AU.D. ACADEMIC HANDBOOK

DOCTOR OF AUDIOLOGY PROGRAM

University of Arkansas for Medical Sciences
University of Arkansas at Little Rock

AUGUST 2013
2013-2014 ACADEMIC YEAR
DEAR AU.D. STUDENTS,

Welcome to the consortium Au.D. degree program of the University of Arkansas for Medical Sciences and the University of Arkansas at Little Rock. The mission of our program is to provide you with an education that will allow you to practice as a clinical audiologist who evaluates and treats individuals across the lifespan with hearing and/or balance disorders. You will find the next four years to be, at various times, exciting, challenging, tiring, and everything in between. Once you have completed your Au.D., however, and are a practicing audiologist, we have no doubt the main feeling you will have is “rewarded”. You will likely find several aspects of this endeavor rewarding, your hard work and accomplishment of successfully completing the degree program, but more by the experiences you have in clinic of serving your clients to the best of your ability.

On behalf of the faculty and all of Audiology, welcome to our (and now your) Au.D. program.

Sincerely,

Nannette Nicholson

Nannette Nicholson, Ph.D., CCC-A
Associate Professor and Director of Audiology
INTRODUCTION

The purpose of the Au.D. Academic Handbook is to familiarize you with various department and audiology division guidelines that will be important for you during your Au.D. program. If you have any questions about these or any other procedures, please do not hesitate to contact your academic advisor. If you do not know who your advisor is, please see the Director of Audiology.

These guidelines are not all inclusive. You also must be aware of the policies and procedures contained in the Au.D. Clinic Handbook and in the Procedure and Policy Guide for the Speech-Language and Hearing Clinic and the Department of Audiology and Speech-Language Pathology; as well as other department, college (College of Health Professions), school (Graduate School), and university (UALR and UAMS) publications.
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UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES
College of Health Professions

UNIVERSITY OF ARKANSAS AT LITTLE ROCK
College of Professional Studies

Department of Audiology and Speech Pathology

Doctor of Audiology Program

DEPARTMENTAL MISSION STATEMENT

The mission of the Audiology and Speech Pathology (AUSP) department is to educate professionals who serve persons with communication, swallowing, and balance disorders at the local, state, national, and international levels. The department is dedicated to excellence in (a) teaching and lifelong learning in a student-centered environment (b) service in a patient-centered environment based on academic excellence, leadership, and the ethic of community responsibility and (c) research that supports communication science and the practice of audiology and speech-language pathology (AUSP Strategic Plan, 2012).

AU.D. PROGRAM MISSION STATEMENT

The mission of the Doctor of Audiology (Au.D.) program is to:

- Recruit and retain excellent students who are committed to the profession of audiology and the delivery of high quality clinical services.
- Provide students with a solid foundation in the science of audition and the skills to conduct and promote evidence-based clinical practice.
- Develop audiologists who have the diagnostic and rehabilitative clinical skills necessary to fulfill the current scope of practice in a culturally sensitive manner across the lifespan in a wide variety of clinical settings:

GOALS OF THE AU.D. PROGRAM

The goals of the Audiology Program include producing audiology graduates who will demonstrate the knowledge and skills necessary to:

- Competently evaluate children and adults for hearing and/or balance disorders
- Provide appropriate intervention for children and adults with hearing and/or balance disorders
- Understand and evaluate research in the field of audiology and/or related areas, and
- Understand and apply the principles of ethical and professional conduct.
EDUCATIONAL OBJECTIVES OF THE AU.D. PROGRAM

The student will demonstrate the knowledge and skills to:

2. Develop and implement treatment plans using appropriate data.
3. Understand and apply the principles and practices of research, including experimental design, statistical methods, and application to clinical populations.
4. Exhibit professionalism by integrating the principles and practices of professional conduct, ethical behavior, and applying these values to clinical work.

THE PROFESSION

Audiologists are health care professionals who are experts in the non-medical management of the auditory and balance systems. Audiologists evaluate hearing and hearing loss; recommend, fit, and verify personal amplification systems; and assist in school-based amplification decisions as well as many other activities. Graduates of this program are prepared for positions in a variety of professional settings including hospitals and private clinics; private practice; community speech, language, and hearing centers; college and university programs; rehabilitation centers; residential institutions; school systems; and industrial settings (see Appendix A).

THE AU.D. PROGRAM

The Department of Audiology and Speech Pathology offers a Doctor of Audiology (Au.D.) degree program through the College of Health Professions at the University of Arkansas for Medical Sciences in a consortium with the College of Professional Studies at the University of Arkansas at Little Rock. This unique educational consortium combines the academic and clinical resources of a major medical sciences campus with those of a large, comprehensive, metropolitan university. The curriculum is designed to emphasize the science of hearing, speech, and language; the acquisition of knowledge about human communication disorders; and the study and practice of methods for evaluation and treatment. Practicum experiences are provided in a number of different settings primarily in the central Arkansas area. Two program tracks are offered to students, a post-bachelor's degree track and a post-master's degree track.

ACCREDITATION

The doctoral (Au.D.) education program in audiology at the University of Arkansas for Medical Sciences/University of Arkansas at Little Rock is accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association, 2200 Research Boulevard #310, Rockville, Maryland 20850. Telephone: (800) 498-2071 or (301) 296-5700.
Licensure and Certification

Graduates of the Au.D. program will be eligible to apply to the Arkansas Board of Examiners in Speech Pathology and Audiology for a license to practice audiology in the state. Graduates will also be eligible to apply for optional certification through the American Speech-Language-Hearing Association (ASHA) and/or the American Board of Audiology (ABA). Successful completion of the program does not itself ensure licensure and/or certification. It is the student's responsibility to be familiar with licensure and certification requirements.

Graduate Assistantships

In addition to the financial aid opportunities described in the UAMS Student Financial Services section of the College of Health Professions Catalog, the department has a limited number of program-specific graduate assistantship opportunities; these awards typically do not include tuition remission. Contact the department at (501) 569-3155 for further information regarding graduate assistantships which may be available to qualified, full-time, audiology graduate students. For other forms of financial aid, students should contact the UAMS Student Financial Services Office (501) 686-5451.

Pre-professional Requirements

Au.D. students in the post-bachelor's degree track must have earned at least a bachelor's degree from a regionally-accredited college or university. Undergraduate course work in mathematics (college algebra or higher) and in biological, physical, and behavioral sciences is required. A course in statistics is also strongly encouraged but is not required. Although there are no prerequisite courses in audiology or speech pathology for admission to the Au.D. Program, the program does require that all students have one course in phonetics and one in language acquisition. If these are not completed prior to admission they must be completed during the first year course of study for the Au.D. and those semester credits will not count toward the 118 required for the Au.D. degree. Phonetics and language acquisition are prerequisites to Pediatric Audiology.

Application Procedures and Deadlines

Application for the Au.D. program is made through the College of Health Professions Welcome Center, University of Arkansas for Medical Sciences, 4301 West Markham Street, #619, Little Rock, Arkansas 72205-7199. Application procedures for the post-baccalaureate track and the post-master’s track require applicants to mail documentation to two different addresses. The Application for Admission, non-refundable application fee, official transcripts, and official GRE scores should be mailed to the CHP Welcome Center, 4301 West Markham Street, #619, Little Rock, Arkansas 72205-7199. The letter of application and three letters of recommendation should be sent to AUSP-UALR, 2801 South University Avenue, Little Rock, Arkansas 72204.
**Post Baccalaureate:** Completed application materials must be received by February 1 of each year for consideration for admission the following fall semester. Earlier submission of applications is strongly recommended. Students are admitted for the fall semester only. Application procedures are delineated below:

