

# Syllabus

## CSD 891 First-Year Clerkship in Audiology Spring 2023

### Instructors:

Name	Office #	Office Phone	Home/Cell Phone
Becky Henning, Ph.D.	050	715-346-2351	715-342-8837
Tonya Veith, Au.D.	048	715-346-2851	928-551-0050
Rachel Craig, Au.D.	046B	715-346-4018	715-803-5281
Sarah Andersen, AuD.	046D	715-346-3216	

**Office hours:** Vary with each supervisor. Please check with them.

Office hours indicate days and times when we will be in the building, but not necessarily sitting around waiting for you to drop in. To be sure that you see us when you want to, please make an appointment.

**Dates: January 23, 2023 – May 5, 2023. Please note that some patient care duties (such as HA repair duty) extend through May 12. Regular clinic appointments will end on May 4. You are also responsible for being available for final semester meetings and paperwork until the last day of final exams, or May 12, 2023.**

### Course Description:

#### **Clinical Clerkship Expectations & Learning Outcomes:**

The broad objectives this semester are for you to solidify your skills and improve your pace in comprehensive hearing evaluations, and to build your foundation skills in hearing aid checks, fittings, and consults. Toward these goals, the specific skills, and outcomes to focus on this semester include:

1. Being fully prepared before seeing each patient, and following through with all necessary paperwork, phone calls, etc., after clinic. This semester, first-year students are expected to take primary responsibility for clinic. Second-year students are a resource for questions and assistance, but first years have the primary responsibility for preparing for and carrying out the procedures. Even for hearing aid appointments early in the semester, first-year students should be as prepared as possible and obtain as much hands-on experience as possible (including equipment setup), although it is understood that leadership and assistance from second years will be needed.
2. Performing a basic audiometric evaluation (case history, admittance, pure-tone air & bone, with masking, speech, QuickSIN, explanation of results) following the guidelines in the practicum manual with little to no assistance.
3. Regularly reviewing class notes so that you are prepared for both routine and challenging situations that have been covered in classes and in labs.
4. Using each piece of equipment (audiometers, admittance instruments, DPOAE, hearing aid equipment) independently. This means knowing where all the buttons are and understanding how the equipment works without having to refer to notes.

5. Completing a hearing aid fitting appointment, including obtaining real ear/probe microphone measures and counseling the patient. **\* You should be prepared to independently obtain real-ear measures by April 7.**
6. Performing coupler evaluations (including ANSI) of hearing aids with any of the three different systems we have. **You should be prepared to complete routine ANSI tests by January 25, and more advanced tests (such as battery drain, telecoil, etc.) by February 25.**
7. Entering patient data and programming all brands of hearing aids. (For manufacturers whom we use less often, it is acceptable if you need to call the manufacturer for advice, but you should prepare for this and call for advice before the patient is here, such as a day or two in advance).
8. Troubleshooting hearing aid repairs and problems and performing simple repairs (e.g., cleaning, change wax basket, replace battery doors, replace tubing, shell modifications, and repairs). This includes repairs that occur during your regular clinic slot as well as on HA duty. **You should be prepared to do basic troubleshooting and repairs by January 25, and earmold/earshell modifications by March 10.**
9. Conducting a hearing aid consult. \*
10. Obtaining earmold impressions. **\* You should be prepared to attempt this on a patient once Dr. Henning has indicated that you have successfully completed at least 4 acceptable practice impressions, no later than February 24 and possibly sooner.**
11. Writing reports and summaries for all appointments. Summary notes are to be written after any action related to patient care (including evaluations, hearing aid fittings, follow-ups, hearing aid repairs, phone calls, etc.). You are responsible for writing summary notes for all appointments, even if your second-year student “leads” the appointment. The act of writing requires you to understand and organize concepts, so writing summary notes will help you understand what you (or your second-year student) did in clinic. If you are required to write summary notes for material not yet covered in class, then your second-year student is responsible for explaining his/her actions to you and referring you to specific texts, to facilitate your understanding.
12. Setting up for, administering, and scoring CAPD tests, with assistance from your second-year student.

