



California State University, Sacramento

Department of Communication Sciences and Disorders

GRADUATE (AuD) SYLLABUS

Semester/Year: Fall 2024	Course: CSAD 640C Audiology Clinic IV	Section: 05 and 06
Meeting Days: Thursdays	Meeting Times: 1:00pm-5:00pm (Thurs)	Location: MJRLSHC
Instructor: Soumya Venkitakrishnan, Au.D., Ph.D.	Email: <a href="mailto:s.venkitakrishnan@csus.edu">s.venkitakrishnan@csus.edu</a>	Phone: 916-278-4899
Office Location: 2404G, Folsom Hall	Office Hours/Appointments: Mondays: noon –1 pm and 3:15 to 4:15 pm, Wednesdays: 3:15 to 4:15 pm (Make appointment)	

**Catalogue Course Description:**

Supervised clinical practice in audiology with an emphasis on developing clinical skills for audiologic evaluations, amplification, and aural rehabilitation.

**Prerequisite(s): Admission to Doctor of Audiology program; CSAD 610, 620C, 630C**

**Corequisite(s): 640**

**Term typically offered: Fall only**

**Description:**

CSAD 640C: Supervised clinical practice in audiology with an emphasis on developing second-semester clinical skills for the basics of the audiologic evaluation (otoscopy, immittance, pure-tone air- and bone-conduction audiometry, speech audiometry).

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>	Y
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Supervised clinical practice in audiology with an emphasis on developing second-semester clinical skills for the basics of the audiologic evaluation (otoscopy, immittance, pure-tone air- and bone-conduction audiometry, speech audiometry), amplification, aural rehabilitation (group sessions, orientation, counseling) and possibly specialized testing and services such as tinnitus assessment and management, cerumen management, aural rehabilitation & cochlear implant evaluations. This class corresponds with CSAD640.

*The student clinician will be responsible for:*

- a. Reviewing and familiarizing yourselves with the clinic handbook at the beginning of the semester.
- b. Assessing patient's auditory and/or vestibular systems in terms of structure and function.
- c. Arriving on time to clinic (i.e. 30 minutes before scheduled patient appointment).
- d. Prescribing appropriate management and/or treatment methodologies for hearing and/or balance disorders.
- e. Interpreting results of case history, previous evaluations and/or referrals.
- f. Writing pertinent HIPAA compliant information to prepare for appointments. Outline measurable outcomes/clinic goals for every appointment.
- e. First drafts of written reports must be completed in Counsel Ear **within two business days**. Please print a copy of the professional report and check the following: student clinician, supervisor, calibration date, patient reliability, transducer, tympanometry type and case history information. Please give the copy of the report to your supervisor once the first draft is completed. Revisions will be discussed at each following meeting. **Two late submissions or excessive corrections after two attempts will automatically will 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 midterm and final. Written self-reflections (identifying clinical strengths and areas for improvement) are to be submitted to the assigned clinical instructor.
- h. Meeting with the assigned Clinical Instructor on a once weekly basis is mandatory. The clinical instructor will be available to at other times also, 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 Clinical Instructor.
- i. No-show appointments, students will be responsible for (but not limited to) performing lab/sim-lab assignments, reviewing pathologies, practicing basic and specialized test batteries, taking clinic inventory, and administrative tasks.

## **WHY IS THIS COURSE IMPORTANT?**

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

## GRADUATE UNIVERSITY LEARNING GOALS

	1 Disciplinary knowledge	2 Communication	3 Critical thinking/analysis	4 Information literacy	5 Professional ism	6 Intercultural/g lobal perspectives	7 Research
Addressed by this course	X	X	X	X	X	X	X

## GRADUATE LEARNER 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 patient, family, and other health care providers
5. Adhere to professional ethics as they relate to the practice of audiology
6. Describe and discuss clinical experiences in a professional manner.
7. Identify relationships between clinical experiences and didactic learning.

