



# California State University, Sacramento

## Department of Communication Sciences and Disorders

### GRADUATE SYLLABUS & COURSE OUTLINE

Semester/Year: Fall 2022	Course: CSAD 670C: Audiology Clinic VII	Section: 01
Meeting Days: Tuesday, Thursday, and/or Friday	Meeting Times: TBD by site	Location: Various
Instructor: Liaison: Rachel Bellotti, Au.D. and Charley Sanders, Au.D.	Email: <a href="mailto:rachel.a.bellotti@csus.edu">rachel.a.bellotti@csus.edu</a> <a href="mailto:csanders@csus.edu">csanders@csus.edu</a>	Phone: 916-278-4867
Office Location: Folsom 2000	Office Hours/Appointments: Contact supervisor and/or liaison to schedule meetings	

### **Catalogue Course Description:**

**CSAD 670C. Audiology Clinic VII**

**2 Units**

**Prerequisite(s):** Admission to Doctor of Audiology program; CSAD610, CSAD620C, CSAD630C, CSAD640C, CSAD 650C, CSAD 660C

**Corequisite(s):** CSAD 670

**Term Typically Offered:** Fall only

Supervised clinical practice in audiology with an emphasis on refining third-year clinical skills and working independently.  
Credit/No Credit

### Place of Course in Program

This rotation is important for gaining experience in various settings in audiology.

*The student clinician will be responsible for:*

- a. Assessing patients' auditory and/or vestibular systems in terms of structure and function.
- b. Prescribing appropriate management and/or treatment methodologies for hearing and/or balance disorders.

- c. Interpreting results of case history, previous evaluations and/or referrals.
- d. Writing session notes to prepare for and summarize session results in the form specified by the site. Measurable outcomes must be documented for every appointment as determined by the site.
- e. Submitting written reports to the clinical supervisor within two business days. **Two late submissions automatically drop your final Writing area clinical competency grade by one letter grade through reduction of points.**
- f. Meeting with all assigned patients. Once the student clinician has begun the practicum, dropping clinical practicum classes by the student clinician is prohibited except for medical reasons or extraordinary circumstances as approved by the Department.
- g. Evaluating performance at midterm and final. Written self-reflections (identifying clinical strengths and areas for improvement) are to be submitted to the assigned clinical instructor. Because of client confidentiality, you **MUST** follow the policy set forth in the Student Handbook on using patient data.
- h. Meeting with the assigned Internship Supervisor on a once weekly basis is mandatory. The internship supervisor will be available to at other times, but the weekly meeting should center on specific questions/concerns you have about assigned patients. Prepare for these weekly meetings: Have specific questions written and ready to discuss. If you are unable to keep your appointment, you must cancel prior to meeting time and reschedule with your Internship Supervisor. In some cases, this may require the Liaison's attention.

Sacramento State Graduate Learning Goals (GLG)	Addressed by this course (Y/N)
<b>Disciplinary knowledge:</b> <i>Master, integrate, and apply disciplinary knowledge and skills to current, practical, and important contexts and situations.</i>	Y
<b>Communication:</b> <i>Communicate key knowledge with clarity and purpose both within the discipline and in broader contexts.</i>	Y
<b>Critical thinking/analysis:</b> <i>Demonstrate the ability to be creative, analytical, and critical thinkers.</i>	Y
<b>Information literacy:</b> <i>Demonstrate the ability to obtain, assess, and analyze information from a myriad of sources.</i>	Y
<b>Professionalism:</b> <i>Demonstrate an understanding of professional integrity.</i>	Y
<b>Intercultural/Global Perspectives:</b> <i>Demonstrate relevant knowledge and application of intercultural and/ or global perspectives.</i>	Y
<b>Research:</b> <i>Conduct independent research resulting in an original contribution to knowledge in the focused areas of their graduate program</i>	N

## Course Learning Outcomes:

### GRADUATE

Mastery of each student-learning outcome listed below is indicated by a grade of B or better on each component of the corresponding measures listed in the table. Students are required to track their progress towards meeting each learning outcome and must make an appointment with the instructor for any grade equal to or less than a B. The instructor will suggest strategies to help you establish competence and knowledge in these areas.