1. The CHP Application for Admission is required. A copy of the application can be found at [http://www.uams.edu/chrp/apply/](http://www.uams.edu/chrp/apply/).
   a. A non-refundable application fee of $40.00 is required and must accompany the CHP application.
   b. Contact the department office or the CHP Office of Student Affairs for more information.
2. Transcripts provided to CHP must be official; i.e., sent directly to CHP from the issuing institution(s). A transcript "issued to the student" or received from the student or anyone else is not acceptable.
   a. Arrange for each college or university attended to forward an official transcript to the CHP Admissions Office.
   b. Applicants whose bachelor's degree is not completed at the time of application will be considered for admission; if accepted, the applicant must submit a supplementary transcript showing completion of the degree before registration.
3. Arrange for an official copy of the General Test of the Graduate Record Examination (GRE) to be sent to the UAMS College of Health Professions: Institution Code 6146.
4. Prepare an application letter to the Audiology Admissions Committee (business format, 12-pt font and < 2 pages) addressing:
   a. An explanation of your interest in audiology.
   b. Your long-term and short-term goals.
   c. Other information you deem relevant to the committee's decision-making process.
5. Three letters of recommendation on the official recommendation form are required for consideration for admission ([http://www.uams.edu/chrp/audiospeech/](http://www.uams.edu/chrp/audiospeech/))
   a. Recommendations should be from professors with whom you have worked and who are familiar with your abilities and academic performance.
   b. Reference letters must be sent by the recommending individual directly to AUSP-UALR, 2801 S. University Avenue, Little Rock, Arkansas, 72204.
6. Schedule and participate in an interview (on-site or via distance technology).
   Tours will be offered to applicants who visit.
7. TOEFL scores as applicable.

Arkansas residency will be considered during selection for admission. Applicants are considered without regard to race, color, creed, age, marital status, national origin, or sex. Otherwise qualified individuals with disabilities receive equal consideration.

**Post-Master's:** Application procedures for the post-master's track follow steps 1 - 6 above. In addition, the date of the GRE score must be within the past five (5) years, proof of current state licensure in audiology and/or national certification in audiology (CCC-A or ABA) must be provided. Eligible applicants will have completed a master's degree program in audiology, communication sciences and disorders, or the equivalent approved
by the Council on Academic Accreditation of the American Speech-Language-Hearing Association (at least 36 semester credits of graduate level courses specified by the department). Contact the department for more specific requirements.

**Au.D./Ph.D.** Students who are interested in pursuing both the Au.D. and Ph.D. degrees in a combined track should consult with a Ph.D.-level audiology faculty member and/or the Co-Director of the Arkansas Consortium for the Ph.D. in Communication Sciences and Disorders for more information.

**Professional Curriculum**

The program requires a minimum of 118 graduate semester credits (SC). Students should expect to travel two to four hours away from central Arkansas for practicum experiences during their second and third years. Housing is arranged, if available, in local dormitories/apartments operated by the Arkansas Area Health Education Centers (AHEC) [http://www.uams.edu/ahec](http://www.uams.edu/ahec). A degree is awarded upon successful completion of all academic and practicum requirements for the College of Health Professions at the University of Arkansas for Medical Sciences. More specific information about program requirements can be obtained by contacting the Department of Audiology and Speech Pathology (501) 569-3155.

**Post Bachelor’s Track Requirements**

The post-baccalaureate Au.D. degree is designed to be completed in four years (including three summers with a common entry point in the fall). Exceptions to these timelines may occur on an individual basis. All work must be completed within eight (8) calendar years of initial admission. A minimum of 118 semester credit hours are required for completion of the Au.D. degree. The following 119 SC sample degree plan demonstrates a program that meets the 118 SC minimum. Your individual degree plan may vary slightly from this sample.

**Sample Degree Plan**

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<th>UAMS #</th>
<th>UALR #</th>
<th>Title</th>
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<td>AUSP 7181</td>
<td>Clinical Laboratory</td>
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14

| Spring (2) |          |                                                   |                 |
| AUD 5073   | AUSP 7381| Advanced Diagnostic Audiology                     | 3               |
| AUD 5193   | AUSP 7336| Anatomy and Physiology of the Auditory and Vestibular System II | 3               |
| AUD 5183   | AUSP 7326| Outcomes Research and Evidence Based Practice      | 3               |
| AUD 5223   | AUSP 7384| Amplification                                     | 3               |
| AUD 540V   | AUSP 7091| Audiology Practicum                               | 1               |
| AUD 5041   | AUSP 7181| Clinical Laboratory                               | 1               |

14
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<td>AUSP 7094</td>
<td>Directed Research</td>
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<td>AUSP 7330</td>
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<td>AUSP 7091</td>
<td>Audiology Practicum</td>
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<td>AUD 536V</td>
<td>AUSP 7094</td>
<td>Directed Research (if not complete)*</td>
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<td>AUSP 7094</td>
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<td>AUD 5041</td>
<td>AUSP 7181</td>
<td>Clinical Laboratory</td>
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</tbody>
</table>

*Research not included in total.

This course work represents a minimum of 72 SC of classroom courses, 6 SC in directed research with successful completion of a research project, 11 SC of clinical laboratory, 11 SC of practicum, and 12 SC of clinical externship during the final academic year. Performance-based examinations during the first spring and second summer in the program must be successfully completed to continue in the program. Successful completion of a comprehensive examination is required prior to placement for the fourth year externship experience. Note: The student may be required to pass an oral examination if she/he does not successfully complete the third year written examination.

This curriculum was designed to meet the 2011 Standards for the Certificate of Clinical Competence in Audiology (i.e., 2011 Audiology Knowledge and Skills Requirements) and the Standards for Accreditation of Graduate Education in Audiology and Speech-Language Pathology. Request for substitutions from the required sequence of courses will not be considered except in extenuating circumstances (e.g., serious illness or injury) and requires approval of the Advisor, Director of Audiology, and Chair of the Department. Students who wish to earn course credit for activities in which they have participated outside the scope of the required Au.D. curriculum may do so at their own expense. Students may register for an Independent Study and this course will be added to their academic record (transcript).

**POST MASTER’S TRACK REQUIREMENTS**

Admission to the post-master's Au.D. degree program can occur in any semester. The time to complete the program will vary depending on individual requirements. All work must be completed within eight (8) calendar years of initial admission.

- A minimum of 118 semester credits (SC) are required for graduation (28 SC of clinical practicum will be waived for those who can provide proof of ASHA certification, and up to 30 SC may be transferred from ASHA accredited programs).
- A research project will be required if evidence of satisfactory completion of a Master's thesis is not provided (completion of a master’s level research project will not satisfy the research requirement).
PROFESSIONAL COURSEWORK

The first number listed for courses is for the UAMS College of Health Professions; the second (in parenthesis) is for the University of Arkansas at Little Rock.

AUD 5013 (7360)—Research Methods in Communication Disorders
Introduction to research methodologies in audiology and speech pathology. Includes prospectus development, funding sources, data collection and analysis, and professional research writing and editing in communicative disorders and/or speech sciences.

AUD 5023 (7380)—Basic Diagnostic Audiology
Principles and techniques for basic audiologic evaluation, including pure tone testing, speech audiometry, and the clinical application of masking, immittance, and otoacoustic emissions. Relevant calibration issues will also be discussed.

AUD 5033 (7330)—Educational Audiology
The delivery of audiology services to a school-based population. Includes the development, management, and utilization of hearing and middle ear system screening programs, classroom acoustics, selection and fitting of classroom-based amplification, and federal laws associated with children who have special needs.

AUD 5041 (7181)—Clinical Laboratory
Lab instruction in clinical procedures and methods for evaluation and treatment of clients and care, maintenance and use of technology in audiology clinical practice. Perform evaluation and rehabilitation procedures under faculty supervision.

AUD 5043 (7331)—Anatomy and Physiology of the Auditory and Vestibular Systems I
Detailed information of the anatomy, physiology, electrophysiology, and neurophysiology of the auditory and vestibular systems.

AUD 5053 (7332)—Acoustics and Psychoacoustics
Basic information regarding the physics of sound, the measurement of sound and an introduction to the psychoacoustic basis of hearing and its clinical applications.

AUD 5063 (7333)—Auditory Processing
Theoretical overview, differential assessment, and treatment of adults and children with auditory processing disorders (APD). Intended to blend theoretical knowledge with practical clinical methods and techniques. Prerequisites: AUD 5023 (7380).