Graduate Learner Outcome	Component Indicating Competence
Assessment: 3, 7	Audiological Evaluation Documentation
Treatment: 1, 4, 7	Clinical Instructor session notes
Writing: 1, 2, 7	Student Clinician Written Reports; Timely submission of reports
Professional Behavior: 5, 6, 7	Clinical Instructor session notes; Required student self-reflections; Attendance at weekly meetings

## Course Requirements/Components

### Course Format

Clinical

### GRADING/DUE DATES:

This course is graded as Pass or Fail. A pass grade of B (83%) is required. The following components will be evaluated by your supervisor to determine your final grade:

Final Evaluation in Calipso	70%- <b>December 6<sup>th</sup> by 5pm</b>
Attendance, Communication & Professionalism	10% - <b>weekly</b>
Practice Sessions, Report Writing & CPT Codes	10%- <b>weekly</b>
Precepting/Supervision Reflecting Assignment	5%- <b>10/17 and 12/05</b>

Calipso Patient Clock Hours & Supervisor Feedback Form, Self-Reflections (Midterm and Final)	5% - <b>Clock hours (weekly), Supervisor Feedback &amp; Self-Reflections (October 17<sup>th</sup> &amp; December 8<sup>th</sup>)</b>
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%	Letter
93-100%	A
90-92.99%	A-
87-89.99%	B+
<b>83-86.99%</b>	<b>B</b>
80-82.99%	B-
77-79.99%	C+
73-76.99%	C
70-72.99%	C-
67-69.99%	D+
63-66.99%	D
60-62.99%	D-
< 60%	F

### **Final Evaluation in Calipso – (70%):**

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. The Clinical Competency form will be completed by your clinical supervisor at midterm and at final, but it is the final Clinical Competency Report on which your final evaluation 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 final evaluation grade is based on an average of all the clinical competencies that your clinical supervisor completes.

Each general competency area consists of numerous individual items. A passing grade is obtained by achieving a rating of 4.25 or better on the average combined score of the seven general competency categories, provided that the student achieves a minimum score of 4.25 on **all** individual competency line items at the end of the rotation. Therefore, any student receiving (a) a rating of 4.24 or less on one (or more) specific line item on the final session or (b) an average rating of 4.24 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 4.24 or lower on 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.

SCORE	LETTER GRADE	DESCRIPTION
4.65 - 5.00	A	<p><b><u>Exceeds Performance Expectations* (Pass)</u></b></p> <p>(Minimum assistance required)</p> <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>
4.50 - 4.64	A-	
4.35 – 4.49	B+	<p><b><u>Meets Performance Expectations* (Pass)</u></b></p> <p>(Minimum to moderate assistance required)</p> <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>
4.25 – 4.34	B	
4.00 – 4.24	B-	<p><b><u>Needs Improvement in Performance</u></b></p> <p>(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></p> <p>(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	
1.00 – 2.99	F	<p><b><u>Unacceptable Performance</u></b></p> <p>(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>

**NOTE: Students who have a grade equal to or less than a B on any assessment listed below must meet with the instructor (initiation of an APIP with the program director).**

## **Attendance, communication and professionalism – 10%**

### ***Attendance***

If a student is ill and cannot attend clinic, please contact your clinical supervisor. Students are expected to **meet all clinic appointments**. Students need to fill out an [Absence Form](#) when they are expecting to miss clinic for a pre-excused (approved by your supervisor) absence. Makeup day(s) must be arranged.

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

Failure to notify your supervisor of any absences via email and the absence form, as well as excessive tardiness, will result in 2% reduction per occurrence up to a maximum of a 10% grade reduction.

### ***Communication***

Students must maintain timely, respectful and professional communication with their clinical supervisor. Students and supervisors should meet on a weekly basis to prepare for patient appointments, discuss cases, etc.

For email correspondence (your instructors preferred method of contact), students should be:

1. Using the CSUS email ([\\_\\_\\_\\_\\_@csus.edu](#))
2. Checking emails daily.
3. Responding within 48 hours of receipt of email.

Failure to do so may result in a 2% grade reduction per occurrence up to a maximum of a 10% grade reduction.

### ***Professionalism***

- Students must be dressed in CSUS Clinic scrubs and present well-groomed and professional in appearance. Inappropriate clinical attire could result in a student being asked to leave clinic and return when appropriately dressed.
- Students should adhere to the standards set forth in the clinic handbook regarding patient confidentiality. Any violation of these policies will result in the student receiving a failing grade in the clinic
- Students should be engaged throughout all appointments, even when they are not taking the lead. Cellphone use during clinic will not be tolerated.

