

Supplemental Material S1. Survey.

On a scale of 1-5 (1 – strongly disagree, 2 – disagree, 3 – neutral, 4 – agree, 5 – strongly agree), please answer the questions below regarding acoustic reflex threshold (ART) testing.

1. I conduct ART testing for every new patient.
2. If I have conducted ART testing previously on a patient, I am less likely to conduct repeat testing on the same patient.
3. I am more likely to conduct ARTs when there is a noticeable change in hearing compared with the previous audiogram.
4. I am more likely to conduct ARTs if the most recent audiological evaluation is over a year old.
5. I conduct ARTs when tympanogram results are normal (Jerger Type A).
6. I conduct ARTs when tympanogram results are abnormal (anything besides Jerger Type A).
7. I conduct ART testing when there is an asymmetry present between ears.
8. I conduct ART testing if auditory neuropathy spectrum disorder (ANSO) is suspected.
9. I conduct ART testing if auditory processing disorder (APD) is suspected.
10. I conduct ART testing on difficult to test populations (i.e., young children, patients with disabilities).
11. I conduct ARTs if nonorganic hearing loss is suspected.

Please feel free to leave additional comments/feedback/recommendations below:

Please answer the following the questions.

12. Does your primary clinical work site have ART test equipment? (yes/no)

13. If you work at more than one clinical site, do all sites have ART test equipment?
(yes/no/not applicable)

- If ART test equipment is not available, what other tests do you substitute when ART testing is indicated?

14. Which ART tests do you generally conduct (check all that apply):

- ☐ Ipsilateral ARTs
- ☐ Contralateral ARTs
- ☐ Other (please specify)

15. What frequencies do you generally use when conducting ART testing? (Check all that apply)

- | Ipsilateral | Contralateral |
|----------------------------------|----------------------------------|
| <input type="checkbox"/> 500 Hz | <input type="checkbox"/> 500 Hz |
| <input type="checkbox"/> 1000 Hz | <input type="checkbox"/> 1000 Hz |
| <input type="checkbox"/> 2000 Hz | <input type="checkbox"/> 2000 Hz |
| <input type="checkbox"/> 4000 Hz | <input type="checkbox"/> 4000 Hz |

16. What is the highest stimulus presentation level numerically (in dB HL) that you feel comfortable presenting to a patient?

Please feel free to leave additional comments/feedback/recommendations below:

17. What presentation level (in dB HL), or other criterion, do you use to classify ARTs as elevated?

18. What factors impact your tendency to conduct ART testing?

- ☐ Patient has reported debilitating or bothersome tinnitus
- ☐ Patient has or may have hyperacusis
- ☐ Appointment type is a re-eval/annual evaluation with no change in hearing from the previous year
- ☐ Follow-up visit following recent ear surgery
- ☐ Lack of equipment
- ☐ Reimbursement rates
- ☐ Time constraints
- ☐ Value of the test (clinical relevance)
- ☐ Unfamiliarity with test
- ☐ Other: _____
- ☐ No factors impact my tendency to conduct ART testing

19. What is the primary reason for not conducting ART testing on a patient?

- ☐ Patient has reported debilitating or bothersome tinnitus
- ☐ Patient has or may have hyperacusis
- ☐ Appointment type is a re-eval/annual evaluation with no change in hearing from the previous year
- ☐ Follow-up visit following recent ear surgery
- ☐ Lack of equipment
- ☐ Reimbursement rates

- ☐ Time constraints
- ☐ Value of the test (clinical relevance)
- ☐ Unfamiliarity with test
- ☐ Other: _____
- ☐ No factors impact my tendency to conduct ART testing

20. If ART results are unusual, or do not agree with the rest of the test battery, what do you tend to do next? (For example, the audio is normal, but ARTs are absent)

Please feel free to leave additional comments/feedback/recommendations below:

21. Have you supervised Au.D. student(s) within the past few years?

- ☐ Yes
- ☐ No

If your answer to the above question is "Yes", please answer the questions below.

22. Do you actively encourage Au.D. students to conduct ART testing? (yes/no/it depends (please explain).

- If yes: Why do you encourage Au.D. students to conduct ART testing?

23. Do you actively discourage Au.D. students from conducting ART testing? (yes/no/it depends (please explain).

- If yes: Why do you discourage Au.D. students from conducting ART testing?

24. Do Au.D. students conduct ART testing at your work site more often than you do?

25. Have you experienced the following scenario: An Au.D. student finds unusual ART results, such as results that do not agree with the rest of the test battery, and comes to you for advice/help? Yes/no

- If yes: When this occurs, what do you advise them to do next?