

Scope of Practice

Updated January 2004

INTRODUCTION

Development of a Scope of Practice document began in 1990 with the work of an *ad hoc* committee on Scope of Practice, chaired by Alison Grimes. The document was put into the final format by Robert W. Keith in 1992 and revised again in 1996 and 2004.

The Scope of Practice document describes the range of interests, capabilities, and professional activities of audiologists. It defines audiologists as independent practitioners and provides examples of settings in which they are engaged. It is not intended to exclude participation in activities outside of those delineated in the document. The overriding principle is that members of the Academy will provide only those services for which they are adequately prepared through their academic and clinical training and their experience and that their practice is consistent with the Code of Ethics of the American Academy of Audiology.

As a dynamic and growing profession, the field of audiology will change over time as new information is acquired. This Scope of Practice document will receive regular review for consistency with current knowledge and practice.

PURPOSE

The purpose of this document is to define the profession of audiology by its scope of practice. This document outlines those activities that are within the expertise of members of the profession. This Scope of Practice statement is intended for use by audiologists, allied professionals, consumers of audiologic services, and the general public. It serves as a reference for issues of service delivery, third-party reimbursement, legislation, consumer education, regulatory action, state and professional licensure, and inter-professional relations. The document is not intended to be an exhaustive list of activities in which audiologists engage. Rather, it is a broad statement of professional practice. Periodic updating of any scope of practice statement is necessary as technologies and perspectives change.

DEFINITION OF AN AUDIOLOGIST

An audiologist is a person who, by virtue of academic degree, clinical training, and license to practice and/or professional credential, is uniquely qualified to provide a comprehensive array of professional services related to the prevention of hearing loss and the audiologic identification, assessment, diagnosis, and treatment of persons with impairment of auditory and vestibular function, and to the prevention of impairments associated with them. Audiologists serve in a number of roles including clinician, therapist, teacher, consultant, researcher and administrator. The supervising audiologist maintains legal and ethical responsibility for all assigned audiology activities provided by audiology assistants and audiology students.

The central focus of the profession of audiology is concerned with all auditory impairments and their relationship to disorders of communication. Audiologists identify, assess, diagnose, and

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treat individuals with impairment of either peripheral or central auditory and/or vestibular function, and strive to prevent such impairments.

Audiologists provide clinical and academic training to students in audiology. Audiologists teach physicians, medical students, residents, and fellows about the auditory and vestibular system. Specifically, they provide instruction about identification, assessment, diagnosis, prevention, and treatment of persons with hearing and/or vestibular impairment. They provide information and training on all aspects of hearing and balance to other professions including psychology, counseling, rehabilitation, and education. Audiologists provide information on hearing and balance, hearing loss and disability, prevention of hearing loss, and treatment to business and industry. They develop and oversee hearing conservation programs in industry. Further, audiologists serve as expert witnesses within the boundaries of forensic audiology.

The audiologist is an independent practitioner who provides services in hospitals, clinics, schools, private practices and other settings in which audiologic services are relevant.

SCOPE OF PRACTICE

The scope of practice of audiologists is defined by the training and knowledge base of professionals who are licensed and/or credentialed to practice as audiologists. Areas of practice include the audiologic identification, assessment, diagnosis, and treatment of individuals with impairment of auditory and vestibular function, prevention of hearing loss, and research in normal and disordered auditory and vestibular function. The practice of audiology includes:

IDENTIFICATION

Audiologists develop and oversee hearing screening programs for persons of all ages to detect individuals with hearing loss. Audiologists may perform speech or language screening, or other screening measures, for the purpose of initial identification and referral of persons with other communication disorders.

ASSESSMENT AND DIAGNOSIS

Assessment of hearing includes the administration and interpretation of behavioral, physioacoustic, and electrophysiologic measures of the peripheral and central auditory systems. Assessment of the vestibular system includes administration and interpretation of behavioral and electrophysiologic tests of equilibrium. Assessment is accomplished using standardized testing procedures and appropriately calibrated instrumentation and leads to the diagnosis of hearing and/or vestibular abnormality.

