



2 Bedbrook Place
Shenton Park
Western Australia 6008
workcover.wa.gov.au

telephone 08 9388 5555
advisory services 1300 794 744
TTY 08 9388 5537

Workers Compensation and Injury Management Act 2023

APPROVED FORM [s. 496]

In accordance with section 496 of the *Workers Compensation and Injury Management Act 2023* the approved form for a noise induced hearing loss assessment report given under section 114 of the *Workers Compensation and Injury Management Act 2023* and regulation 49(7) of the *Workers Compensation and Injury Management Regulations 2024* is **NIHL Assessment Report** in Appendix 1.

The **NIHL Assessment Report** in Appendix 1 is effective 1 July 2024 and registered as WorkCover WA Approved Form NIHL2 – v1 [D2024/51455].

CHRIS WHITE
CHIEF EXECUTIVE OFFICER

26 April 2024

**NOISE INDUCED HEARING LOSS
NIHL ASSESSMENT REPORT**

Worker

Name:

.....

Address:

.....

Date of birth:

.....

Phone number:

.....

Email address:

.....

Male Female Unspecified

Employer

Name:

.....

Address:

.....

ABN:

.....

Contact person:

.....

Phone number:

.....

Email address:

.....

ENT specialist

Name:

.....

Business name:

.....

Registration number:

.....

Payment of test

Is the employer paying for this NIHL assessment? Yes No

Examination

Date:

.....

Location:

.....

Exposure history

Note: the ENT specialist is required to indicate whether the worker suffered NIHL at each employer listed in the Worker Noise Exposure and Employment History approved form, completed by the worker. This information is used by the worker to serve their claim on the last liable employer, and for apportionment of costs of the claim by WorkCover WA.

Occupation	Employer and address	Industry	Period of employment	State/ territory of employment	Contributed to NIHL
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No

Assessment

Examination of worker:

Diagnosis and determination of NIHL%

Age corrected hearing loss: _____ %

Binaural hearing loss attributed to factors other than occupational noise: _____ %

Assessed percentage noise induced hearing loss

Having assessed the above worker in accordance with the *Workers Compensation and Injury Management Act 2023*, the assessed noise induced hearing loss due to the nature of employment is _____ %

Signed: _____ **Date:** _____

Note: The assessed percentage noise induced hearing loss must be at least 10% for initial NIHL or at least 5% for any subsequent NIHL in order for a claim to be made and compensation paid.