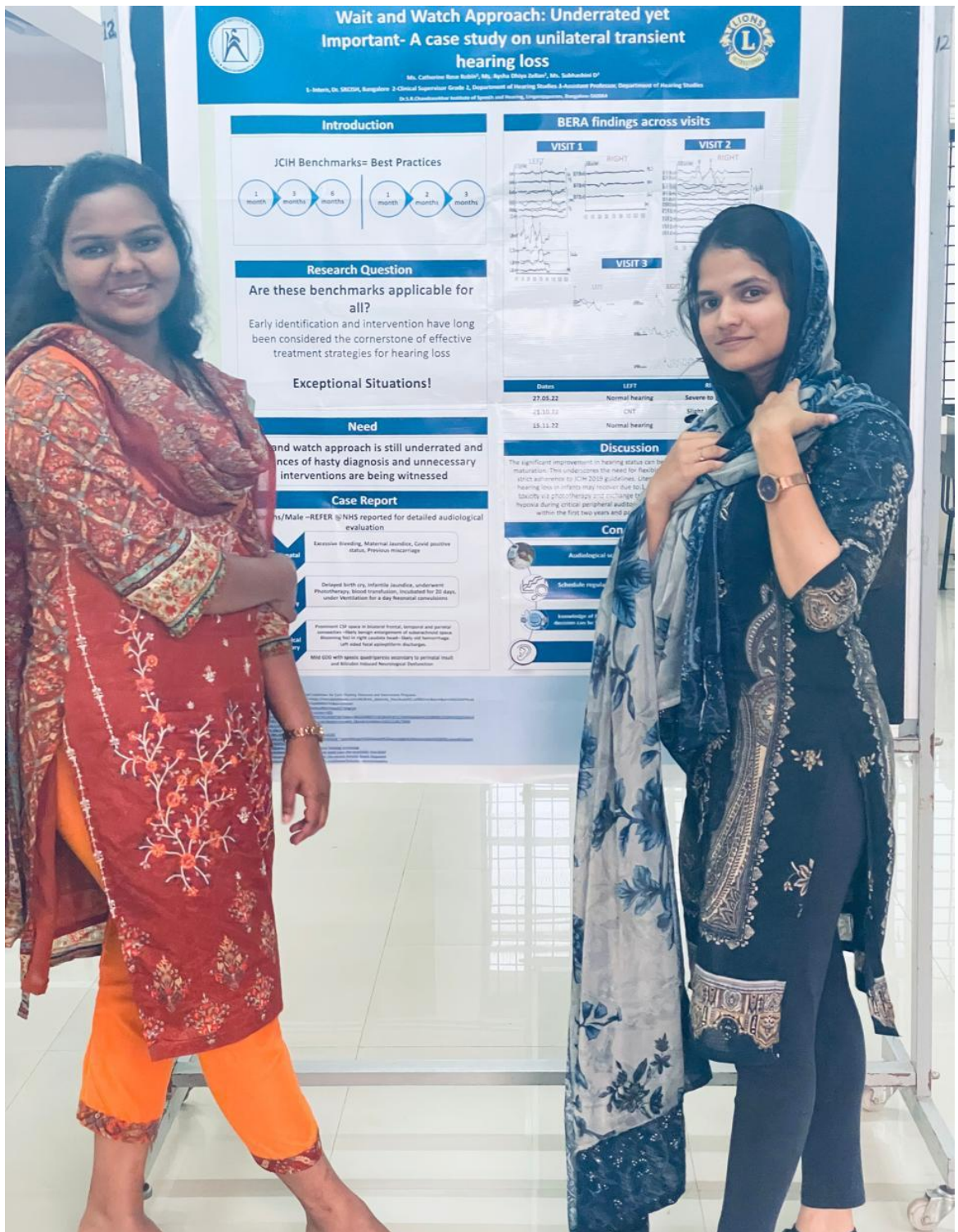
Jadigenahalli, Karnataka, India

Hoskote Malur main Rd, 3R4X+PJ9, Jadigenahalli, Karnataka 562114, India

Lat 13.056579°

Long 77.848978°

24/08/23 11:03 AM GMT +05:30



Wait and Watch Approach: Underrated yet Important- A case study on unilateral transient hearing loss

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Introduction

JCIH Benchmarks= Best Practices

A diagram showing two sets of benchmarks. The first set has three circles labeled '1 month', '3 months', and '6 months'. The second set has three circles labeled '1 month', '2 months', and '3 months'.

