

Area: Program Services
Subject: Diagnostic Services in Audiology
Policy No.: 121

POLICY

It is the policy of the Center for Communication Disorders to complete a hearing evaluation that is appropriate for each client who is provided audiological services at the Center.

PURPOSE

The purpose of this policy is to ensure that each audiology client's hearing status is completely assessed so that recommendations for audiological management, medical evaluation and aural rehabilitation can be made.

PROCEDURES

- 1) The supervisor assigned to the client will consult with assigned student clinician(s) to determine the appropriate test procedures.
- 2) In determining test procedures, the supervisor and student clinicians will review the case history and other data in the client's record and consider age, level of functioning, medical, and other case history information.
- 3) In addition to a pretest interview, the procedures that comprise an audiological test battery will differ as follows:
 - a. An initial adult test battery will include conventional pure-tone air and bone threshold testing, speech audiometry, acoustic immittance testing, and may include screening for retrocochlear site of lesion.
 - b. Follow-up adult procedures may include special site of lesion testing, hearing aid evaluation, central auditory testing, and assessment of communication skills.
 - c. Pediatric procedures will include sensitivity measures selected from techniques appropriate to the child's age and level of functioning, acoustic immittance tests, otoacoustic emission measures (OAE's), and may include speech and hearing screening.
 - d. In addition to routine pure-tone, speech and acoustic immittance tests, a battery for school-aged children with sensorineural hearing losses will include:
 - i. Objective (electroacoustic) and
 - ii. Subjective (aided warble-tone speech) assessments or personal hearing aids and classroom amplification.
 - e. Auditory Processing Evaluations will include conventional pure-tone air and bone testing, speech audiometry, immittance and OAE measures. Following completion of the peripheral testing, the auditory test battery will be administered. For children 8.5 years and above, the primary auditory test battery will be administered, unless it is determined by the supervisor that the SCAN should be administered. The primary auditory test battery consists of process-based assessment tools including, but not limited to: Test of binaural integration, test of binaural separation, test of

temporal pattern recognition, test of binaural interaction and test of auditory closure or decoding. In addition, and at the discretion of the supervisor, electrophysiological measures may be included, and may consist of, but not be limited to, ABR, the MLR, the P300, the MNN, and the MLS.

- 4) At the conclusion of the evaluation, the supervisor and clinicians will consult to discuss the test results and appropriate recommendations.
- 5) Following the consultation, the clinicians will explain the results of the test procedures and inform the client or parent(s) of the recommendations.
- 6) The client will be requested to sign release of information forms for agencies or persons to whom copies of the report will be sent.
- 7) The student clinicians will complete an audiometric record and write a report of the evaluation which shall include: a short summary of background information, brief description of the results as shown on the audiometric record, specific recommendations, and a case disposition.
- 8) The supervisor will review the audiometric record and report and will sign the report when it is completed.
- 9) The final report will be filed in the Center's active files.