### CSAD 670C: SPECIFIC GRADUATE CLINICIAN LEARNING OUTCOMES

Upon completion of this course, students will be able to:

1. Communicate effectively, orally and in written form, with patients, families, caregivers, and other health care providers
2. Develop written reports for diagnosis, evaluation, and recommendations
3. Diagnose, triage, treat, and manage auditory and vestibular conditions and diseases for patients across the lifespan
4. Discuss findings, diagnosis, and treatment options with the client, family, and other health care providers
5. Adhere to professional ethics as they relate to the practice of audiology
6. Evaluate and reflect on performance in at least three sessions followed by discussion with clinical instructor

<b>Graduate Learner Outcome</b>	<b>Component Indicating Competence</b>
Assessment: 3	Audiological evaluation documentation
(Re)habilitation: 1, 4	Clinical instructor session notes
Writing: 1, 2	Written reports
Professional Practice: 5, 6	Clinical instructor session notes; Required student self-reflections; Attendance at weekly meetings

### Course Requirements/Components:

#### **Communication with internship supervisor and liaison**

Students must maintain timely communication with internship supervisor and liaison. Students and internships supervisors should meet on a regular basis to prepare for patient appointments, discuss cases, etc. The liaison is also available to provide support to the student and supervisor, as well as coordinate communication between the site, student, and program/department.

#### **CALIPSO**

Students are required to log all relevant clinic hours into CALIPSO on a weekly basis. It is the student's responsibility to ensure that the clinic supervisor signs off on your hours within the semester that the clinical experience is completed. The liaison will enter final grades for the course.

#### **Clinic handbook**

All students are required to adhere to the policies (e.g., use of clinical space, dress code, attendance, professional behavior, etc.) outlined in the clinic handbook and/or those required by the internship site. The clinic handbook can be found on the department website. Failure to do so may lead to the initiation of a PIP.

#### **Liaison role**

This internship experience is assigned a liaison, Dr. Rachel Bellotti or Dr. Charley Sanders. The faculty liaison will complete one site visit before the internship experience and a second site visit at midterm. Other site visits will be arranged as needed. During the site visit, the liaison will observe the session, providing feedback to the student and supervisor. The liaison will also be responsible for ensuring midterm and final competencies are recorded in CALIPSO. The need for a PIP will also be initiated by the liaison and clinical education coordinator. Please communicate with your liaison throughout the internship experience.

If you are sick, stay home and do not attend class. Notify your instructor. Please self-diagnose if you are experiencing any COVID- like symptoms (fever, cough, sore throat, muscle aches, loss of smell or taste, nausea, diarrhea, or headache) or have had exposure to someone who has tested positive for COVID contact Student Health & Counseling Services (SHCS) at 916-278-6461 to receive guidance and/or medical care. The CDC provides a good source of information regarding COVID-19 and a way to self-check symptoms: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

Students must adhere to COVID-19 policies regarding mask wearing and vaccinations as described on the CSUS website. Please see <https://www.csus.edu/compliance/risk-management/coronavirus.html> and <https://www.csus.edu/return-to-campus/return-to-campus-faq.html> for more information and updates.

### **Clinical Grading Policy**

A passing grade for clinic performance is based on the Final Clinical Competency Form. You should review this form BEFORE clinic starts so that you are aware of all items that will become part of your formative and summative assessment for this clinic. The Clinical Competency form will be completed by your clinical instructor at midterm and at final, but it is the final Clinical Competency Report on which your clinic grade is based. The Clinical Competency Form is separated into seven (7) general competency categories: Prevention, Screening, and Identification; Assessment; Audiologic (Re)habilitation; Pediatric Audiology (Re)habilitation; Counseling; Communication; and Professional Practice. Each general competency area consists of numerous individual line items.