**\*Even if you do not have the opportunity to complete a certain type of appointment independently (such as a hearing aid consult), you will be expected to do so in the summer session. Therefore, you should be assimilating the information from Amplification I to prepare for all types of hearing aid appointments, regardless of the types of appointments that actually end up on your schedule.**

#### **Supervision and Introductions to Patients:**

Both students must introduce themselves to patients as first- and second-year students. You must also inform patients that a faculty supervisor is monitoring every appointment via video observation, and that the faculty member will introduce him/herself in person early in the appointment.

Your supervisor will be closely watching each appointment via some combination of video and in-room observation, and you may ask your supervisor for consultation at any time during the appointment. Your supervisor will also enter the room any time he/she needs to consult with you.

**Do not bring a patient back or allow a patient to leave without checking in person with your supervisor!**

### **Code of Ethics:**

All students are expected to follow the ASHA and AAA Codes of Ethics, and the links to these are posted on CANVAS.

### **Submitting Reports Electronically:**

The first draft of summaries and reports should be submitted electronically by the first-year student within 24 hours of the appointment. **Temporary summaries must also be printed and placed in the file no later than 8 am the day after the appointment.**

Summary notes are to be written after ANY action related to patient care (including evaluations, hearing aid fittings, follow-ups, hearing aid repairs, phone calls, etc.).

Any test results (e.g., audiogram, admittance forms, CAPD results, questionnaire results, etc.) must be placed in the accordion file in the locked cabinet in HA lab #2; entire patient files are NOT to be stored in that cabinet unless you have obtained prior approval from a supervisor.

First-year students should name the initial report/summary with the patient's last name and date of the appointment, for example, "smith20140906." Second-year students are expected to review and edit reports, summaries, and test results within the next 24 hours, and to email the supervisor and first-year student once the materials are edited. Your supervisor will then add any additional edits to the report/summary electronically, save it with their initials (for example, "smith20140906ed1BH"), and email both students. The first-year student is then responsible for making revisions and should continue to copy the second-year student on the email correspondence.

The supervisor will email both students once a report/summary is ready for printing. All reports/summaries should be printed and ready for mailing within one week, unless your supervisor has specifically approved an exception. For a supervisor to sign a report, you must bring the printed report AND the patient file to the supervisor so that the address and demographic information can be double-checked before signing. Once the report and all test results have been placed in the file, you must bring the file to the supervisor again for your hours to be signed off. All hours should be signed off within two weeks of the appointment unless your supervisor has specifically approved an exception.

When writing summaries and reports, edit very carefully for accuracy and do NOT copy and paste information (even non-identifying information) from other patients' summaries or reports. This can lead to breaches of confidentiality if identifying information is not fully edited, or to inaccurate medical information if results and impressions are not fully edited. If any reports or summaries submitted to your supervisor (on the first version or any revised version submitted) **contain any information copied and pasted from previous reports, your final clinic grade will automatically be reduced by one step of a letter grade** (e.g., if your grade would have otherwise been an A-, it will be automatically reduced to a B+). Instead of copying and pasting, you are strongly encouraged to use general templates that do not contain any identifying information or specific results.

## **General Course Information & Expectations**

### ASHA Standards Covered in This Course:

**\*\*Refer to specific skills and expected levels of performance cited in the evaluation form in Calipso.\*\***

1. To develop clinical skill in effective interaction and communication with clients/patients, families, professionals, and other individuals through written, spoken, and nonverbal communication. (ASHA Stan. II-A12)
2. To develop clinical skill in the evaluation of clients with auditory, vestibular, and/or related disorders. (ASHA Stan. II-C)
3. To develop clinical skill in providing audiologic rehabilitation across the lifespan. (ASHA Stan. II-E, II-F)
4. To develop clinical skill in counseling patients. (ASHA Stan. II-D)
5. To adhere to the ASHA Code of Ethics and behave professionally. (ASHA Stan. II-A22)

### **Additional Documents:**

In addition to this syllabus, the following required documents are available on CANVAS and CALIPSO:

1. UWSP Clinic Handbook and AuD Practicum Manual. These documents provide basic information regarding expectations in the clinic. You are responsible for knowing and following the information provided in these documents.
2. Evaluation of Clinical Practicum in Audiology Form (i.e., the grading form). This is the document that will be used (in electronic form within Calipso) in determining your practicum grade for the semester.
3. Expectations for hearing aid duty
4. Dress Code
5. AAA and ASHA Codes of Ethics
6. Clock hour instructions and clock hour report form. You may use this document as a paper record of your clinical experience, to help you track the hours you should enter into Calipso.