TREATMENT

The audiologist is the professional who provides the full range of audiologic treatment services for persons with impairment of hearing and vestibular function. The audiologist is responsible for the evaluation, fitting, and verification of amplification devices, including assistive listening devices. The audiologist determines the appropriateness of amplification systems for persons with hearing impairment, evaluates benefit, and provides counseling and training regarding

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their use. Audiologists conduct otoscopic examinations, clean ear canals and remove cerumen, take ear canal impressions, select, fit, evaluate, and dispense hearing aids and other amplification systems. Audiologists assess and provide audiologic treatment for persons with tinnitus using techniques that include, but are not limited to, biofeedback, masking, hearing aids, education, and counseling.

Audiologists also are involved in the treatment of persons with vestibular disorders. They participate as full members of balance treatment teams to recommend and carry out treatment and rehabilitation of impairments of vestibular function.

Audiologists provide audiologic treatment services for infants and children with hearing impairment and their families. These services may include clinical treatment, home intervention, family support, and case management.

The audiologist is a member of the implant team (e.g., cochlear implants, middle ear implantable hearing aids, fully implantable hearing aids, bone-anchored hearing aids, and all other amplification/signal processing devices) who determines audiologic candidacy based on hearing and communication information. The audiologist provides pre and postsurgical assessment, counseling, and all aspects of audiologic treatment including auditory training, rehabilitation, implant programming, and maintenance of implant hardware and software.

The audiologist provides audiologic treatment to persons with hearing impairment and is a source of information for family members, other professionals, and the general public. Counseling regarding hearing loss, the use of amplification systems, and strategies for improving speech recognition is within the expertise of the audiologist. Additionally, the audiologist provides counseling regarding the effects of hearing loss on communication and psychosocial status in personal, social, and vocational arenas.

The audiologist administers audiologic identification, assessment, diagnosis, and treatment programs to children of all ages with hearing impairment from birth and preschool through school age. The audiologist is an integral part of the team within the school system that manages students with hearing impairments and students with central auditory processing disorders. The audiologist participates in the development of Individual Family Service Plans (IFSPs) and Individualized Educational Programs (IEPs), serves as a consultant in matters pertaining to classroom acoustics, assistive listening systems, hearing aids, communication, and psycho-social effects of hearing loss, and maintains both classroom assistive systems as well as students' personal hearing aids. The audiologist administers hearing screening programs in schools, and trains and supervises non audiologists performing hearing screening in the educational setting.

HEARING CONSERVATION

The audiologist designs, implements, and coordinates industrial and community hearing conservation programs. This includes identification and amelioration of noise-hazardous conditions, identification of hearing loss, recommendation and counseling on use of hearing

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protection, employee education, and the training and supervision of nonaudiologists performing hearing screening in the industrial setting.

INTRAOPERATIVE NEUROPHYSIOLOGIC MONITORING

Audiologists administer and interpret electrophysiologic measurements of neural function including, but not limited to, sensory and motor evoked potentials, tests of nerve conduction velocity, and electromyography. These measurements are used in differential diagnosis, pre- and postoperative evaluation of neural function, and neurophysiologic intraoperative monitoring of central nervous system, spinal cord, and cranial nerve function.

RESEARCH

Audiologists design, implement, analyze and interpret the results of research related to auditory and balance systems.

ADDITIONAL EXPERTISE

Some audiologists, by virtue of education, experience, and personal choice choose to specialize in an area of practice not otherwise defined in this document. Nothing in this document shall be construed to limit individual freedom of choice in this regard provided that the activity is consistent with the American Academy of Audiology *Code of Ethics*.

This document will be reviewed, revised, and updated periodically to reflect changing clinical demands of audiologists and to keep pace with the changing scope of practice reflected by these changes and innovations in this specialty.