Your grade for clinic performance is based on an average of all of the Clinical Competency Forms that your Clinical Instructor completes over all assigned sessions.

The Clinical Competency Form will be completed by your clinical instructor after each session as a form of formative assessment and feedback. The Clinical Competency Form is separated into seven general competency categories: Prevention, Screening, and Identification; Assessment; Audiologic (Re)habilitation; Pediatric Audiology (Re)habilitation; Counseling; Communication; and Professional Practice. Each general competency area consists of numerous individual items. A passing grade for each clinic is a B or higher. A passing grade is obtained by achieving a rating of 4.15 or better on the average combined score of the seven general competency categories, provided that the student achieves a minimum score of 4.15 on **all** individual competency line items on the last session. Therefore, any student receiving (a) a rating of 4.14 or less on any one (or more) specific line item on the final session **or** (b) an average rating of 4.14 or less across all sessions for a competency category will not pass the clinic, even if their average combined score of the seven general competency categories is a B or higher. In such cases, a grade of B- will be given for the clinic. A student may receive a passing grade in the clinic after receiving 4.14 or lower on any one (or more) specific line item on any Clinical Competency form IF the student successfully completes a Performance Improvement Plan directed by their assigned Clinical Instructor.

Students are evaluated based on their expected performance for the given year/semester they are in; students are not evaluated based on comparison to an extern or graduate in audiology.

Note: This course is graded as Credit/No Credit, so a Pass grade is required.

SCORE	LETTER GRADE	DESCRIPTION
4.65 - 5.00	A	<b><u>Exceeds Performance Expectations* (Pass)</u></b>
4.50 - 4.64	A-	(Minimum assistance required) <ul style="list-style-type: none"> <li>• Clinical skill/behavior well-developed, consistently demonstrated, and effectively implemented</li> <li>• Demonstrates creative problem solving</li> <li>• Clinical Instructor consults and provides guidance on ideas initiated by student</li> </ul>
4.35 - 4.49	B+	<b><u>Meets Performance Expectations* (Pass)</u></b>
4.15 - 4.34	B	(Minimum to moderate assistance required)

		<ul style="list-style-type: none"> <li>• Clinical skill/behavior is developed/implemented most of the time, but needs continued refinement or consistency</li> <li>• Student can problem solve and self-evaluate adequately in-session</li> <li>• Clinical Instructor acts as a collaborator to plan and suggest possible alternatives</li> </ul>
4.00 – 4.14	B-	<p><b><u>Needs Improvement in Performance</u></b> (Moderate assistance required)</p> <ul style="list-style-type: none"> <li>• Inconsistently demonstrates clinical skill/behavior</li> <li>• Student’s efforts to modify performance result in varying degrees of success</li> <li>• Moderate and ongoing direction and/or support from Clinical Instructor required to perform effectively</li> </ul>
3.85 – 3.99	C+	
3.65 – 3.84	C	
3.50 – 3.64	C-	
3.35 – 3.49	D+	<p><b><u>Needs Significant Improvement in Performance</u></b> (Maximum assistance required)</p> <ul style="list-style-type: none"> <li>• Clinical skill/behavior is beginning to emerge, but is inconsistent or inadequate</li> <li>• Student is aware of need to modify behavior, but is unsure of how to do so</li> <li>• Maximum amount of direction and support from clinical</li> <li>• Supervisor required to perform effectively.</li> </ul>
3.15 – 3.34	D	
3.00 – 3.14	D-	
1.00 – 2.99	F	<p><b><u>Unacceptable Performance</u></b> (Maximum assistance is not effective)</p> <ul style="list-style-type: none"> <li>• Clinical skill/behavior is not evident most of the time</li> <li>• Student is unaware of need to modify behavior and requires ongoing direct instruction from Clinical Instructor to do so</li> <li>• Specific direction from Clinical Instructor does not alter unsatisfactory performance</li> </ul>

**Au.D. Program Policies**

**Email:** Students in the Au.D. program are required to maintain an active CSUS email address, which is linked to the student ID number. Official emails will be sent through CSUS email. Students are expected to regularly check their CSUS emails.