AUD 5073 (7381)—Advanced Diagnostic Audiology
Principles of and techniques for advanced audiometric evaluation, including speech audiometry, reflex decay, audiometric special tests and otoacoustic emissions. Report writing and making appropriate recommendations will also be discussed.
AUD 5083 (7382) — Clinical Electrophysiology
Principles and techniques in the use of evoked potentials to assess auditory function. Includes case studies and analysis of waveforms. Lecture and laboratory.

AUD 5103 (7383) — Medical Audiology
Introduction to the major pathologies of the auditory and vestibular systems, as well as medical/surgical treatment of those pathologies. Audiologic assessment and management of the disorders will also be discussed. Prerequisites: AUD 5023 (7380) and AUD 5043 (7331).

AUD 5113 (7321) — Instrumentation in Audiology & Speech Pathology
Introduction to basic principles of electronics and electrical safety and to proper use and care of equipment used in the evaluation and treatment of the auditory and vestibular systems.

AUD 5123 (7335) — Advanced Psychoacoustics
Advanced information regarding how listeners with normal hearing and those with hearing loss process sound. Topics include: loudness, frequency selectivity, temporal processing, pitch perception, space perception, object/pattern perception, speech perception, experimental design, and signal detection theory. Prerequisites: AUD 5053 (7332).

AUD 5132 (7222) — Speech Perception
Production and perception of speech sounds and the prosodic features of speech. Several theories of speech perception presented and discussed, and the effects of hearing loss on speech production and perception explored.

AUD 5133 (7367) — Infant-Toddler Communication: Development-Assessment
Investigates prelinguistic/early linguistic communication and feeding/swallowing development. Multidisciplinary assessment and intervention for infants and toddlers (birth to five) with special needs and their families. Current formal and informal assessment tools and techniques, current intervention strategies, enhancing the therapeutic process across environments, utilizing team collaboration, and facilitating parent-infant interaction.

AUD 5143 (7323) — Advanced Electrophysiology
Principles and techniques in the use of mid- and late-evoked potentials to assess auditory function. Prerequisite: AUD 5083 (7382).

AUD 5153 (7334) — Pediatric Audiology
Normal auditory development and theoretical, clinical, and practical issues involved in screening, assessment, and management of children with hearing loss. Prerequisites: Phonetics, language acquisition, and AUD 5023 (7380).

AUD 5162 (7224) — Genetics of Hearing Loss
Basic information on the genetic basis of hearing loss and an overview of syndromic and non-syndromic hearing losses. Strategies for referral to genetic counselors and other health care professionals will be included. Prerequisite: AUD 5103 (7383).
AUD 5163 (7320)—Auditory Based Speech/Language Intervention
Auditory-based speech and language intervention with infants and toddlers who are deaf and hard of hearing. Emphasis is on the principles of the normal development sequence of the listening skills, assessment of skills obtained within the hierarchy, and intervention aimed at teaching skills not yet acquired. Auditory based intervention for infants and toddlers requires family participation; therefore, learning styles of parents and caregivers will be discussed.

AUD 5173 (7365)—Counseling in Communication Disorders
Principles of counseling for working with persons with communication disorders and their families throughout the life span. Students will review major theories of counseling and will select those most useful for the various settings and practices of audiology and speech pathology.

AUD 5183 (7326)—Outcomes Research and Evidence-Based Practice
Principles of outcomes research, and the levels of evidence supporting clinical practice. Students will understand the principles of critical evaluation of diagnostic procedures and critical evaluation of the evidence for treatment efficacy and effectiveness as well as the importance of practice guidelines that define best practices.

AUD 5192 (7230)—Cultural Competence in Audiology
Knowledge and skills needed by audiologists to provide culturally competent services to diverse clients. Sources of diversity and application of concepts to the field of audiology will be discussed.

AUD 5193 (7336)—Anatomy and Physiology of the Auditory and Vestibular Systems II
Continuation of the first anatomy and physiology course with greater focus on skull anatomy and on peripheral and central nervous system embryology, neuroanatomy, and neurophysiology.

AUD 520V (7087)—Topics in Audiology
Graduate seminar with emphasis on topics related to clinical or rehabilitative audiology. May be repeated for additional credit not to exceed 6 hours total. Prerequisite: Consent of instructor.

AUD 5212 (7227)—Hearing Conservation
Noise measurement, OSHA requirements, occupational noise management, recreational audiology, and designing and implementing hearing conservation programs for adults and children. Prerequisites: AUD 5023 (7380); AUD 5112 (7221).

AUD 5222 (7228)—Professional Issues in Audiology & Speech Pathology
Personal and professional ethical values and their applications to dilemmas encountered in the clinical practices of audiology and speech pathology will be explored with students. Preferred practices and criteria for quality services will be topics for discussion.
AUD 5223 (7384)—Amplification
Effective use of hearing aids and auditory training equipment. Includes their component parts, electroacoustic analysis, hearing aid orientation/counseling, and approaches to hearing aid evaluation. Prerequisite: AUD 5023 (7380).

AUD 5232 (7229)—Audiology: Practice Management
Roles of audiologists in meeting the needs of the communicatively impaired. Students will understand preferred practices, criteria for quality services and quality improvement through the evaluation of service delivery models and exploration of the laws affecting service delivery in health care and educational settings.

AUD 5233 (7385)—Pediatric Amplification and Intervention
Advanced strategies specific to pediatric hearing assessment, applicable technologies and management utilizing a family centered approach to intervention. AUD 5023 (7380), Phonetics, Language Acquisition.

AUD 5243 (7386)—Audiologic Rehabilitation: Adult
Principles of audiologic rehabilitation for adults, including diagnosis, counseling, use of amplification and other assistive devices, and communication strategies. Various models of audiologic rehabilitation will be presented. Prerequisite: AUD 5023 (7380).

AUD 5253 (7351)—Amplification II
Advanced study of amplification systems, including strategies to assess benefit and satisfaction, binaural/bilateral considerations, alternatives to conventional hearing aids, and speech perception issues related to hearing loss. Prerequisite: AUD 5223 (7384).

AUD 5263 (7350)—Evaluation & Treatment of the Balance System
Basic information on the evaluation and treatment of balance disorders. Topics: anatomy and physiology of the vestibular, oculomotor, and proprioceptive systems; clinical tests of electronystagmography, dynamic posturography, and rotary chair. Medical and surgical treatments and rehabilitation strategies for vestibular/balance pathologies. Prerequisite: AUD 5043 (7331).

AUD 5273 (7325)—Implant Device Technology
Overview of history of cochlear implants, corporation technology in the cochlear-implant industry, and contemporary speech processing strategies for cochlear implants. Discussion of surgeries, audiological evaluation procedures used pre- and post-operatively, patient performance, counseling, and current research topics. Prerequisite: AUD 5223 (7384).

AUD 5283 (7371)—Gerontology in Audiology
Basic information on the aging process and a discussion of how the aging process affects people with hearing loss. The cognitive, physical, and social aspects of aging will be discussed.
AUD 530V (7000)—Independent Study
Prerequisites: graduate standing and consent of instructor. Directed readings in audiology and/or speech/language pathology, individual discussion with a faculty member. (1-3 hours) May be repeated for up to 6 hours credit.

AUD 5313 (BIOM 5013)—Biometrical Methods
Introductory topics in descriptive biostatistics and epidemiology, database principles, basic probability, diagnostic test statistics, tests of hypotheses, sample-size estimation, power of tests, frequency cross-tabulations, correlation, non-parametric tests, regression, randomization, multiple comparisons of means and analysis of variance for one and two-factor experiments. Prerequisite: Consent of instructor.

AUD 536V (7094)—Directed Research
Research or individual investigation for graduate students. Credits earned may be applied toward meeting degree requirements if the program approves and if a letter grade is given. Repeated registration is permitted.

AUD 540V (7091)—Audiology Practicum
Applied, supervised practicum experiences for graduate students that encompass the breadth of the current scope of practice with both adults and children from culturally diverse backgrounds. Repeated registration is permitted.