Any violation of the above may result in a 2% grade reduction per occurrence up to a maximum of a 10% grade reduction.

## **Practice Sessions, Report Writing and Billing and Coding– 10%**

### **Practice Sessions**

Students are required to complete at least 4 hours of practice per week outside of their scheduled clinic hours. By the end of the semester, each student must have conducted a minimum of four (4) practice audiograms, along with the corresponding reports. Two of these practice sessions must be conducted in the presence of your 1st-year mentee, during which you will need to demonstrate each step of the appointment. In one of these sessions, you may supervise your 1st-year mentee, allowing them to perform some or all parts of the appointment. You should also collaborate with your mentee on writing the report for this session. This assignment is designed to enhance your

technical skills in audiometry, mentorship/precepting, and to strengthen your communication skills through case history taking, report writing, and teaching. You may select the population for your audiometric assessments.

The basic audiometric components should include:

- Case History
- Otoscopy
- Tympanometry
- Acoustic Reflexes (Ipsi & Contra)
- Air and Bone Conduction
- Speech Reception Threshold (SRT)
- Word Recognition Score (WRS)
- Monaural Quick SIN

Students are encouraged to explore specialized testing options such as:

- Stenger Test
- Rollover
- Reflex Decay
- Tone Decay
- Eustachian Tube Function Testing
- HINT testing
- APD screening/testing
- Tinnitus evaluations
- Cochlear implant evaluations
- Electrophysiology Testing

Students must log their practice time on the provided electronic log sheet and obtain a signature from the ASC II verifying weekly practice sessions. De-identified electronic copies of the comprehensive reports and practice sheet must be submitted by the deadlines specified in Canvas.

### **Report Writing**

Students are required to submit timely and well written reports. First drafts of written reports must be completed in Counsel Ear **within two business days**. Please print a copy of the professional report and check the following: student clinician, supervisor, calibration date, patient reliability, transducer, tympanometry type and case history information. Please give the copy of the report to your supervisor once the first draft is completed. Revisions will be discussed at each following meeting. Edits will be given back in person and changes should be made to the report in CounselEar. Once the final draft is ready, please change the status in CounselEar to “Ready to be Reviewed”. **Two late submissions or excessive corrections after two attempts will automatically drop your final writing area clinical competency grade by one letter grade. through reduction of points.**

### **Billing and Coding**

Each student is responsible for attaching the appropriate CPT billing code(s) that corresponds with their appointment(s). A superbill should be generated and attached to the report when given. This is a mock superbill and will not be sent to the patient directly.

### **Precepting/Supervision -5%**

A major goal of this semester is to transition students to be more independent in clinic. One way to do this is by helping to guide and mentor others in the program. This exercise will help to:

1. Enhance Communication Skills
2. Strengthen Clinical Knowledge
3. Encourage Critical Thinking
4. Keeps you up to date with current practices.
5. Promotes Self-Reflection
6. Reinforces Professionalism
7. Develop Leadership Skills
8. Fosters a Learning Environment
9. Encourages Inclusivity and adaptability.
10. Strengthens Interpersonal Skills

For at least two of your practice sessions, you will engage in a precepting assignment with your 1st-year mentee. During the first session, you will guide your mentee through the audiometric assessment process, demonstrating each step while explaining your actions. This session is an opportunity for you to illustrate best practices in audiometry and effective communication skills, ensuring your mentee understands the process from start to finish.

In the second session, you will take on a supervisory role, allowing your mentee to perform all or part of the audiometric assessment under your guidance. Afterward, you and your mentee will collaborate on writing the report for this session. This assignment is designed to develop your leadership and mentorship abilities while reinforcing your technical and communication skills.

### **Reflection Assignment:**

Write two short reflections (minimum 300 words) on each precepting interaction. Your reflection should include the steps you took to demonstrate the AUT (comprehensive hearing test) battery with your student and the strengths, and weaknesses throughout the appointment. You should also explain how you offered constructive feedback from your perspective as the supervisor. Additionally, you should reflect on the challenges you encountered and how you plan to incorporate your improvements or strengths into your future practice.