**Policy on attendance:** Students are expected to arrive in clinic on time, prepared to participate and engage in classroom activities for both in-person and synchronous/virtual interactions. Students are responsible for class content, lecture materials, assignments, announcements, and must be aware of changes in the class schedule. Your attendance is required. Students are advised that instructional faculty may include an attendance policy in courses, which may require attendance as part of the student’s course grade. These policies will be set in the syllabus.

Given the full-time, intensive nature this doctoral program, it is important that students contact instructors if they are absent or are anticipating absence, especially over an extended period of time. In the case of the latter, the Au.D. Program Director must also be notified.

**Academic conduct:** Students enrolled in the Au.D. program must adhere to the Department and University policies on academic misconduct. Please see the department’s policy on academic misconduct (“Policy on

Student Academic and Clinical Conduct”). The following are expectations for professional behavior in the classroom:

- Ethics: Students must uphold the ethical standards set forth by professional bodies in the field (see Appendices C and D of the Au.D. Student Handbook).
- Respect: Students should demonstrate respect to their peers, instructors, and staff.
- Feedback: Students are expected to self-reflect and modify their work in response to feedback, while displaying non-defensive behavior to suggestions.
- Health: Students should maintain their personal wellness and health, attending to any needs in a timely fashion in order to support their academic and professional growth.
- Attire: Students must dress professionally. Dress Casual is the most appropriate for an Audiology Clinic setting.
- Accountability: Students are expected to be accountable, honest, and professional for their activities and communications. The general principles of ethical behavior should be applied to their coursework, evaluations, and examinations.
- Language: Students should demonstrate professional oral and written communication, including emails. Discretion and professional language should be used in all modalities, emphasizing constructive rather than reactive use.
- Scholarship: Students should take an active role in their learning, recognizing their deficiencies and seeking to correct them, as part of their commitment to lifelong learning.
- Effort: Students should collaborate and work to complete tasks and assignments on time or by the set deadline. Students are expected to follow through on all activities while maintaining professionalism and intellectual curiosity.

# Additional Information

## Commitment to Integrity:

As a student in this course (and at this university) you are expected to maintain high degrees of professionalism, commitment to active learning and participation in this class and also integrity in your behavior in and out of the classroom.

## Sac State's Academic Honesty Policy & Procedures:

“The principles of truth and honesty are recognized as fundamental to a community of scholars and teachers. California State University, Sacramento expects that both faculty and students will honor these principles, and in so doing, will protect the integrity of academic work and student grades.” Read more about Sac State's Academic Honesty Policy & Procedures at the following website:

<https://www.csus.edu/um anual/student/stu-100.htm>

**Definitions:** At Sac State, “cheating is the act of obtaining or attempting to obtain credit for academic work through the use of any dishonest, deceptive, or fraudulent means.” **Plagiarism** is a form of cheating. At Sac State, “plagiarism is the use of distinctive ideas or works belonging to another person without providing adequate acknowledgement of that person's contribution.” Source: Sacramento State University Library Note: Any form of academic dishonesty, including cheating and plagiarism, shall be reported to the [Office of Student Conduct](#).

## Department Policy on Use of APA format:

The Department of Communication Sciences and Disorders requires the use of the APA format and style. All students are required to reference the APA manual. All assignments are to be composed using APA format and style unless otherwise noted.

## Understand When You May Drop This Course:

It is the student's responsibility to understand when he/she need to consider disenrolling from a course. Refer to the Sac State Course Schedule for dates and deadlines for registration. After this period, a serious and compelling reason is required to drop from the course. Serious and compelling reasons include: (a) documented and significant change in work hours, leaving student unable to attend class, or (b) documented and severe physical/mental illness/injury to the student or student's family. Under emergency/special circumstances, students may petition for an incomplete grade. An incomplete will only be assigned if there is a compelling extenuating circumstance. All incomplete course assignments must be completed by the department's policy.