AUD 546V (7091)—Clinical Externship
Full-time, applied, supervised practicum experience for graduate students in residence, encompassing the broad scope of diagnostic and rehabilitative audiology clinical practice (4-9 hours). Repeated registration is permitted.
PERFORMANCE STANDARDS FOR THE DOCTOR OF AUDIOLOGY PROGRAM

ESSENTIAL FUNCTIONS

In order to acquire the knowledge and skills requisite to the practice of speech-language pathology or audiology to function in a broad variety of clinical situations, and to render a wide spectrum of client care, students must have essential skills and attributes in five areas: communication, motor, intellectual-cognitive, sensory-observational, and behavioral-social. These skills enable a student to meet graduate and professional requirements as measured by state and national credentialing agencies. Many of these skills can be learned and developed during the course of the graduate program through coursework and clinical experience. Failure to meet or maintain essential functions may result in action against the student, including, but not limited to, dismissal from the program. The Essential Functions document can be found in Appendix B.

PROFESSIONALISM

Professionalism in health care and education is based upon values that reflect the very special nature of the interaction between a provider and a patient, client, or family and between a teacher and student. Individuals confronting illness, social disruption, or other life-changing challenges are vulnerable. Individuals learning the knowledge, skills, and attitudes of a profession face many new challenges. Patients and students rely upon professionals to address their needs in an expert, professional manner. All who work with patients and their families and those who work with students are expected to act in accordance with the standards of professional conduct outlined below.

There are core values of professionalism that are universal and apply to those in health care professions and in education. These include, but are not limited to, moral values such as honesty, integrity, and trustworthiness; values that are specific to one’s profession (e.g., confidentiality), to society (e.g., commitment to excellence), to oneself (e.g., self-reflection), and to humanistic values such as empathy and compassion (see Appendix C for CHP Professionalism and Professional Conduct Policy).

Professionalism evaluations are conducted on an annual basis during the Au.D. program of study.

ACADEMIC INTEGRITY

All academic work in the UAMS/UALR Au.D. program will be conducted under the CHP Academic Integrity Policy. Academic misconduct in any form will not be tolerated in the UAMS/UALR Au.D. degree program. Students are referred to the CHP Student Handbook, section 4.6 for this policy.

A Student Honor Code is one of the most important assurances signed by each Au.D. student in the Department of Audiology and Speech Pathology upon entering the graduate program. This assurance can be found in Appendix D along with other signature pages described in the next section. The signed Honor Code will be placed in the student’s academic file. The Honor Code pledge verifies the student’s understanding and
knowledge of the highest ethical standards of his/her discipline, as well as agreeing to abide by those standards and the consequences of failing to uphold them.

ADVISING

INITIAL ASSIGNMENT

At the time of admission, the Chair of the Admissions Committee appoints a full-time member of the audiology faculty as the student’s academic advisor (see handout). The first advising session will occur during the Fall Orientation for New Students. At that time, copies of the program policies and documents will be reviewed. The degree plan will be completed and assurances will be signed (see Appendix D) and filed in the students advising file:

Honor Code
Department Confidentiality Agreement
CHP Confidentiality Agreement
CHP Professionalism Signature Page
Essential Functions Signature Page
Degree Plan
Au.D. Academic Handbook Statement
Au.D. Clinic Handbook Statement
Au.D. Practicum and Externship Handbook Statement

ACADEMIC ADVISING

The advising process is a joint venture between student and advisor. The student is responsible for becoming familiar with the program and any options that may be available, as well as thinking about what options they are interested in. The student's advisor is responsible for helping the student plan an academic program and, when necessary, for providing information about the student and the student's progress to other faculty members. The student's academic program may be influenced by the certification requirements established by the Council for Clinical Certification (CFCC), American Speech Language Hearing Association (ASHA), American Board of Audiology (ABA), American Academy of Audiology (AAA), and the academic background of the student. The advisor will keep such information in the student’s academic file as is necessary for the direction of the student's program. Examples of information include grade reports, program plans, clinical reports, records of feedback from other faculty members, check lists, etc.

Each student must meet with his/her advisor formally at least once during each semester of the academic year, including the summer semester. This meeting typically occurs around mid-term of each semester. The purpose of this meeting is to complete registration procedures for the upcoming semester, review academic coursework, plan future courses, plan and review clinical experiences, decide upon the research project, and fill out necessary paperwork including the department program of study, application for graduation, KASA form, and ASHA CCC-A and/or AAA ABA application for certification. The following forms (see Appendix E) are reviewed and updated each semester:
The Advising Checklist will serve as the conference record and will be completed and initialed by both the faculty member and student following the advising session and retained in the student’s record.

The student should work with his/her advisor and keep the advisor informed as to the student's program of study and clinical and research activities. If the student earns a “C” or lower in any course, the student will meet with her/his advisor to discuss options to improve performance. Although the advisor is not the sole counselor to the student, the advisor is the primary counselor. Communication between the advisor and the student is necessary to make advising a meaningful and productive process.

If an advisor is unable to perform advising duties for any reason (e.g., sabbatical leave, illness, absence from campus), a temporary or permanent reassignment will be made by the Director of Audiology upon notification by either the student or advisor. Occasionally, students choose to change advisors. A Change of Advisor form should be completed when students change advisors. A student may request a change in advising assignments by submitting the Change of Advisor form to the Director of Audiology (see Appendix E).

CLINICAL EXPERIENCES

GENERAL GUIDELINES

Over the course of the Au.D. program, students must accrue a minimum of 1820 clinical hours. Details about practicum requirements and externship placements can be found in the Au.D. Clinic Handbook.

All Audiology student clinicians are required to complete clinical practicum at the UALR Speech, Language and Hearing Clinic for a minimum of 2 semesters prior to assignment to an off-campus practicum placement or externship. Practicum and externship experiences must be coordinated with the assistance and approval of the Director of Audiology following consultation with the Practicum Coordinator and Externship Coordinator.

Prior to the first practicum and/or externship experience, students must pass the Basic Diagnostic Audiology Performance-Based Evaluation, typically taken at the end of the first spring semester. Students must also be in good academic standing (not on probation) to be recommended for a practicum or externship placement and be enrolled full-time during the semester this clinical learning experience is completed, except during the summer. All academic coursework must be completed prior to the 4th Year Externship. Exceptions to this policy will be considered on a case-by-case basis.

In addition to the in-house practicum, student clinicians are expected to complete at least three (3) outside practicum and/or externships. While student preference is taken into consideration when making practicum/externship assignment, the sites are chosen based
on the diverse needs of the student as well as the externship site. The goal is for each student to complete practicum in at least 3 different types of settings, such as hospitals or rehabilitation centers, community clinic, private practice clinic or public school settings. Each student must successfully complete Performance-Based evaluations of clinical skills before being allowed to progress to the next level of clinical experience. More information about Au.D. Practicum and Externship opportunities can be found in the Au.D. Practicum and Externship Handbook.

The culminating clinical experience of the Au.D. program is the full-time externship in the 4th year. This externship is indirectly supervised by a full-time faculty member, typically the course instructor for the 4th year AUD 5041 Clinical Laboratory course. During the 3rd year AUD 5041 Clinical Laboratory course, the Externship Coordinator will oversee the process of acquiring a 4th Year Externship by assisting you in identification of appropriate externships, development of a cover letter and resume, and by providing oversight for the application process. The Externship Coordinator procures the affiliation agreement with the site if needed, and monitors the process of 4th Year Externship Placements to make your experience as rewarding as possible. Tuition applies during the fourth year since you are still a student and you will accrue graduate credit toward your degree for your activities. More information can be found in the Au.D. Practicum and Externship Handbook.

Fourth Year Externships must be at least 32 hours a week to be considered full-time. Prior to starting the externship, you should have at least 500 contact hours, and have fulfilled the hours in specific areas as noted in the “Timeline of Clinical Experiences” Table.

**PRACTICUM INTERNSHIP/EXTERNSHIP PLACEMENTS**

**1st Year Hearing Screening Rotations**

During your first year of study, you will complete two four-week clinic screening rotations at the ACH NICU and Conway Public Schools. Daily and semester clock hour summary forms will be turned in at the end of each semester on clinic checkout day. Failure to turn in these forms will result in a decrease in your earned grade for the semester.

