



# DIVISION SCOPE OF SERVICE

<b>Division: MIDAMERICA</b>
<b>Classification: AUDIOLOGIST</b>
<b>Applicant Name:</b>

<p><b>Audiologist:</b> The Audiologist must have equivalent qualifications, competence and function in the same role as employed individuals performing the same or similar services at the facility, as defined by facility job description.</p>
<p><b>Definition of Care or Service:</b> The Audiologist diagnoses, treats and manages patients who have hearing, balance and related ear problems. Scope of Service may include:</p> <ul style="list-style-type: none"> <li>• Performs otoscopic examinations</li> <li>• Recommends treatment options for dysfunctions in hearing</li> <li>• Evaluates and fits patients for amplification and assistive listening devices</li> <li>• Provides audiologic treatment services</li> <li>• Acts as a member of an hearing device implant team</li> <li>• Provides pre and post hearing device implant assessment, counseling and treatment</li> <li>• Documents telephone physician orders specific to scope of care per hospital policy</li> <li>• Refers patients to physicians when hearing problems need medical and / or surgical attention</li> <li>• Counsels and trains patients to cope with hearing and vestibular related problems</li> <li>• Maintains and secures patient data and records</li> <li>• Documents treatments and patient interactions in the medical record</li> <li>• Demonstrates Clinical and Service excellence behaviors to include code of HCA conduct core fundamentals in daily interactions with patients, families, co-workers and physicians</li> <li>• Maintains confidentiality and privacy in accordance with HIPAA regulations</li> <li>• Demonstrates Clinical and Service excellence behaviors to include code of HCA Healthcare conduct core fundamentals in daily interactions with patients, families, co-workers and physicians</li> </ul>
<p><b>Setting(s):</b></p> <ul style="list-style-type: none"> <li>• Healthcare facilities including but not limited to hospitals, outpatient treatment facilities, imaging centers, and physician practices</li> </ul>
<p><b>Supervision:</b></p> <ul style="list-style-type: none"> <li>• Direct supervision by Speech Therapy department director, site manager or designee <ul style="list-style-type: none"> <li>○ Indirect supervision by physician or other licensed independent practitioner that requests the Audiologist to participate in patient care</li> </ul> </li> </ul> <p><b>Evaluator:</b> Speech Therapy department director or designee in conjunction with supervising physician or licensed independent practitioner</p> <p><b>Tier Level:</b> 2</p> <p><b>eSAF Access Required:</b> YES</p>
<p><b>Qualifications:</b></p> <ul style="list-style-type: none"> <li>• Doctoral Degree in Audiology (AuD) <ul style="list-style-type: none"> <li>○ If trained prior to 2007, may have a Master’s Degree in Audiology</li> </ul> </li> <li>• Current licensure as an Audiologist (Check State requirements)</li> </ul>



## DIVISION SCOPE OF SERVICE

**Preferred Qualifications:**

- Certificate of clinical competence in Audiology by the American Board of Audiology (ABA)

**NOTE:** Where education may not be defined in qualifications area of the Scope, HCA Healthcare requires the highest level of education completed (not training or courses) confirmed on your background check.

**State Requirements:**

- Current licensure as an Audiologist in practicing state.

**Experience:**

- One year experience as an Audiologist

**Competencies:**

The Audiologist will demonstrate:

- Safe and effective operation of audiology equipment
  - Demonstrates proficiency in using audiometric and other audiology measurement devices
  - Obtains quality diagnostic outputs
  - Maintains equipment in good working order
  - Demonstrates effective infection control practices related to equipment operation
- Accurate patient information review and evaluation
  - Uses at least two ways to identify patients before treating or performing a procedure
  - Verifies that the requested procedure correlates with the patient’s clinical history, presentation and physician order
  - Participates in the pre-procedure process to verify the correct procedure, for the correct patient, at the correct site and involves the patient in the verification process when possible
  - Participates in a time-out immediately before the start of an invasive procedure or making of the incision.
  - Accesses the patient medical record appropriately
  - Documents in the medical record according to the facility standard / policy
- Appropriate diagnostic examination results
  - Performs otoscopic examinations to comply with applicable protocols and guidelines
  - Utilizes non-invasive study technique as indicated by the examination, according to established facility policy and procedures under state law
  - Notifies the appropriate health provider when immediate treatment is necessary, based on procedural findings and patient conditions
    - Recognizes the need for an urgent report and takes appropriate action
  - Provides a written or oral summary of preliminary findings to the physician
- Patient education and counseling
  - Counsels patients regarding the selection of amplification and assistive listening devices
  - Trains patient and family for home use of the amplification and assistive listening devices
- Infection Prevention
  - Practices consistent hand hygiene
  - Uses personal protective equipment (PPE)
  - Required immunizations per Division requirements
  - Complies with Isolation precautions

**References:**

Clinical Privilege White Paper, Audiologist, Practice area 179 Retrieved from:

<http://www.online-crc.com/content/217294.pdf?CFID=7713366&CFTOKEN=36540916>

ABA: <https://memberportal.audiology.org/Directories/ABA-Directory-Search>



## DIVISION SCOPE OF SERVICE

ASHA: <https://www.asha.org/advocacy/state/info/MS/licensure/>  
<https://www.asha.org/advocacy/state/info/MO/licensure/>  
<https://www.asha.org/advocacy/state/info/LA/licensure/>  
<https://www.asha.org/advocacy/state/info/KS/licensure/>

Missouri License <https://pr.mo.gov/licensee-search-division.asp>

Louisiana License <https://www.lbespa.org/index.cfm/licensee-search>

Kansas License <https://www.ksha.org/licensing.php>

Mississippi License <https://apps.msdh.ms.gov/licreviews/index.aspx>

**Document Control:**

- Cosmetic Change 9/11/2019
- Content Update 11/5/2019

**Your signature confirms you will be able to comply with the Qualifications and Competencies listed within this Scope of Service and that you will confirm education via your background check.**

**Applicant Printed Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_