## Inclusivity:

Students in this class are encouraged to be active participants in all aspects of the course, including but not limited to lectures, synchronous and asynchronous activities, discussion posts, etc. Each of us must show respect for each other, as our class represents a diversity of beliefs, backgrounds, and experiences. This enriches all of our learning experiences together. Our individual differences deepen our understanding of one another and the world around us, rather than divide us. In this class, people of all ethnicities, genders and gender identities, religions, ages, sexual orientations, disabilities, socioeconomic backgrounds, regions, and

nationalities are strongly encouraged to share their rich array of perspectives and experiences. If you feel your differences may in some way isolate you from our classroom community, or if you have a specific need, please contact the instructor early in the semester. Your instructor will work with you to ensure that you become an active and engaged member of our class and community.

### Locations of gender-neutral restrooms on campus:

Maryjane Rees Language, Speech and Hearing Clinic, 2<sup>nd</sup> Floor of Folsom Hall

### Equal Access:

California State University-Sacramento, Department of Communication Sciences and Disorders, seeks to provide equal access to its programs, services, and activities for people with disabilities. If you have a documented disability and verification from the Office of Services to Students with Disabilities (SSWD), and wish to discuss academic accommodations, please contact your instructor as soon as possible. It is the student's responsibility to provide documentation of disability to SSWD and meet with a SSWD counselor to request special accommodation before classes start. **Sacramento State Services to Students with Disabilities (SSWD)** offers a wide range of support services and accommodations for students in order to ensure students with disabilities have equal access and opportunity to pursue their educational goals. Working collaboratively with students, faculty, staff and administrators, SSWD provides consultation and serves as the information resource on disability related issues to the campus community. SSWD is located in Lassen Hall 1008 and can be contacted by phone at (916) 278-6955 (Voice) or (916) 278-7239 (TDD only) or via email at [sswd@csus.edu](mailto:sswd@csus.edu).

### Basic Needs Support

If you are experiencing challenges with food, housing, financial or other unique circumstances that are impacting your education, help is just a phone call or email away! The CARES office provides case management support for any enrolled student. Email the CARES office at [cares@csus.edu](mailto:cares@csus.edu) to speak with a case manager about the resources available to you. Check out the [CARES website](#).

### Other Resources

- The Office of Student Affairs maintains a list of campus resources/centers: <https://www.csus.edu/center/>
- Testing Center: <https://www.csus.edu/student-affairs/centers-programs/testing-center/>
- Library: <https://library.csus.edu/> for consultation: Rachel Stark, MS, AHIP, [stark@csus.edu](mailto:stark@csus.edu)
- Services to Students with Disabilities: <https://www.csus.edu/student-affairs/centers-programs/services-students-disabilities/>
- Student Health and Counseling Services at The WELL: <https://www.csus.edu/student-life/health-counseling/>
- Student Academic Success and Education Equity Programs: <https://www.csus.edu/student-affairs/retention-academic-success/>



- Crisis Assistance and Resource Education Support (CARES): <https://www.csus.edu/student-affairs/crisis-assistance-resource-education-support/>
- CHHS Student Success Center: <https://www.csus.edu/college/health-human-services/student-success/>
- Reading & Writing Center: <https://www.csus.edu/undergraduate-studies/writing-program/reading-writing-center.html>
- Peer & Academic Resource Center: <https://www.csus.edu/student-affairs/centers-programs/peer-academic-resource/>
- SMART Thinking (tutoring resource): <https://www.csus.edu/student-affairs/centers-programs/degrees-project/internal/documents/smarthinking.pdf>

## Online Learning

For additional information, please review the CSAD Handbooks website <https://www.csus.edu/college/health-human-services/communication-sciences-disorders/csad-handbooks.html>

### Zoom/ Online Instruction privacy and relevant rights and responsibilities:

Any time that a class session is recorded during the COVID-19-related Remote Instruction Period, students will be notified. If students do not want their likeness during class participation included in the recorded class session, they may elect to not participate via video recordings. Recordings will be available for viewing during the Remote Instruction Period subject to the following:

Only students enrolled in the subject class during the Remote Instruction Period may view the recording.

