

American Academy of Audiology

Standards of Practice for
Audiology

Published June 2012
Updated April 2023



www.audiology.org

Standards of Practice for Audiology

The mission of the American Academy of Audiology is to promote quality hearing and balance care by advancing the profession of audiology through leadership, advocacy, education, public awareness, and support of research. To serve this mission, this document was developed to provide professionals and consumers, with the clinical practice and professional behavior expectations of audiologists. Additional guidance can be found in the American Academy of Audiology’s Scope of Practice, Code of Ethics, position statements, clinical practice guidelines, and core values statements.

The Standards of Practice for Audiology are developed, and periodically updated, by the Academy to define acceptable standards of practice for professional services consistent with the Academy’s Scope of Practice. These standards reflect the values, priorities, and current state of the audiology profession. The core principle underlying these standards is that audiologists evaluate, diagnose, manage, and treat hearing and balance disorders for a diverse population across the life span through the practice of culturally sensitive patient- and family-centered care and continually evaluate and improve care through assessment of outcomes. These standards assume respect for the patient’s rights and privacy as defined by local, state, and federal laws, including the Health Insurance Portability and Accountability Act (HIPAA).

I. STANDARD—EDUCATION

- A. *Audiologists are responsible for their own professional development and the quality of the services they provide.*
1. Audiologists pursue continuing education to maintain and enhance knowledge and clinical and decision-making skills.
 2. Audiologists critically review the literature to implement evidence-based practices.
 3. Audiologists maintain licensure as required by appropriate state, federal, or territorial licensing authorities in the jurisdiction(s) where they practice.
 4. Audiologists ensure that their professional activities meet or exceed prevailing ethical standards of the profession and the legal requirements where they practice.
 5. Audiologists are responsible for program maintenance and equipment calibration to ensure the accuracy of results.

- B. *Audiologists promote hearing and balance health-care initiatives to improve public health.*
1. Audiologists maintain awareness, knowledge, and understanding of developments in health-care, legal, regulatory, and educational policies that impact the provision of audiology services.
 2. Audiologists provide consultative and educational services to consumers, industries, health-care professionals, and the general public.
 3. Audiologists develop, adopt, and implement counseling materials at health-care literacy levels appropriate for consumers to empower them to make appropriate health-care decisions.
 4. Audiologists provide clinical education to students, residents, fellows, physicians, and other health-care providers related to hearing and balance care.
 5. Audiologists provide precepted clinical experiences to audiology students.

II. STANDARD—IDENTIFICATION (SCREENING)

- A. *Audiologists develop, administer, supervise, and monitor screening programs to detect and identify individuals with, or at risk for, auditory and/or vestibular loss, and their associated comorbid conditions.*
1. Audiologists ensure that screening methods are reliable and valid and provide actionable results.
 2. Audiologists ensure that screening methods are age appropriate and culturally sensitive.
 3. Audiologists ensure that screening methods are appropriately adapted for the physical, emotional, and cognitive ability of the individuals screened.
 4. Audiologists identify possible auditory and/or vestibular loss by using screening methods that include observational measurements, self- or communication partner report measures, and behavioral and/or electrophysiological measures.
 5. Audiologists use screening tools to detect or identify the possible presence of comorbid disorders or circumstances that may impact clinical care, as well as auditory and/or vestibular conditions, that may require referral to other health-care providers.
 6. Audiologists train and supervise, where appropriate, non-audiology personnel to conduct screening procedures in a variety of health-care, educational, rehabilitative, and community settings, within state, federal, or territorial laws and regulations.

7. Audiologists are responsible for developing, implementing, and monitoring the success of follow-up protocols to ensure that individuals identified through screening efforts are referred for further assessment and treatment.