Research Question

Are these benchmarks applicable for all?
Early identification and intervention have long been considered the cornerstone of effective treatment strategies for hearing loss

Exceptional Situations!

Need

and watch approach is still underrated and instances of hasty diagnosis and unnecessary interventions are being witnessed

Case Report

Female/Male-REFER to NHS reported for detailed audiological evaluation

- Excessive bleeding, Maternal jaundice, Grand positive status, Previous miscarriage
- Delayed birth cry, infantile jaundice, underweight, Phototherapy, Blood transfusion, incubated for 20 days, under Ventilation for a day Respirator complications
- Persistent CP signs in bilateral frontal, temporal and parietal areas, mild signs of enlargement of subarachnoid space, Meningeal cyst in right posterior frontal, cerebellar hemorrhage, Left sided facial asymmetry, skull changes.
- WHL 90dB with speech discrimination according to parental report and bilateral transient Neurological Dysfunction.



Date	LEFT	RIGHT
27.05.22	Normal hearing	Severe to Profound
15.10.22	CNT	CNT
15.11.22	Normal hearing	Normal hearing

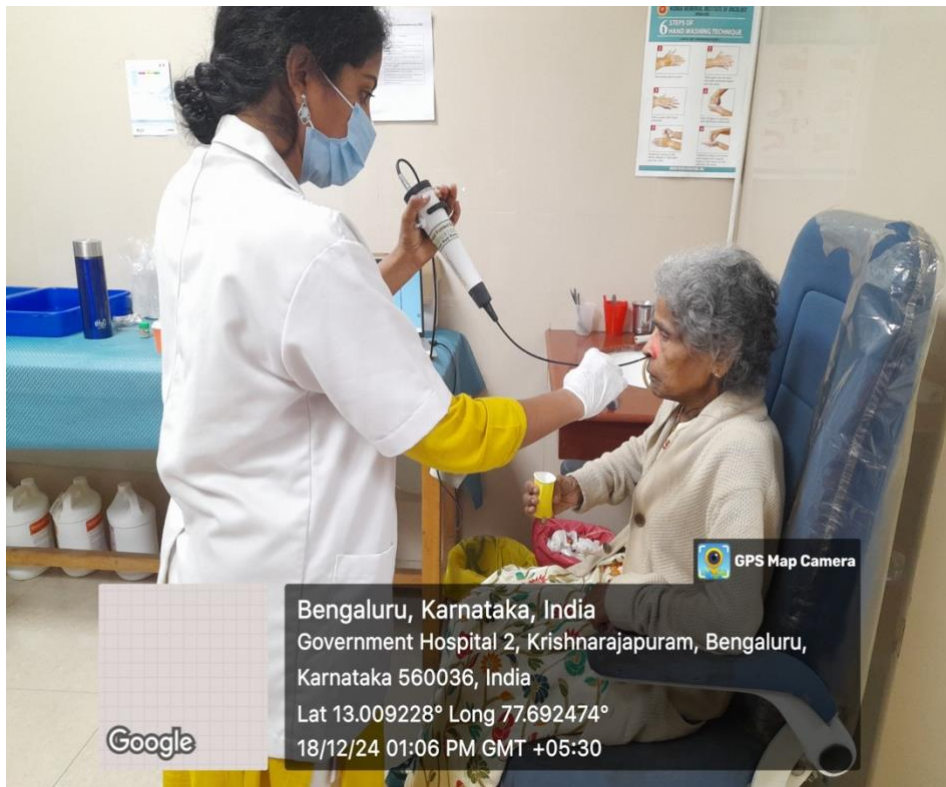
Discussion

The significant improvement in hearing status can be maintained. This underscores the need for hearing strict adherence to JCIH 2019 guidelines. Late hearing loss in infants may occur due to biological or pathological processes and is changeable to resolve during critical peripheral auditory within the first two years and after

Conclusion

- Audiological evaluation
- Schedule regular follow-up
- Knowledge of hearing loss

Nasendoscopy



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