**1st Year Clinic Practicum - On Campus**

During your 1st year of study (fall and spring), you will complete a ½ to 1 day On-Campus Clinic Practicum in the Audiology Clinic at the UALR Speech and Hearing Clinic. Students are typically assigned with another student in their first semester. Clinical practice during this first semester will follow the “apprenticeship” model, in which the student primarily observes the preceptor to learn the clinical procedures and become familiar with the equipment. The number of clinical hours versus observation hours depends upon the experience each student brings to the program. During the 2nd semester of the first year, the student clinician may be assigned as a co-clinician with a 1st, 2nd or 3rd year student, or if appropriate, may be scheduled to see a patient as the primary student clinician.

Your primary goal during your first clinic year is to become competent in completion of an adult diagnostic test battery and to acquire an introduction to amplification and coun-
seling. All clinic hours must be submitted in writing with your supervising clinician’s ASHA certification number and original signature. Daily and semester clock hour summary forms will be turned in at the end of each semester on clinic checkout day. Failure to turn in these forms will result in a decrease in your earned grade for the semester.

2nd Year Clinical Practicum – Central Arkansas Campus Affiliates

During your 2nd year of study (summer, fall, and spring), you will complete a ½ day Clinic Practicum at the UALR Speech and Hearing Clinic partnered with a 1st year student, and a 1 to 2 day Clinic Practicum Externship with one of our Central Arkansas Off-Campus Affiliates. These sites typically include audiology clinics within the central Arkansas Metropolitan area (up to 1 to 1 ½ hours away). Occasionally, it is necessary to place 2nd year students at non-local clinical education sites. You must demonstrate competence with basic adult diagnostic testing prior to placement at a pediatric site.

Full-time/part-time non-local (e.g., > 3 hour drive or out-of-state) clinical practicum externships may be arranged with academic and clinical faculty approval during the 2nd summer (semester 6). Past students have completed 5-8 weeks of clinical externships in Georgia, Illinois, Louisiana, Maine, and Tennessee. There are also a number of in-state practicum and externship sites available in El Dorado, Mountain Home, Fayetteville, Fort Smith, etc. See the Au.D. Practicum and Externship Handbook for more information. All clinic hours must be submitted in writing with your supervising clinician’s ASHA certification number and original signature. Daily and semester clock hour summary forms will be turned in at the end of each semester on clinic checkout day. Failure to turn in these forms will result in a decrease in your earned grade for the semester.

3rd Year Clinical Practicum – Non-Local Off-Campus Affiliates

During your 3rd Year (summer, fall, and spring), you should expect to travel two to four hours away from central Arkansas for practicum experiences and to participate in clinic 2-3 days per week. Free housing is arranged, if available, in local dormitories/apartments operated by the Arkansas Area Health Education Centers (AHEC) http://www.uams.edu/ahec. You may also make arrangements to stay with friends or family. These opportunities include El Dorado, Mountain Home, Fayetteville, Fort Smith, etc. Out-of-state full-time practicum or externships may also be arranged with the assistance of the Practicum Coordinator and Director of Audiology. These types of practicum and/or externship experiences have been arranged in Georgia, Illinois, Maine, Missouri, Oregon and Tennessee. More information can be found in the Au.D. Practicum and Externship Handbook. If you are interested in this type of experience, consult with your Advisor, the Practicum Coordinator, and the Director of Audiology.

If you did not complete a ½ day placement at the UALR Speech and Hearing Clinic serving as a preceptor apprentice, you will have the opportunity to be partnered with a 1st year student during your 3rd year of study. All clinic hours must be submitted in writing with your supervising clinician’s ASHA certification number and original signature. Daily and semester clock hour summary forms will be turned in at the end of each semester on clinic checkout day. Failure to turn in these forms will result in a decrease in your earned grade for the semester.
After successful completion of comprehensive exams and Capstone research project (data collection must be completed at a minimum), you will begin your 4th year clinical externship in the summer or early fall. Students from our program have completed 4th year externships in a variety of states including Arkansas, Arizona, California, Georgia, Louisiana, Minnesota, Missouri, Ohio, Oklahoma, Pennsylvania, Tennessee, Texas and Virginia. During the 1st or 2nd week in May during your final semester, you will be required to spend a couple of days before graduation in the department completing the graduation check-out procedure. Any hours you receive after April 30th will not be included in those counted toward your degree requirements, although they may be counted toward certification requirements. All clinic hours must be submitted in writing with your supervising clinician’s ASHA certification number and original signature. Your semester clock hour summary form and your final clock hour summary forms must be completed and turned in during at your graduation checkout appointment the 1st week in May. Failure to turn in this form will result in not being cleared for May graduation.
**TIMELINE OF CLINICAL REQUIREMENTS DURING AU.D. PROGRAM**

The contact hours expected throughout the course of the Au.D. program, and in specific content areas, are listed in the table in the next section. The program requires documentation of clinical activities in order to ensure that you are being provided the diversity of experiences necessary in order to maximize your educational opportunities. It will be your responsibility to ensure that you maintain an on-going record of all direct and indirect contact hours signed by your preceptors.

**Timeline of Practicum Internship/Externship Placements During Au.D. Program**

<table>
<thead>
<tr>
<th>Year 1</th>
<th>Summer</th>
<th>Fall Semester</th>
<th>Spring Semester</th>
<th>Cumulative Subtotals</th>
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<tbody>
<tr>
<td>Up to 8 hours week on-site</td>
<td>Observation, assisting, and some direct service</td>
<td>1 SC Practicum 6-8 hrs/wk Minimum - 30 hrs</td>
<td>Assisting, some direct service</td>
<td>2 SC Practicum Goal - 100 hours</td>
</tr>
<tr>
<td>Minimum – 60 direct service contact hours prior to Off-Campus Practicum or Externship Placement</td>
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<thead>
<tr>
<th>Year 2</th>
<th>Summer</th>
<th>Fall Semester</th>
<th>Spring Semester</th>
<th>Cumulative Subtotals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to 16 hours week on- and/or off-site</td>
<td>Direct service</td>
<td>Direct service 2 SC Practicum 12-16 hrs/wk Minimum - 50 hrs</td>
<td>Direct service 2 SC Practicum 12-16 hrs/wk Minimum - 50 hrs</td>
<td>7 SC Practicum Goal - 300 hours</td>
</tr>
<tr>
<td>Minimum – 200 direct service contact hours Non Local Externship Placement may occur during one of these semesters</td>
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<th>Year 3</th>
<th>Summer</th>
<th>Fall Semester</th>
<th>Spring Semester</th>
<th>Cumulative Subtotals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to 24 hours week on/and or off-site</td>
<td>Direct service 2 SC Practicum 12-16 hrs/wk Minimum - 50 hrs</td>
<td>Direct service 2 SC Practicum 12-16 hrs/wk Minimum - 50 hrs</td>
<td>Direct service 2 SC Practicum 12-16 hrs/wk Minimum - 50 hrs</td>
<td>13 SC Practicum Goal - 800 hours</td>
</tr>
<tr>
<td>Minimum – 500 direct service contact hours Non Local Externship Placement occurs during one semester; 500 direct service prior to 4th Year Externship</td>
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<table>
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<tr>
<th>Year 4</th>
<th>Summer</th>
<th>Fall Semester</th>
<th>Spring Semester</th>
<th>Cumulative Subtotals</th>
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<tbody>
<tr>
<td>Up to 40 hours week off-site</td>
<td>Direct service 4 SC Externship 32-40 hrs/wk Minimum - 400 hrs</td>
<td>Direct service 6 SC Externship 32-40 hrs/wk Minimum - 600 hrs</td>
<td>Direct service 6 SC Externship 32-40 hrs/wk Minimum - 600 hrs</td>
<td>14 SC Externship Goal - 2200 hours across all sites</td>
</tr>
<tr>
<td>Minimum - 1900 direct service contact hours</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Externships: Must include at least 3 distinctively different sites, (e.g., medical, dispensing practice, school, pediatric etc.). Specialty sites may be split with two sites in a single semester.
**Minimum expectations for specific clinical areas completed prior to 4th year Externship:**