III. STANDARD—EVALUATION/DIAGNOSIS

- A. *Audiologists evaluate individuals with auditory and/or vestibular complaints or symptoms. These may include, but are not limited to, complaints of impaired hearing, tinnitus, dizziness, imbalance, decreased sound tolerance, concerns regarding delayed speech and language, auditory processing problems, poor educational performance, or failed hearing and/or balance screening results.*
- B. *Audiologists conduct evaluations that include, but are not limited to, case history (including review of previous assessments and diagnoses, diagnostic impressions and management planning); physical examination of the ears and cranial nerve function, gait, and posture; qualitative and/or quantitative classification of communication abilities; assessment and impact of tinnitus and/or decreased sound tolerance; behavioral (psychometric or psychophysical), physical, and/or electrophysiological tests of hearing, auditory function, balance and vestibular function, and/or auditory processing that result in the formation of a diagnosis and subsequent management and treatment planning.*
 1. Audiologists conduct evaluations that provide appropriate reliability and validity for subsequent clinical diagnostic purposes, that reflect current standards of care and applicable regulatory requirements, and that fall within the legal scope of practice.
 2. Audiologists conduct evaluations appropriate for an individual’s age, physical and cognitive status, and social-emotional well-being within a culturally sensitive and appropriate context.
 3. Audiologists apply critical thinking and clinical decision-making skills to evaluate patient status and to respond to actual or potential health problems or health promotion needs using a patient-centered approach.
- C. *Audiologists diagnose type, severity, site of lesion, communicative impact, and possible etiologies of auditory disorders.*
 1. Audiologists utilize differential diagnostic skills to diagnose hearing loss, identify auditory disorders, and determine the possible etiology of auditory disorders (e.g., hearing loss related to aging or noise exposure) within the legal scope of practice.

2. Audiologists recognize when their knowledge, training, skill set, or experience may not be sufficient to meet the needs of their patient and refer to other practitioners when appropriate.
- D. *Audiologists evaluate balance and vestibular function to identify disorders that cause dizziness or imbalance, aid in the diagnosis of vestibular disease, and establish falls risk and candidacy for vestibular rehabilitation.*
1. Audiologists utilize differential diagnostic skills to diagnose vestibular loss, identify balance and vestibular disorders, and determine the possible etiology of balance and vestibular disorders (e.g., bilateral severe vestibular loss consistent with aminoglycoside toxicity) within the legal scope of practice.
 2. Audiologists recognize when their knowledge, training, skill set, or experience may not be sufficient to meet the needs of their patient and refer to other practitioners when appropriate.
- E. *Audiologists integrate information, test results, and/or treatment recommendations from other health-care, educational, legal, or vocational providers to develop a comprehensive assessment of auditory and/or vestibular function and related conditions.*
- F. *Audiologists evaluate individuals when health conditions (e.g., diabetes, kidney disease, etc.) raise concerns about associated auditory or vestibular involvement.*
- G. *Audiologists evaluate and monitor auditory, vestibular, or other related disorders to advise patients, families, and other practitioners about intervention strategies or treatment outcomes.*
1. Audiologists design, implement, and interpret protocols for identifying and quantifying potential changes in hearing or balance function that result from adverse exposures, interventions, or treatments.
 2. Audiologists design, implement, perform, and interpret test procedures for the purpose of intraoperative monitoring of central or peripheral nervous system function.
- H. *Audiologists collaborate with other health-care providers to integrate audiologic services within the larger context of the patient's medical, psychosocial, educational, or vocational needs.*
1. Audiologists work as a member of an interprofessional health-care team when an individual's concerns include auditory and/or vestibular issues.

- a. Audiologists ensure that evaluation results, interpretation, and recommended treatment plans are documented and communicated to the appropriate individual, family members, caregivers, and referring party in a timely manner.
 - b. Audiologists work as members of interprofessional diagnostic teams and collaborate with other service providers and caregivers to develop an integrated comprehensive plan of care.
2. Audiologists support coordination of care and encourage patients to establish a medical home/primary care provider.

IV. STANDARD—TREATMENT

- A. *Audiologists design and implement management and/or treatment strategies based on assessment results; need for medical, educational, psychosocial, vocational, or other services; and the needs of patients and their caregivers.*
 1. Audiologists prescribe, fit, verify, and validate assistive technologies that enhance or augment hearing and listening ability, including hearing instruments, implantable devices, and/or other technologies.
 2. Audiologists recommend and provide rehabilitative strategies, therapies, or treatments designed to improve a person’s use of residual auditory and/or vestibular function, mitigation of dizziness, tinnitus or decreased sound tolerance, and development or improvement of hearing and communication abilities.
 3. Audiologists counsel and provide information, educational services, and assistance to improve a person’s use of residual auditory and/or vestibular function and to guide individuals and their families with strategies that address the consequences arising from loss of hearing or balance function.
 4. Audiologists provide services within the context of the individual’s medical, educational, vocational, communicative, and social environments.
 - a. Audiologists work as a member of an interprofessional treatment team and collaborate with the individual, family, and other health-care providers to develop an integrated plan of care.
 - b. Audiologists collaborate with teachers, educators, speech language pathologists, health-care providers, and other (re)habilitative specialists to support the communication, educational, vocational, and psychosocial development of patients with auditory and/or vestibular loss.