- Students may not post or use the recordings in any other setting (e.g., social media) for any purpose. Students who violate this will be subject to student discipline, up to and including expulsion.
- Federal and California law as well as University policies protecting intellectual property rights and use of instructional materials (including any recordings of class sessions) remain in effect during the Remote Instruction Period.
- If faculty have any plan to use the recording for a different class in the future, the faculty member will need written FERPA consent from those students in the current class who are identifiable in any of the recordings. A FERPA consent form signed by all students in the course will also be needed if the recordings are made available to others beyond the classroom on a nonsecure digital platform.

### Important Tips for Success as an Online Learner

There are some basic technical skills and requirements that you will need to have to be successful in this online course. If you have difficulties using Canvas, please go through the [Canvas Student Tour](#).

- ***Begin planning now for private, uninterrupted time in your schedule*** to complete the assignments – preferably in at least one-hour blocks and at least three times a week. It can be easy to fall behind!
- *Check your email account regularly* for updated information. We will be using your Saclink email account for communication. Use Saclink e-mail for private messages to the instructor and other students.
- Read directions carefully.
- For online communication, conventions of on-line etiquette ("netiquette"), which include a courtesy to all users, will be observed. Please see [Guidelines for Online Discussions](#).

### Attitudes & Technical Skills Required

You will find that the following attitude will significantly contribute to your success in this online class:

- A positive attitude towards technology
- An open mind towards online education
- Willingness to share your experiences with others
- Strong analytical and critical thinking skills for when you "get stuck"
- Resourcefulness - don't be afraid to click on links and explore and ask questions
- Time management

Online learning requires only basic technical skills:

- Be competent with file management (for example, creating a folder on your desktop, moving files from one location to another, finding a saved file)
- Possess internet navigation skills
- Update your Internet browser
- Send and receive email
- Create and save documents (Word, PowerPoint, Excel or HTML)
- Toggle between two open software applications on your computer
- Copy text from a word processing program and paste them into another program

### Technical Assistance

Seek help when you can't access Canvas or class materials.

- For technical assistance, contact the IRT Help Desk. Visit AIRC 2005 during [open hours](#) to speak with the IRT Service Desk Team, or call (916)278-7337. [IRT website](#).
- For assistance with course materials, contact your instructor

### Spam and Phishing Scams

- Learn how to stay safe and protect yourself from hackers who may try to access your personal information: [Don't Fall for a Phishing Scam](#)
- Use anti-virus, anti-spyware, and anti-malware software. [Sac State's Software and Tools](#) available for download.
- Use pins and passwords to secure your computer and devices- don't share your password with anyone. Use strong passwords that include a combination of letters and numbers that no one can guess.

## Canvas Student App

Canvas is fully functional on many types of smartphones and tablets. Compatible devices include platforms such as iPhone/iPad/iPod Touch, and Android. However, it is recommended that you do not solely rely on one of these devices to complete your online course work. Access to a computer is still needed for many online activities.

Visit the [Mobile section](#) of the [Canvas Guides](#) website for more information.

# Knowledge And Skills Acquisition (KASA) For Certification in Audiology

## Scientific and Research Foundations

- The basics of communication sciences (e.g., acoustics, psychoacoustics and neurological processes of speech, language, and hearing)