### **Clerkship Attendance:**

You should approach your clinic assignment as your first professional job. It is your responsibility to attend and be prepared for your assigned clinic slots. If you miss clinic, it can create difficulty for the patients, front desk personnel, and the supervisors and other students who have to cover for you.

### Illness

You should not attend clinic if you have a cold, fever, bad cough, influenza, or a more serious illness. See also the Covid-19 information below.

If you must miss clinic due to illness, try to arrange coverage (i.e., switch slots with another student) in advance if at all possible, and notify your supervisor and the clinic front desk (715-346-3667) of the situation ASAP. If you are unable to arrange coverage, notify your supervisor and the front desk ASAP.

### Reasons other than Illness

If you must miss clinic for a reason other than your own illness, you must arrange coverage ahead of time if at all possible (i.e., switch slots with another student) and discuss this with your supervisor.

Please keep in mind that you are expected to attend your assigned clinic slot, and you should only arrange coverage if you are absolutely unable to attend. *If you \*repeatedly\* switch clinic slots for reasons other than documented personal illness, your clinic grade may be reduced and/or you may fail clinic.*

### **Clinic COVID Guidelines Spring 2023:**

- Wearing a well-fitting face covering is mandatory in the UWSP Speech, Language and Hearing Clinic at all times except when you are eating or drinking.
- The UWSP clinic will supply the student with appropriate personal protective equipment (PPE) and follow infection control measures recommended by the CDC/Professional organizations.
- Students are also expected to follow the social distancing, travel and group gatherings guidelines required by UWSP and the CDC in their personal lives, to protect their more vulnerable patients.
- Maintain social distancing of six feet whenever possible during appointments.
- Students must NOT attend clinic if they are not feeling well, and they must follow any testing, isolation or quarantine protocol required by the clinic and university. Please contact your supervisor if extended absences will be necessary so clinic coverage can be arranged.

**If you get COVID-19**, the Centers for Disease Prevention and Control (CDC) recommends:

- Isolate at home, separate from others, regardless of vaccination status. Also isolate while awaiting test results.
- Isolate for at least 5 days, or until symptoms improve.
- Wear a high-quality, well-fitting mask for 10 days.
- [Notify](#) your instructors or supervisor and your close contacts.

**If you are identified as a close contact** or been exposed to COVID-19:

- Wear a quality, well-fitting face covering for 10 days after exposure. The CDC no longer requires quarantine. Monitor your symptoms.
- Get tested 5 days after exposure. Test again in 48 hours, or if you develop symptoms in the next 10 days.

**For more information**, visit the UWSP COVID [website](#).

### **General**

If you miss *more than one clinic day for any reason* and are unable to arrange coverage, you will be required to make up the time by covering at least one clinic day (possibly more days, depending on the amount of time missed) during the following interim (winter, early summer, late summer, or possibly spring break). You will receive a grade of incomplete until you make up the time.

**Unexcused absences from clinic will result in a grade of “0” for your clinic session.**

**Clinic Meetings:**

There may be occasional meetings of all graduate audiology students enrolled in practicum on Tuesdays or Thursdays at 8:00 am. The purpose of these meetings is to convey information to the group as a whole. Attendance is required. Do not schedule work or other activities that conflict with this meeting. You will be notified no later than Monday at noon if a meeting is scheduled that week.

**Inclusivity Statement**

*(Based on language from Lynn Hernandez, Brown University)*

It is our intent that students from all diverse backgrounds and perspectives be well-served by this course, that students' learning needs be addressed both in and out of clinic, and that the diversity that the students bring to this course be viewed as a resource, strength, and benefit. It is our intent to present materials and activities that are respectful of diversity: gender identity, sexuality, disability, age, socioeconomic status, ethnicity, race, nationality, religion, and culture. Your suggestions are encouraged and appreciated. Please let us know ways to improve the effectiveness of the course for you personally, or for other students or student groups.