5. Audiologists refer patients to outside agencies or providers, including, but not limited to, early intervention programs, state agencies, and other health-care practitioners, to support positive outcomes for the patient.
 6. Audiologists recognize when their knowledge, training, skill set, or experience may not be sufficient to meet the needs of their patient and refer to other practitioners when appropriate.
- B. *Audiologists design, develop, and implement treatment services for auditory-based communication difficulties and provide strategies for individuals and families within their social, educational, vocational, or cultural environments.*
1. Audiologists work with patients to develop, implement, and monitor appropriate treatment goals for hearing and other related disorders.
 2. Audiologists, as part of a comprehensive audiologic rehabilitation strategy, provide counseling and education on the prescribed treatment plan with the individual, family, and other support persons to aid in achieving treatment goals.
 3. Audiologists counsel individuals, their families, and other caregivers about assessment results, health, emotional, behavioral, social, educational, vocational, and communicative implications of any identified conditions using language and written materials appropriate to the cultural and health-care literacy attributes of the patient.
 4. Audiologists provide support to individuals, their families, and/or their caregivers to address the potential psychosocial impact of auditory deficits.
- C. *Audiologists monitor progress relative to the treatment plan to ensure optimal outcomes and re-evaluate the plan and goals as needed.*

V. STANDARD—TELEHEALTH

- A. *Audiologists may establish and implement telehealth as an alternative method of service delivery that encompasses identification, diagnostic, and treatment services.*
1. Telehealth services are provided using either synchronous or asynchronous protocols.
 2. Audiologists provide telehealth services, using an evidence-based standard of care, that result in outcomes comparable to in-person care.

3. Audiologists provide telehealth services consistent with licensing, credentialing, and privileging requirements for the profession in both the state and/or territory in which they are practicing, as well as the state or territory in which the patient is receiving care.
4. Audiologists provide telehealth services consistent with federal, state, and territorial laws and regulations.

VI. STANDARD—HEARING LOSS PREVENTION

- A. *Audiologists design and implement programs to prevent the onset or progression of hearing loss.*
- B. *Audiologists identify individuals exposed to potentially adverse conditions that might result in hearing loss and monitor and assist individuals to lower the risk of developing hearing loss.*
 1. Audiologists develop, administer, supervise, and monitor programs to prevent hearing loss in the workplace, entertainment venues, and other areas where individuals might be exposed to adverse conditions.
 - a. Audiologists fit and verify hearing protection devices for individuals exposed to potentially damaging levels of noise, monitor use of devices, and conduct evaluations of the adequacy of hearing protection use.
 - b. Audiologists ascertain the effects of noise on auditory function and communication for medical and legal purposes.
 - c. Audiologists ascertain the nonauditory effects of noise exposure, including, but not limited to, the psychosocial impacts of community noise, nuisance, communication interference, and sleep interference.
 - d. Audiologists develop and implement strategies to mitigate potential adverse noise exposure.
 - e. Audiologists provide education to individuals in both occupational and nonoccupational settings, including schools, to promote an understanding of the impact of noise exposure on the auditory system, as well as prevention and mitigation methods.
 - f. Audiologists recommend environmental modifications to minimize adverse noise exposure risk.

2. Audiologists develop, administer, supervise, and monitor programs to prevent the loss of auditory and/or vestibular function from drugs, medications, or other ototoxic chemicals.
3. Audiologists work as a member of comprehensive multidisciplinary teams and collaborate with other service providers and caregivers to develop an integrated plan of care to prevent hearing loss.
4. Audiologists provide consultative services to mitigate or minimize the impact of auditory and/or vestibular loss on other related health conditions.

VII. STANDARD—RESEARCH

- A. *Audiologists provide services in auditory, vestibular, and other related disorders that have a basis in scientific evidence whenever possible.*
 1. Audiologists seek, participate in, critically evaluate, and apply research findings to promote evidence-based practice.
 2. Audiologists monitor clinical outcomes as part of continuous quality improvement.
 3. Audiologists apply research findings and quality improvement measures to develop or revise local clinical policies, procedures, and clinical pathways to improve patient care.
- B. *Audiologists may initiate or participate in basic, clinical, or translational research activities.*
 1. Audiologists who engage in research develop, oversee, or implement research activities, including the development of research questions, generation of a research method or design, collection of data and subsequent analysis, monitoring of budgetary and legal compliance, and the dissemination of results as appropriate for their background, training, knowledge, and skill.
 2. Audiologists apply contemporary quality control procedures to ensure accuracy of research results.
 3. Audiologists who engage in research activities follow appropriate national, state, local, professional, and institutional ethical guidelines and regulations for these activities.