### **Calipso Patient Clock Hours & Supervisor Feedback Form– 10%**

**Patient contact hours- clock hours must be submitted to your supervisor weekly in Calipso.** It is your responsibility to periodically remind your clinical supervisor to sign off on your Calipso hours. Please include the date and nature of the appointment for every clock hour submission in the “Comments” section. Failure to submit clock hours weekly will result in 2% reduction of your grade per occurrence up to a maximum of 5% grade reduction.

### **Supervisor Feedback Forms (Due December 6<sup>th</sup>):**

1. Login to Calipso



2. From the Lobby page, click “Supervisor Feedback forms”
3. Clinic “New Supervisor feedback”
4. Complete form and click “Submit Feedback”
5. Your completed feedback will be posted for Clinical Education Coordinator approval. Once approved, feedback will be posted for the clinical supervisor to view. Until approved, the feedback may be edited by clicking on “View/edit”.

**Self-Reflections (Due October 17<sup>th</sup> & December 6<sup>th</sup>)**

- At the completion of each clinical course or as directed by your Clinical Coordinator, complete a self-evaluation.
- From the lobby page, click on the “Self-evaluations” link.
- Click on “New self-evaluation.”
- Complete required fields designated with an asterisk and press “save.”
- Continue completing self-evaluation by scoring all applicable skills across the Big 9 using the provided scoring method and saving frequently to avoid loss of data.
- Once the evaluation is complete, check the “final submission” box and click “save.”
- Receive message stating “evaluation recorded.”
- Please note you may edit and save the evaluation as often as you wish until the final submission box is checked. Once the final submission box is checked and the evaluation saved, the status will change from “in progress” to “final”.
- To view the evaluation, click “Evaluations list” located within the blue stripe.

**Student Tentative Schedule:**

<b>Day and Time</b>	<b>Clinical Supervisor</b>	<b>2<sup>nd</sup> Year Student</b>	<b>1<sup>st</sup> Year Student</b>
Tuesday 8am-12pm	Dr. Cassar	Jamie Followill	Keaira Cooper
Thursday 8am-12pm	Dr. Cassar	Serena Loreda	Hope Lee
Tuesday 8am-12pm	Dr. Balan	Jaleasha Lyons	Abigail Jesus
Thursday 8am-12 pm	Dr. Balan	Erika Perez	Mataya Oakes
Thursday 1-5pm	Dr. Cate	Warren Taylor	Cindy Huynh
Thursdays 8am-12pm	Dr. Venkitakrishnan	Nikki Dutta	Bianca Esparza
Thursdays 8am-2:30-6:30 pm	Dr. Venkitakrishnan	Raymund Madayag	Gerard De Jesus

## TENTATIVE Clinic Schedule/Outline:

Date	Topic/Class Content	Assignment
08/29	Syllabus overview Expectations Clinic	
09/05	Clinic	
<b>09/12</b>	<b>No clinic- CAA conference</b>	Practice Assignment 1
09/19	Clinic	
<b>09/20</b>	<b>Clinic (Compensation for 09/12)</b> <b>Dutta: 8 am-12 pm</b> <b>Madayag: 1-5 pm</b>	
09/26	Clinic	Practice Assignment 2
10/03	Clinic	
10/10	Clinic	
10/17	Clinic	Reflection on supervision (mid-term)
10/24	Clinic	Mid-term self-Reflection (Due October 17 8 am)
10/31	Clinic	
11/07	Clinic	Practice Assignment 3
11/14	Clinic	
<b>11/15</b>	<b>Clinic (Compensation for 12/05)</b> <b>Dutta: 8 am-12 pm</b> <b>Madayag: 1-5 pm</b>	
11/21	Clinic Guest lecture/ activity for CSAD 101 class	Practice assignment 4
<i>11/28</i>	<i>Thanksgiving: Holiday</i>	
12/05	Bianca- test Nikki (with masking) Bianca- test Raymund (with masking) Nikki- test Bianca (ABR)  Gerard- test Raymund (with masking) Gerard- test Nikki (with masking) Raymund- test Gerard (ABR)	Bianca and Nikki- Submit 2 audio reports Nikki- submit ABR report  Gerard and Raymund- Submit 2 audio reports Raymund- submit ABR report Reflection on supervision (final)
Week of 12/09	Final evaluation	Final Self-Reflection (Due December 6 <sup>th</sup> )

\*\* Course schedule is subject to change as required to accommodate student learning or faculty availability.