If you have experienced a bias incident (an act of conduct, speech, or expression to which a bias motive is evident as a contributing factor regardless of whether the act is criminal) at UWSP, you have the right to report it using this [link](#). You may also contact the Dean of Students office directly at [dos@uwsp.edu](mailto:dos@uwsp.edu).

**Academic Integrity:**

All students must follow the expectations for academic integrity for the University of Wisconsin System.

(from [http://docs.legis.wisconsin.gov/code/admin\\_code/uws/14.pdf](http://docs.legis.wisconsin.gov/code/admin_code/uws/14.pdf))

Academic honesty requires that the course work (drafts, reports, examinations, papers) a student presents to an instructor honestly and accurately reflects the student's own academic efforts. UWS 14.03 defines academic misconduct as follows:

"Academic misconduct is an act in which a student: (I) Academic misconduct is an act in which a student:

- (a) seeks to claim credit for the work or efforts of another without authorization or citation;
- (b) uses unauthorized materials or fabricated data in any academic exercise;
- (c) forges or falsifies academic documents or records;
- (d) intentionally impedes or damages the academic work of others;
- (e) engages in conduct aimed at making false representation of a student's academic performance
- (f) assists other students in any of these acts."

Examples include but are not limited to: cutting and pasting text from the web without quotation marks or proper citation; paraphrasing from the web without crediting the source; using another person's ideas, words, or research and presenting it as one's own by not properly crediting the originator; using materials for assistance on examinations that are not allowed by the instructor; stealing examinations or course materials; signing another person's name to an attendance sheet; hiding a book knowing that another student needs it to prepare an assignment; collaboration that is contrary to the stated rules of the course, or tampering with a lab experiment or computer program of another student.

If academic misconduct has occurred, the student may be subject to one or more of the following penalties: an oral or written reprimand, a lower grade or a failing grade in the course, university disciplinary probation, suspension, or expulsion.

**Students with Disabilities:**

If you are a student with a documented disability and wish to discuss accommodation, you must contact the instructors within the first two weeks of the semester to discuss your needs.

**Religious Conflicts:**

In accordance with University of Wisconsin policy, any potential conflict between class requirements and religious observance must be made known to an instructor within the first week of class. The student must notify the instructor of the specific day(s) or date(s) of specific religious observances for which the student seeks relief from academic requirements.

**Emergency planning and management statement:**

If an emergency situation occurs or an illness is spread throughout the campus to the extent that it interferes with basic functions, the university, state, and local officials may implement “social distance teaching.” This means that face-to-face instruction will be restricted. Instruction of essential courses will continue, but it will be provided via distance methods. In the event that this course is no longer able to meet face-to-face, students will be contacted with instructions via email. You should also monitor the UWSP homepage for emergency information.

If the emergent situation is a pandemic illness such as the flu (or COVID), and classes are in session as usual, but you become sick and cannot attend class, you must contact your instructors.

**Grading**

Feedback:

Please see your supervisor(s) and arrange for a required weekly meeting time of 15-30 minutes. You should come to this meeting prepared to receive and discuss feedback from your supervisor, discuss clinical cases, and ask and answer questions.

Evaluation of Clinical Performance:

Your clinical performance will be evaluated using The Evaluation of Clinical Practicum in Audiology in CALIPSO. There will be two evaluations of performance during the semester. The first (midterm) evaluation will occur during the 7<sup>th</sup> or 8<sup>th</sup> week of clinic, or the weeks of March 6-March 13. The second and final evaluation will occur at the end of the semester.

Written and Practical Examinations:

There will be a written exam and a practical exam at the end of the semester. The written exam will be 90 minutes in length and will include but not be limited to the following topics: acoustic reflex pathways, tympanometry, comprehensive audiologic assessments, and case studies.

The practical exam will be a timed 60-minute comprehensive audiologic assessment of a fellow classmate with a simulated unilateral conductive hearing loss. You will be responsible for performing

the relevant diagnostic tasks and answering questions from the supervisor in relation to the audiometric assessment.

**The written portion of the exam will take place in early April. The date is still being determined.**  
**The practical portion will occur during finals week.**

Students are required to pass both the written and the practical exam with an 82% or higher in order to be eligible for an off-campus clinical placement. (Although regular off-campus placements do not typically occur until the summer after second year, it is possible that (a) limited off-campus placement(s) could become available during the second year. If that opportunity arises, only students who have passed the written and practical exams would be eligible for that placement). If a student does not pass a component (written and/or practical) of this exam, he/she/they will be required to retake that portion later in the summer session. An improvement plan will be executed, discussed, and approved to assist the student in obtaining the required level of performance.