<table>
<thead>
<tr>
<th>Area</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Diagnostics (Audiometry, Immittance, OAEs, APD age 13 and above)</td>
<td>100 hrs</td>
</tr>
<tr>
<td>Pediatric Diagnostics (ABR, VRA, Play Audiometry, Immittance, OAEs, APD up to age 12)</td>
<td>20 hrs</td>
</tr>
<tr>
<td>Adult Amplification (Hearing Aid Eval, Selection, Fitting, Verification, Validation, Counseling, Adjust/Repair)</td>
<td>50 hrs</td>
</tr>
<tr>
<td>Pediatric Amplification (Hearing Aid Evaluation, Selection, Fitting, Verification, Validation, Counseling, Adjust/Repair)</td>
<td>10 hrs</td>
</tr>
<tr>
<td>Aural Rehabilitation (Individual and Group habilitation and Rehabilitation)</td>
<td>10 hrs</td>
</tr>
<tr>
<td>Cochlear Implants (Candidacy Evaluation, Mapping, Verification)</td>
<td>10 hrs</td>
</tr>
<tr>
<td>Balance Assessment (ENG, Rotary Chair, Platform Posturography, Rehabilitation)</td>
<td>10 hrs</td>
</tr>
<tr>
<td>Evoked Potentials (ABR, ECOG, MLR, ALR, ASSR, Intra-Op Monitor, ENOG, VEMP)</td>
<td>10 hrs</td>
</tr>
<tr>
<td>Hearing Conservation/Screening (Adult and Pediatric Hearing Screening)</td>
<td>30 hrs</td>
</tr>
</tbody>
</table>

300 total hrs in specific areas above prior to 4th year Externship

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**DIRECTED RESEARCH**

**DIRECTED RESEARCH/RESEARCH ADVISOR(S)**

Capstone experiences are typically completed under the direction of one or two full AUSP audiology faculty mentors who will be your ‘research advisor(s)’. All primary research advisors must hold a full-time faculty appointment within the Department of Audiology and Speech Pathology (AUSP) (i.e., not ‘Adjunct’ status). On occasion, there may be opportunities to complete your Capstone project with individuals outside of the department (e.g., pediatric focus at Arkansas Children’s Hospital). As the Au.D. program and faculty bear responsibility for progression and completion of program requirements, a full-time audiology Ph.D. faculty member must agree to serve as instructor of record for projects conducted with individuals outside of the department. Many times, these research partnerships and collaborations result in high-quality experiences for the student and all involved. Upon admission to the program, all students are assigned an academic advisor who will also serve as the research advisor. Your research advisor is available to ask questions about the directed research experience and as a safe place to explore research ideas. The research advisor can be changed based on differing interests between the student and research advisor, or additional research advisors can be added to take advantage of expertise areas.

**DIRECTED RESEARCH EXPERIENCE**

Each student must complete a directed research experience (AUD 536V [7094]). This experience may take one of two forms: the ‘Capstone Project’ or ‘Capstone Thesis’. According to Crunkilton et al. (1997)\(^1\), the Capstone should incorporate problem-solving, decision-making, critical thinking, collaborative/professional relationships, oral communication, and written communication. Crunkilton et al. also state that the Capstone is a planned learning experience requiring students to synthesize previously learned subject matter content and to integrate new information into their knowledge base for solving real world problems and should serve to ease the transition between their academic experiences and entry into a career or further study.

A written document and formal presentation to the department (following specific guidelines) is required for completion of either option. For satisfactory completion of the directed research experience, a minimum of 6 credit hours is required. Additional directed research hours do not count towards the minimum 118 hours for the Au.D. degree. Capstone Projects and Capstone Theses are guided by the following three publications:


**Capstone Projects**

Projects typically take the form of a project related to one in which the research advisor is already working, or it could be a student-generated idea. Again, additional research advisors may be added based on the needs of the research.

A timeline for completion of the Capstone Project will be provided to you by your faculty mentor, but below is an example snapshot of the process:

1. Complete human subjects protection training (http://www.citiprogram.org)
2. Consult with your research advisor(s) regarding the selection of a research topic
3. Submit a project proposal to the Institutional Review Board (IRB) (if applicable)
4. Find and evaluate relevant research, use appropriate citations and references
5. Implement research design and collect data
6. Present at the Au.D. Student Research Presentation
7. Obtain written project approval by research advisor(s)
8. Consider possible state or nationals presentations and/or publication

Students will prepare written research project product following the UAMS Graduate School *Thesis and Dissertation Preparation* guidelines (http://www.uams.edu/gradschool/students/thesis.asp) or identifying a potential journal to which he/she might submit a manuscript for possible publication and adhere to its guidelines. Upon approval of the final draft by the research advisor(s), have the project spiral bound (two copies) and signed by the research advisor(s). The research advisor(s) will make a copy of the signature page and include in your academic file as documentation.

Although not required, students are highly encouraged to be lead authors or co-authors on their research projects for presentation at conventions such as the Arkansas Speech-Language-Hearing Association convention, Arkansas Academy of Audiology, American Speech-Language-Hearing Association, or American Academy of Audiology, as examples. Some projects may also be publication-worthy and you may be encouraged to prepare a manuscript with your research advisor(s) as lead author or co-author.

The **Capstone Thesis** is intended for those students who wish to complete a more independent research study to develop their research skill sets or because they are potentially interested in a research- or teaching-related career. The Capstone Thesis is distinct from...
the Capstone Project in that the student is required to participate in all phases of research, including literature review, writing an Institutional Review Board application (if needed), data collection, data analysis, etc. The written document will be completed in compliance with the UAMS Graduate School Dissertation and Thesis Preparation guidelines (http://www.uams.edu/gradschool/students/thesis.asp). The Capstone Thesis implies that a student is able to work fairly independently and is responsible enough to fulfill their responsibilities. PhD-level faculty member must serve as Chair (i.e., research advisor) with a committee of at least three members. The other two (or more) committee members may be Ph.D. or Au.D. faculty members and may also include individuals from the community, pending approval of the committee Chair. The student will prepare and present a prospectus of the project subject to approval by the committee. In addition, the student will conduct an oral defense of the project with the committee and must make a departmental presentation at the end of their third year of study. The completed thesis will be hardbound in the manner that is typical of theses and dissertations. Four copies will be made, one for the student, one for the research advisor, and one for the UAMS/UALR department library.

A timeline for completion of the Capstone Thesis will be provided to you by your faculty mentor, but below is an example snapshot of the process:

1. Complete human subjects protection training (http://www.citiprogram.org)
2. Select a research topic (or ask your advisor or another a faculty member for guidance)
3. Choose a Ph.D. faculty research mentor who holds a full-time appointment in the department
4. Establish a thesis committee
5. Develop and present a prospectus (written and oral research proposal including review of relevant studies and proposed research plan)
6. Submit the project proposal to the Institutional Review Board (IRB) (if applicable)
7. Find and evaluate relevant research, use appropriate citations and references
8. Implement research design and collect data
9. Complete a public oral defense of the thesis
10. Present at the Au.D. Student Research Presentation
11. Obtain written thesis approval by faculty mentor and committee
12. Consider possible state or nationals presentations and/or publication (highly encouraged)

In order to enrich the Capstone Thesis experience, students are highly encouraged to be lead presenter of their research projects at conventions such as the Arkansas Speech-Language-Hearing Association convention, Arkansas Academy of Audiology, American Speech-Language-Hearing Association, or American Academy of Audiology, as examples. Some projects may also be publication-worthy and you may be encouraged to prepare a manuscript with your research advisor and committee members.
GUIDELINES FOR AU.D. STUDENT RESEARCH PRESENTATIONS

Regardless of whether or not the student has completed their directed research project or thesis, each student will make a public presentation of their research to the Department of Audiology and Speech Pathology sometime during the Spring of their 3rd year. Students should work with their research advisor(s) to prepare for this presentation. Presentations are usually no more than 15-20 minutes, including a short question and answer period.