## Standard II-A: Foundations of Practice

- A3. Language and speech characteristics and their development for individuals with normal and impaired hearing across the life span
- A5. Calibration and use of instrumentation according to manufacturers' specifications and accepted standards
- A6. Standard safety precautions and cleaning/disinfection of equipment in accordance with facility-specific policies and manufacturers' instructions to control for infectious/contagious diseases
- A7. Applications and limitations of specific audiologic assessments and interventions in the context of overall client/patient management
- A8. Implications of cultural and linguistic differences, as well as individual preferences and needs, on clinical practice and on families, caregivers, and other interested parties
- A11. Manual and visual communication systems and the use of interpreters/transliterators/translators
- A12. Effective interaction and communication with clients/patients, families, professionals, and other individuals through written, spoken, and nonverbal communication
- A13. Principles of research and the application of evidence-based practice (i.e., scientific evidence, clinical expertise, and client/patient perspectives) for accurate and effective clinical decision making
- A15. Client-centered, behavioral, cognitive, and integrative theories and methods of counseling and their relevance in audiologic rehabilitation
- A16. Principles and practices of client/patient/person/family-centered care, including the role and value of clients'/patients' narratives, clinician empathy, and shared decision making regarding treatment options and goals
- A17. Importance, value, and role of interprofessional communication and practice in patient care
- A18. The role, scope of practice, and responsibilities of audiologists and other related professionals
- A21. Advocacy for individual patient needs and for legislation beneficial to the profession and the individuals served
- A22. Legal and ethical practices, including standards for professional conduct, patient rights, confidentiality, credentialing, and legislative and regulatory mandates
- A23. Principles and practices of effective supervision/mentoring of students, other professionals, and support personnel

## Standard II-B: Prevention and Screening

- B1. Educating the public and those at risk on prevention, potential causes, effects, and treatment of congenital and acquired auditory and vestibular disorders
- B2. Establishing relationships with professionals and community groups to promote hearing wellness for all individuals across the life span
- B5. Recognizing a concern on the part of medical providers, individuals, caregivers, or other professionals about hearing and/or speech-language problems and/or identifying people at risk to determine a need for hearing screening

- B6. Conducting hearing screenings in accordance with established federal and state legislative and regulatory requirements.
- B8. Performing developmentally, culturally, and linguistically appropriate hearing screening procedures across the life span
- B9. Referring persons who fail the hearing screening for appropriate audiologic/medical evaluation

### **Standard II-C: Audiologic Evaluation**

- C1. Gathering, reviewing, and evaluating information from referral sources to facilitate assessment, planning, and identification of potential etiologic factors
- C2. Obtaining a case history and client/patient narrative
- C3. Obtaining client/patient-reported and/or caregiver-reported measures to assess function
- C4. Identifying, describing, and differentiating among disorders of the peripheral and central auditory systems and the vestibular system
- C5. Providing assessments of tinnitus severity and its impact on patients' activities of daily living and quality of life
- C7. Selecting, performing, and interpreting a complete immittance test battery based on patient need and other findings; tests to be considered include single probe tone tympanometry or multifrequency and multicomponent protocols, ipsilateral and contralateral acoustic reflex threshold measurements, acoustic reflex decay measurements, and Eustachian tube function
- C8. Selecting, performing, and interpreting developmentally appropriate behavioral pure-tone air and bone tests, including extended frequency range when indicated
- C9. Selecting, performing, and interpreting developmentally appropriate behavioral speech audiometry procedures to determine speech awareness threshold (SAT), speech recognition threshold (SRT), and word recognition scores (WRSs); obtaining a performance intensity function with standardized speech materials, when indicated
- C10. Evaluating basic audiologic findings and client/patient needs to determine differential diagnosis and additional procedures to be used
- C11. Selecting, performing, and interpreting physiologic and electrophysiologic test procedures, including electrocochleography, auditory brainstem response with frequency-specific air and bone conduction threshold testing, and click stimuli for neural diagnostic purposes
- C12. Selecting, performing, and interpreting otoacoustic emissions testing