The student is permitted a total of two retakes (including the practical and written exam). For example, the written exam could be retaken twice, the practical exam could be retaken twice, OR the written exam and practical exam could each be retaken one time. The student must complete the retake(s) toward the end of the summer session. If the student does not pass the retake(s) by the end of the summer session, the following actions will be taken:

- a. The student will be required to sit in on the hearing assessment course and lab (CD 852 and 853) in the fall semester.
- b. The student will be required to register for CD 891 instead of CD 892 for the fall semester and will not be assigned as a clinic mentor.

The student will be required to retake the exam(s) at the end of the fall semester of the second year. If the exam is not passed at this time, the student will be dismissed from the program. The student will have the option to go through the normal channels of appeal.

**Clerkship Grades:**

Earned letter grades indicate the following levels of performance in this course:

<b>Letter</b>	<b>Numerical</b>	<b>Description</b>
A	95.51-100	The clinician is consistently exhibiting extra effort and outstanding clinical skills for his/her level of training.
A-	91.00–95.50	The clinician is exhibiting clinical skills and effort that meet expectations for his/her level of training in some areas and exceed expectations in other areas.
B+	88.00-90.99	The clinician is exhibiting clinical skills and effort that, overall, meet expectations for his/her level of training.
B	84.00-87.99	The clinician is exhibiting clinical skills and effort that meet expectations for his/her level of training in many areas but has a/some limited area(s) of below-standard performance that require improvement. An Improvement Plan may be considered.



B- and below	< 83.99	These are failing grades representing clinical skills and/or effort that are below expectations for the clinician's level of training. An Improvement Plan will be implemented.
--------------	---------	---

### End of Semester:

Prior to receiving your final grade, all files must be completed and signed by your supervisor. If this is not accomplished by the time grades are due, you will receive an Incomplete and a grade reduction of half a letter.

### Counting Clinical Clock Hours:

**Be sure to count all of your clinical clock hours (see guidance below on what can count);** give yourself credit for all of the work you're doing and experience you're gaining! **Even if you are likely to exceed the ASHA-required 1820 hours for the CCC-A, you must document all of your hours in case you need hours or experience beyond the CCC-A requirements** for state licensure, ABA Board Certification, or for any other credential or employment.

ASHA states, on their website that lists the CCC-A requirements (<https://www.asha.org/certification/2020-audiology-certification-standards/>), that the following activities all can be counted as clinical hours: "...clinical and administrative activities directly related to client/patient care, including direct client/patient contact, consultation, recordkeeping, and administrative duties relevant to audiology service delivery;"

**Therefore, be sure to count time spent:** writing reports, consulting on a case with your supervisor or other professional, preparing and planning for the care of (a) specific patient(s) (e.g., reviewing the patient's history, pre-setting a patient's hearing aids, setting up materials or a test ahead of time for a specific patient, reviewing and evaluating evidence that is directly related to deciding on a particular patient's treatment plan, etc.), and following up or coordinating a patient's care (e.g., making a phone call to the patient or to another professional about the patient's care, etc.). For administrative and consultative activities, you may only count, and your supervisor will only sign off on, a reasonable amount of time for each particular activity. A "reasonable amount of time" depends on the particular case, and is at the discretion of the supervisor, and clinic director if necessary. As a general guideline, it will be based on the typical amount of time a clinical audiologist may spend on that activity.

Time that is spent on general learning or review of topics related to clinic, general review of evidence/research, general review/preparation of clinical skills, inventory, or preparation or practice for exams does not count toward your clinical hours. Activities need to be directly related to the care of (a) patient(s) in order to count. In addition, time that is spent with your supervisor discussing the development of your clinical skills (e.g., strengths and areas for improvement) does not count toward your clinical hours.

Hours that are strictly observation cannot be counted as clinical clock hours. When more than one student is involved in patient care, each student can count the time he/she was involved in direct patient care and consultation, record keeping, and administrative duties, but a student cannot count hours during which he/she only observed.