



SHIELD YOUR HEARING

LIKE NEVER BEFORE

Instant noise barrier. Always-on sound enhancer.

SoundGear Shield lets users easily hear the environment around them, and is so comfortable, they won't feel like they're wearing hearing protection — until the moment it's needed. That's when the device delivers up to 26 dB of noise reduction and instantly limits output to safe listening levels for their specific noise environment.



SHIELD

SoundGear Shield offers:

Protection - Two device options

- ♥ 93 dB SPL - best for intermittent noise
- ♥ 80 dB SPL - best for sustained noise
- ♥ Tri-flange buds provide 26 NRR
- ♥ Foam buds provide 32 NRR *(sold separately)*

Comfort

- ♥ Flexible tri-flange buds fit most types of ear canal shapes and sizes

Convenience

- ♥ IP68 rated for water and dust resistance
- ♥ Ready to wear right out of the box
- ♥ Discreet and comfortable product design
- ♥ Replaceable buds available
- ♥ Rugged carrying case easily fits in a pocket and goes where you go
- ♥ 1-year manufacturer's warranty



Hearing protection is important.

Hearing Loss is connected to overall health



Accidents

People with perceived hearing difficulty are **twice as likely** to have an accidental injury as peers with good hearing.¹



Heart health

Hearing loss may be a predictor of **cardiovascular diseases**, and appropriate medical referrals should be considered.²



Depression

Older adults with hearing loss are **47% more likely to have symptoms of depression**, compared to people without hearing loss.³



Loneliness

Hearing loss is associated with an **increased risk of loneliness and social isolation**.⁴



Dementia

Untreated hearing loss increases the **risk of dementia by 50%**.⁵



Falling

Study found a **50% reduction in odds of experiencing a fall** in adults who wore hearing aids.⁶

SOUND 
LIVE

Measure decibel levels in real time.
See if your environment is safe for your hearing.



- 1 Lin, H., Mahboubi, H., Bhattacharyya, N. (2018, May). Self-Reported Hearing Difficulty and Risk of Accidental Injury in US Adults 2007 to 2015. *JAMA Otolaryngol Head Neck Surg*, 144(5), 413–447. doi:10.1001/jamaoto.2018.0039.
- 2 Tan, C., Koh, J., Tan, B., Woon, C. et al. (2024, March). Association Between Hearing Loss and Cardiovascular Disease: A Meta-Analysis. *Otolaryngol Head Neck Surg*, 170(3), 694–707. doi: 10.1002/ohn.599.
- 3 Shukla, A., Harper, M., Pederson, E., Gorman, A., et al. (2020). Hearing Loss, Loneliness, and Social Isolation: A Systemic Review. *Otolaryngology Head Neck Surg*, 162(5), 622–633. Doi: 10.1177/0194599820910377
- 4 Lawrence, B., Jayakody, D., Bennett, R., Eikelboom, R., Gasson, N. et al. (2019, March). Hearing Loss in Older Adults: A Systematic Review and Meta-analysis. *The Gerontologist*, 60(3), e137–e154.
- 5 Campos, L., Prochaska, A., Anderson, M. et al. (2023, June). Consistent hearing aid use is associated with lower fall prevalence and risk in older adults with hearing loss. *Journal of the American Geriatrics Society*, 71(10), 3161–3171. doi:10.1111/jgs.18461
- 6 Deal, J.A., Reed, N.S., Kravetz, A.D., et al. (2019, January). Incident Hearing Loss and Comorbidity: A Longitudinal Administrative Claims Study. *JAMA Otolaryngol Head Neck Surg*, 145(1), 36–43. doi:10.1001/jamaoto.2018.2876.