## Additional Information

### 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).
- **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 should dress appropriately for class. Classes may be held in clinic space, so students are expected to observe the clinic dress code.
- **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.

### Accommodations

Inform your instructor of any accommodations needed. If you have a documented disability and verification from the Disability Access Center (Formerly known as 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 DAC and meet with a SSWD counselor to request special accommodation before classes start. DAC is located in Lassen Hall 1008 and can be contacted by phone at [\(916\) 278-6955](tel:9162786955) (Voice) or [\(916\) 278-7239](tel:9162787239) (TDD only) or via email at [dac@csus.edu](mailto:dac@csus.edu)

### 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: <http://www.csus.edu/umannual/student/stu-0100.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.

### 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 Disabilities Access Center (DAC), 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 DAC and meet with a DAC counselor to request special accommodation before classes start. **Sacramento State Services to Disabilities Access Center (DAC)** offers a wide range of support services and accommodations for students to ensure students with disabilities have equal access and opportunity to pursue their educational goals. Working collaboratively with students, faculty, staff and administrators, DAC provides consultation and serves as the information resource on disability related issues to the campus community. DAC 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 [dac@csus.edu](mailto:dac@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>

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

This class will fulfill in whole or in part, the following KASA outcomes as required by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA):

Standard II-A: A3, A5, A6, A7, A8, A11, A12, A13, A15, A16, A17, A18, A21, A22, A23.

Standard II-B: B1, B2, B5, B6, B8, B9

Standard II-C: C1, C2, C3, C4, C5, C7, C8, C9, C10, C11, C12.

Standard II-D: D1, D2, D3, D4, D6, D7, D8, D9

Standard II-E: E1, E2, E3, E4, E5, E6, E15, E20, E21, E22, E23, E24, E25

Standard II-F: F1, F2, F3, F4, F6, F7, F11, F13,

## Accreditation Commission for Audiology Education (ACAE) Competencies

This class will fulfill in whole or in part, the following methods of evaluation required by the Accreditation Commission for Audiology Education (ACAE):

Foundation: F1, F2, F3, F5, F6, F7, F9, F10,

Diagnosis and Management: D1, D3, D4, D5, D6, D7, D8, D9, D10, D11, D12, D14

Communication: C1, C2, C3, C4, C5, C6, C7, C8

Professional Responsibilities and Values: P2, P3, P4, P5, P6, P10, P11, P13, P12, P13, P14, P15, P16, P17

# Council on Academic Accreditation (CAA) Competencies

## **3.1.1A PROFESSIONAL PRACTICE COMPETENCIES**

Accountability

Effective Communication Skills

Evidence-Based Practice

Professional Duty

## **3.1.2A FOUNDATIONS OF AUDIOLOGY PRACTICE**

Embryology, anatomy, and physiology of the auditory, vestibular, and related body systems

Normal aspects of auditory and vestibular function across the lifespan

Normal aspects of speech perception across the lifespan

Effects and role of genetics in auditory function, diagnosis, and management of hearing loss

Effects and role of genetics in vestibular function, diagnosis, and management of vestibular disorders

Effects of chemicals and other noxious elements on auditory and vestibular function

Effects of pathophysiology on the auditory, vestibular, and related body systems

Medical and surgical interventions that may be used to treat the results of pathophysiology in these systems

Interaction and interdependence of speech, language, and hearing in the discipline of human communication sciences and disorders

Effects of hearing loss on the speech and language characteristics of individuals across the life span and the continuum of care

Effects of hearing impairment on educational, vocational, social, and psychological function and, consequently, on full and active participation in life activities

## **3.1.3A IDENTIFICATION AND PREVENTION OF HEARING LOSS, TINNITUS, AND VESTIBULAR DISORDERS**

The prevention of the onset of loss of auditory system function, loss of vestibular system function, development of tinnitus, and development of communication disorders

The use of protocols to minimize the impact of the loss of hearing, tinnitus, loss of vestibular system function, and development of communication disorders

The use of screening protocols, including clinically appropriate and culturally sensitive screening measures, to assess individuals who may be at risk for hearing impairment and activity limitation or participation restriction

The use of screening tools for functional assessment

Administering programs designed to reduce the effects of noise exposure, tinnitus, and agents that are toxic to the auditory and vestibular systems