IT IS MANDATORY THAT ALL 1ST, 2ND, AND 3RD YEAR AU.D. STUDENTS ATTEND RESEARCH PRESENTATIONS. FOURTH YEAR AU.D. STUDENTS ARE WELCOME TO ATTEND.

KNOWLEDGE AND SKILLS ACQUISITION

The Knowledge and Skills Acquisition Form was developed by the Council on Academic Accreditation to assist in tracking for the ASHA Certification process. It provides evidence for tracking a student’s:

- Acquisition of knowledge and skills
- Supervised clinical practicum hours
- Progress toward graduation
- Progress toward state and national credentials

The tracking of these skills is accomplished by means of the “Record of Knowledge and Skills Acquisition”, or KASA Form. Outcomes have been established by the program to meet all applicable standards (See Appendix F for ASHA Standards for the Certificate of Clinical Competence in Audiology, which include the KASA Objectives). These standards are incorporated into coursework, clinical practica, and externships in the form of measurable goals, objectives, or outcomes. Each course has associated with it a number of specific outcomes you will be asked to meet in order to demonstrate knowledge and skills in that content area. The outcomes may be demonstrated via exams, laboratory or homework assignments, written papers, projects, through contact with clients in the clinic, or other measurable ways. Your instructors will provide you with the KASA objectives or course objectives on your syllabus. You will document evidence of how you have, or have not, met these outcomes. If you do not meet the outcomes adequately, a remediation plan will be developed by you and your instructor to remediate the areas that are weak, or to plan how you can gain additional practice, such as in clinic, to meet the KASA objectives for the course.

Satisfactory completion of the objectives is defined as earning a grade equal to or higher than "B" in any course at the graduate level. If a student does not satisfactorily complete a specific KASA objective during the course, remediation will be planned, directed, evaluated and documented by the course instructor/clinical preceptor. Successful completion of the remediation plan is required for course completion.
COMPREHENSIVE EXAMINATION

The purpose of the comprehensive examination is to provide the student an opportunity to demonstrate mastery of discipline-specific knowledge. Thus, all students must pass a comprehensive examination before the student will be placed in a 4th Year Externship and before the doctoral degree will be conferred. This examination assesses the student’s knowledge of the academic theories and clinical applications deemed essential for entry level into the profession. Students may take the comprehensive examination up to three times. If the student does not pass this examination by the third attempt s/he will be dismissed from the program.

See Appendix G for more information regarding the comprehensive examination.

EDUCATIONAL TESTING SERVICES (ETS) PRAXIS EXAM – INFORMATION SHEET AND GUIDELINES

Although the Praxis Examination is not a requirement for graduation, it is a requirement for Arkansas Licensure. Students are encouraged to take the ETS Praxis Exam near the end of their 4th Year Externship. The following information is provided for those students who wish to take this examination prior to graduation.

GUIDELINES FOR TAKING THE PRAXIS EXAMINATION

You are required to list the University of Arkansas for Medical Sciences and the University of Arkansas at Little Rock as a facility to receive a report of your score. Be sure to use the Department Code, 0013. DO NOT USE THE UNIVERSITY CODE. This request must be made at the time of initial registration for the exam. If this guideline is not followed, your graduation may be delayed and additional expenses will be incurred for having Praxis scores sent again.

GRADUATION REQUIREMENTS

Graduates of the Au.D. program have successfully completed all academic coursework and clinical requirements (see section on Academic Performance/Student Progression Policy). These graduates have been assessed for professionalism annually and have passed performance-based clinical examinations at the end of their 1st and 2nd years. Comprehensive examinations have been passed during the 3rd year of their tenure as a student and graduates have completed a directed research project under the guidance of a research mentor. Graduates of this Au.D. program have met all the knowledge and skills objectives established by the department to meet the current ASHA standards and have completed a minimum of 118 SC hours and have accumulated at least 1820 clinical hours of clinical practice supervised by an audiologist with ASHA certification. Prior to graduation, documentation for these requirements are thoroughly reviewed. Students should plan on spending two or three days at the university prior to graduation to complete graduation check-out procedures and the ‘clear campus’ process. Students complete an exit interview prior to participating in the hooding ceremony and graduation activities.
AU.D. PROGRAM POLICIES

ADMINISTRATIVE

Calendar of Events

Students should refer to the calendar of audiology-related events posted on the bulletin board outside the Director of Audiology’s office.

Change of Address

In the event of a mid-semester change of contact information, the student is required to complete a new ‘Student Information Form’ and turn it in to the front office personnel.

Class and Clinic Hours

The Au.D. program provides classroom study, clinical observation, clinical experience, independent study, and seminars. Based on the student’s classification (first year, etc.), individual classes will generally meet one (1) day per week with all classes scheduled on two (2) days per week. In addition there will be clinical meetings, grand rounds, neurotology conference, and clinical and research activities scheduled on the other days. Students should expect to have clinical rotations both within and outside the UALR Speech and Hearing Clinic. Students are expected to provide their own transportation to clinical training sites. When necessary, the AUSP department reserves the right to adjust class schedules, times and program sequencing, as well as clinical rotations outside of the Little Rock metropolitan area. As a full-time graduate student, you should consider graduate school your priority.

Leave of Absence

At times it may be necessary for a student to take a leave of absence. A student in good standing who desires a leave of absence should first speak with her/his academic advisor, then make a written request to the Director of Audiology. Each request will be handled on a case-by-case basis. A leave of absence can occur only after approval.

Modification of Program Requirements

Requests for modification of academic or clinical requirements should be directed, in writing, to the Director of Audiology. Any modification will be implemented only upon approval by the Director of Audiology.

Official Correspondence

The UAMS Email Account is recognized as the official method of electronic communication with students. The program will communicate with students only via their UAMS email account. Student should use only their UAMS email account to communicate with off-campus preceptors. Students are expected to check their UAMS email accounts on a daily basis for program information and/or announcements.
At the discretion of individual faculty and students, texting communication may be implemented on a limited basis. Email is the primary method of electronic communication unless the situation requires urgent communication.

**Outside Employment**

A student’s outside employment schedule will not be considered when arranging classes, clinic and other program events. The student's primary responsibility is to first fulfill all school obligations. Students should be aware that responsibilities increase with each year in the program (i.e., students are expected to be in clinic 2-3 days a week during their 3rd year).

**Attendance**

Professionalism and a goal toward an attitude of life-long learning is highly valued in the Au.D. program. One of the goals of our program is to help our students integrate these values. We would like to make clear our expectations regarding your attendance in class, clinic, assistantships and other school-related activities. The official program policy is:

   Attendance at all class sessions is expected. Unless arrangements have previously been made for clinical or research externships, illness, etc, absence is defined as not being present during the assigned class time. Course instructors may deduct points for absences at their discretion.

You are expected to present proper documentation for any absence that you believe may be excused. In all cases of class and clinic individual faculty members have the latitude to decide whether an absence is excused or not.

1. **Classes** - In all classes your attendance at each class session is expected. We realize that at times emergencies may arise and you may have to miss a class. Telephoning or emailing your instructor to that effect is a professional courtesy that you should be in the habit of; however, that call or email does not ensure that absence is excused.

2. **Clinic** – Your attendance is expected for all scheduled on- and off-campus clinics. Should an emergency arise, (e.g., you or your child are vomiting, have a fever, or are on your way to the hospital) contact your preceptor as soon as possible. It is your responsibility to have your preceptor’s contact information readily available.
   a. If you have a scheduling conflict (e.g., doctor’s appointment), you must make arrangements with your preceptor well in advance of the scheduled clinic, and arrange for another student to cover your clinic. For any on-campus clinic absence a ‘make-up’ clinic must be scheduled with your preceptor between semesters. For off-campus clinic absences, consult with your preceptor.
   b. You are expected to be in the clinic at least 30 minutes (or earlier) before your scheduled clinic time. This will allow time for set up and consultation with your preceptor to get ready for your scheduled patients.
   c. You are expected to stay following the last patient to complete close-out tasks for the day. You are not excused from clinic until all clinic closing tasks have been completed, or at the discretion of the preceptor.
3. Graduate Assistantships/Traineeships: When you are paid to perform particular duties you are expected to behave in a responsible manner equivalent to any other paid position. This means you should do the following:
   a. Schedule regular work days/times with your supervisor;
   b. Arrive 15 minutes before your scheduled work time and work for the full scheduled time;
   c. There is no sick time or leave time for these positions. If you miss work due to illness or any other reason, this time must be made up.