### **Standard II-D: Counseling**

- D1. Identifying the counseling needs of individuals with hearing impairment based on their narratives and results of client/patient and/or caregiver responses to questionnaires and validation measures
- D2. Providing individual, family, and group counseling as needed based on client/patient and clinical population needs
- D3. Facilitating and enhancing clients'/patients' and their families' understanding of, acceptance of, and adjustment to auditory and vestibular disorders
- D4. Enhancing clients'/patients' acceptance of and adjustment to hearing aids, hearing assistive technologies, and osseointegrated and other implantable devices
- D5. Addressing the specific interpersonal, psychosocial, educational, and vocational implications of hearing impairment for the client/patient, family members, and/or caregivers to enhance their well-being and quality of life
- D6. Facilitating patients' acquisition of effective communication and coping skills
- D7. Promoting clients'/patients' self-efficacy beliefs and promoting self-management of communication and related adjustment problems
- D8. Enhancing adherence to treatment plans and optimizing treatment outcomes
- D9. Monitoring and evaluating client/patient progress and modifying counseling goals and approaches, as needed

## **Standard II-E: Audiologic Rehabilitation Across the Life Span**

- E1. Engaging clients/patients in the identification of their specific communication and adjustment difficulties by eliciting client/patient narratives and interpreting their and/or caregiver-reported measures
- E2. Identifying the need for, and providing for assessment of, concomitant cognitive/developmental concerns, sensory-perceptual and motor skills, and other health/medical conditions, as well as participating in interprofessional collaboration to provide comprehensive management and monitoring of all relevant issues
- E3. Responding empathically to clients'/patients' and their families' concerns regarding communication and adjustment difficulties to establish a trusting therapeutic relationship
- E4. Providing assessments of family members' perception of and reactions to communication difficulties
- E5. Identifying the effects of hearing problems and subsequent communication difficulties on marital dyads, family dynamics, and other interpersonal communication functioning
- E6. Engaging clients/patients (including, as appropriate, school-aged children/adolescents) and family members in shared decision making regarding treatment goals and options
- E15. Counseling cochlear implant candidates and their families regarding the benefits and limitations of cochlear implants to (a) identify and resolve concerns and potential misconceptions and (b) facilitate decision making regarding treatment options
- E20. Providing or referring for consulting services in the installation and operation of multi-user systems in a variety of environments (e.g., theaters, churches, schools)
- E21. Providing auditory, visual, and auditory–visual communication training (e.g., speechreading, auditory training, listening skills) to enhance receptive communication
- E22. Counseling clients/patients regarding the audiologic significance of tinnitus and factors that cause or exacerbate tinnitus to resolve misconceptions and alleviate anxiety related to this auditory disorder
- E23. Counseling clients/patients to promote the effective use of ear-level sound generators and/or the identification and use of situationally appropriate environmental sounds to minimize their perception of tinnitus in pertinent situations
- E24. Counseling clients/patients to facilitate identification and adoption of effective coping strategies to reduce tinnitus-induced stress, concentration difficulties, and sleep disturbances
- E25. Monitoring and assessing the use of ear-level and/or environmental sound generators and the use of adaptive coping strategies to ensure treatment benefit and successful outcome(s)

## **Standard II-F: Pediatric Audiologic (Re)habilitation**

- F1. Counseling parents to facilitate their acceptance of and adjustment to a child's diagnosis of hearing impairment
- F2. Counseling parents to resolve their concerns and facilitate their decision making regarding early intervention, amplification, education, and related intervention options for children with hearing impairment
- F3. Educating parents regarding the potential effects of hearing impairment on speech-language, cognitive, and social–emotional development and functioning
- F4. Educating parents regarding optional and optimal modes of communication; educational laws and rights, including 504s, individualized education programs (IEPs), individual family service plans (IFSPs), individual health plans; and so forth
- F6. Instructing parents and/or child(ren) regarding the daily use, care, and maintenance of amplification devices and HATS
- F7. Planning and implementing parent education/support programs concerning the management of hearing impairment and subsequent communication and adjustment difficulties
- F11. Counseling the child with hearing impairment regarding peer pressure, stigma, and other issues related to psychosocial adjustment, behavioral coping strategies, and self-advocacy skills
- F13. Providing interprofessional consultation and/or team management with speech-language pathologists, educators, and other related professionals