Applying the principles of evidence-based practice

Selection and use of outcomes measures that are valid and reliable indicators of success of prevention programs

## **3.1.4A ASSESSMENT OF THE STRUCTURE AND FUNCTION OF THE AUDITORY AND VESTIBULAR SYSTEMS AS WELL AS THE IMPACT OF ANY CHANGES TO SUCH SYSTEMS**

Evaluate information from appropriate sources to facilitate assessment planning

Obtain a case history

Perform an otoscopic examination

Remove cerumen, when appropriate

Administer clinically appropriate and culturally sensitive assessment measures

Perform audiologic assessment using behavioral, physiological (e.g., immittance, wideband reflectance, evoked potentials), psychophysical, and self-assessment tools

Perform audiologic assessment using techniques that are representative of the challenges listeners may face in everyday communication situations

Perform assessment to plan for rehabilitation

Perform assessment to characterize tinnitus

Perform balance system assessment and determine the need for balance rehabilitation

Document evaluation procedures and results

Interpret results of the evaluation to establish type and severity of disorder

Generate recommendations and referrals resulting from the evaluation processes

Provide counseling in a culturally sensitive manner to facilitate understanding of the hearing loss, tinnitus, or balance disorder of the individual being served

Maintain records in a manner consistent with legal and professional standards

Communicate results and recommendations orally and in writing to the individual being served and other appropriate individual(s)

Engage in interprofessional practice to facilitate optimal assessment of the individual being served

Assign the correct Common Procedural Terminology (CPT) code(s) and the correct International Classification of Diseases (ICD) code(s)

Apply the principles of evidence-based practice

Select and use outcomes measures that are valid and reliable indicators of success in assessment protocols and in determining the impact of changes in structure and function of the auditory and vestibular systems

Administer clinically appropriate and culturally sensitive self-assessment measures of communication function and functional assessment tools for individuals across the lifespan and the continuum of care

Administer clinically appropriate and culturally sensitive scales of communication function to communication partners of the individual being served

Determine contextual factors that may facilitate or impede an individual's participation in everyday life

### **3.1.5A INTERVENTION TO MINIMIZE THE EFFECTS OF CHANGES IN THE AUDITORY AND VESTIBULAR SYSTEMS ON AN INDIVIDUAL'S ABILITY TO PARTICIPATE IN HIS OR HER ENVIRONMENT**

Perform assessment for aural (re)habilitation

Perform assessment for tinnitus intervention

Perform assessment for vestibular rehabilitation

Develop and implement treatment plans using appropriate data

Counsel individuals served, families, and other appropriate individuals regarding prognosis and treatment options

Develop culturally sensitive and age-appropriate management strategies

Perform hearing aid, assistive listening device, and sensory aid assessment

Recommend, dispense, and service prosthetic and assistive devices

Provide hearing aid, assistive listening device, and sensory aid orientation

Conduct audiologic (re)habilitation and engage in interprofessional practice to maximize outcomes for individuals served

Serve as an advocate for individuals served, their families, and other appropriate individuals



Monitor and summarize treatment progress and outcomes

Assess efficacy of interventions for auditory, tinnitus, and balance disorders

Apply the principles of evidence-based practice

Document treatment procedures and results

Maintain records in a manner consistent with legal and professional standards

Communicate results, recommendations, and progress in a culturally sensitive and age-appropriate manner to appropriate individual(s)

Select and use outcomes measures that are valid and reliable indicators of success in determining the impact of the interventions used to minimize the effects of changes in structure and function of the auditory and vestibular systems

### **3.1.6A GENERAL KNOWLEDGE AND SKILLS APPLICABLE TO PROFESSIONAL PRACTICE**

Ethical conduct

Integration and application of the interdependence of speech, language, and hearing

Engagement in contemporary professional issues and advocacy

Engagement in self-assessment over the duration of the program to improve effectiveness in the delivery of clinical services

Clinical education and supervision skills

Clinical counseling skills appropriate to the individual, family members, caregivers, and others involved in care

Professionalism and professional behavior that is reflective of cultural and linguistic differences

Interaction skills and interpersonal qualities, including counseling and collaboration

Ability to work effectively as a member of an interprofessional team