4. Other Program Events and Conferences - Examples include the UAMS Neurotology Conference, Grand Rounds and Au.D. Student Research Presentations. These opportunities should be viewed by you as a valuable learning experience. It is the student’s responsibility to sign the attendance sheets. Excused absences with proper documentation will not result in a lowering of the course grade. Unexcused absences may result in a minimum of a 4% overall reduction of the course grade per unexcused absence in the following courses:

<table>
<thead>
<tr>
<th></th>
<th>Summer</th>
<th>Fall</th>
<th>Spring</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>X</td>
<td>Basic Dx</td>
<td>Adv. Dx</td>
</tr>
<tr>
<td>2</td>
<td>Genetics</td>
<td>Clin Elec</td>
<td>Med Aud</td>
</tr>
<tr>
<td>3</td>
<td>Prac Mgmt</td>
<td>Ed Aud</td>
<td>APD</td>
</tr>
</tbody>
</table>

Other opportunities will arise during your time in the UAMS/UALR Au.D. program. The faculty will make you aware of these as they are known. Although attendance at many of these events is not tied to a grade, attendance should be considered an aspect of professionalism and you should plan to attend. Attendance also provides the opportunity to establish relationships with potential preceptors, employers and colleagues.

**Academic Performance/Student Progression Policy**

The Au.D. program is committed to excellence in academic, clinical and research activities. The following minimum standards for student performance are designed to reflect that commitment to excellence.

The audiology faculty conducts periodic reviews of student progress. Examples of these reviews include: clinical and professionalism evaluations, transcript review, focused faculty meeting, one-to-one review during semester advising sessions, performance-based evaluations at the end of the first and second years and comprehensive examinations in the third year. These reviews are intended to be supportive in nature; that is, they are designed to identify academic and/or clinical areas that need remediation for the student to successfully progress through the Au.D. program.
Expected Performance

Expected performance includes but is not limited to the items below.

Academic

- Students will excel academically earning grades of B or better and at a minimum maintain an overall grade point average of 3.00 to remain in good academic standing.
- Successfully complete first and second year clinical performance-based evaluations.
- Pass the comprehensive examination in the third year.
- Complete all didactic coursework before beginning the fourth year placement.
- Complete the six required directed research credits and at a minimum data collection before beginning the fourth year placement.

Non-Academic

- Consistently meets professional standards as rated by peers, faculty, staff, and community partners.
- Honor the academic integrity policy.
- Create an environment that values each individual including patients, classmates, instructors, and staff.

Notes:

- Should an “Incomplete” be earned in any academic or clinical course, the work must be completed by the end of the following semester.
- Consult the CHP Handbook for information regarding student appeal procedures.
**Remediation of Performance**

**Policies**

**Academic**
Earning a C or below will result in the development of a remediation plan. The student will remain on a remediation plan until proficiencies of KASA objectives have been demonstrated. The product of remediation will not affect the previously earned course or clinical practicum grade.

**Non-Academic**
Professional behavior and academic integrity which do not meet expectations are examples of areas which may require remediation.

**Procedures**

**Academic**
On earning a first grade of C or below, the instructor will notify the student’s academic advisor and the Director of Audiology. Then, the student will meet with the instructor and academic advisor to begin formulating a remediation plan and for explanation of consequences of earning a second C or below. A Student Action Form will be completed by the academic advisor (and/or Director of Audiology) in coordination with the instructor and student. Some situations may require consultation with the Associate Dean of Students and Academic Affairs in the College of Health Professions. Decisions about remediation are made on a case by case basis.

**Non-Academic**
Upon demonstration of failure to meet the minimum expected non-academic standards, faculty, staff, or community partners will notify the student’s academic advisor and/or the Director of Audiology. The student will meet with their academic advisor and Director of Audiology and to begin a plan for resolving the issue. A Student Action Form will be completed by the academic advisor in coordination with the Director of Audiology. Some situations may require consultation with the Associate Dean of Students and Academic Affairs in the College of Health Professions. Decisions about issue and/or remediation are made on a case by case basis.
**Probation Status**

**Policies**

**Academic**

Students will be placed on academic probation for:

- Earning a second C or below during tenure in the program
- Earning two C’s or below in the same semester (students who earn a grade D or F in any course will be required to repeat that course)
- A semester GPA below 3.0
- A cumulative GPA below 3.0

**Non-Academic**

Students will be placed on non-academic probation for:

- Unresolved professional misconduct
- Unresolved academic misconduct
- Unexcused absence(s) at required functions/events
- Demonstration of unwarranted and/or disproportionate* professional misconduct
- Demonstration of unwarranted and/or disproportionate* academic misconduct

*As viewed by the program faculty

**Procedures**

**Academic**

On earning a (additional) grade(s) of C or below, the instructor will notify the student’s academic advisor and the Director of Audiology. The student will meet with the instructor and academic advisor for explanation of the process of probation and to develop a plan to be removed from probation. A Student Action Form will be completed by the academic advisor in coordination with the instructor and student. Some situations may require consultation with the Associate Dean of Students and Academic Affairs in the College of Health Professions. Decisions about probation are made on a case by case basis.

**Non-Academic**

Upon demonstration of failure to meet the minimum expected standards, faculty, staff, or community partners will notify the student’s academic advisor and/or the Director of Audiology. The academic advisor will notify the student by letter and/or email. The advisor will also inform the Director of Audiology and the Chairman of the department of the probation. Some situations may require consultation with the Associate Dean of Students and Academic Affairs in the College of Health Professions. Decisions about probation are made on a case by case basis.
**Consequences of Probation**

Students on probation will not be allowed to:

- Begin their fourth year externship;
- Participate in off-campus practicum;
- Count on-campus practicum hours toward graduation

**RETURN TO GOOD STANDING STATUS (RELEASE FROM PROBATION)**

**Academic**

Completion of the academic probation period is determined on a case by case basis. Determination of the student’s return to good standing will be based the recommendations of the program faculty.

Examples of how to return to the status of good standing:

- After retaking coursework, the student improves the earned grade(s) of C to B or better
- The student’s earned GPA is 3.0 or better during the two subsequent semesters, not to include a C or below

**Non-Academic**

Completion of non-academic probation period is determined on a case by case basis. Determination of the student’s return to good standing will be based the recommendations of the program faculty.

Example of how to return to the status of good standing:

- Demonstrating significant improvement and resolution of non-academic issues
- Resolution of professional misconduct issue and continued exemplary behavior
- Resolution of academic misconduct issue and continued exemplary behavior

Note: Students placed on academic or non-academic probation may be prohibited from beginning their 4th year externship unless they are able to be released from probation.

**DISMISSAL**

**Policies**

Students may be dismissed from the program for:

1. As pertaining to academic probation, failure to complete remediation requirements recommended by the faculty on the student action form
2. Earning three or more grades of C or lower
3. Failure to satisfactorily complete a repeated course, in which a grade of D or below was earned initially, at a level of B or above
4. Earning failing grades in more than one course during one semester
5. A grade of C or lower in any of the fourth year clinical externship courses
6. Demonstrate grave academic or non-academic misconduct
7. Failure to successfully complete the performance-based or comprehensive examinations, including a second and/or third attempt
8. Failure to demonstrate sufficient change of probationary behavior within one semester to be removed from non-academic probation
9. Lack of professional conduct and/or any behavioral patterns that may jeopardize the safety or well-being of patients or others
10. Unethical or illegal activity including, but not limited to, academic misconduct or violations of the AAA Code of Ethics (http://www.audiology.org/publications/documents/ethics/default.htm?PF=1), the ASHA Code of Ethics (http://www.asha.org/docs/html/ET2003-00166.html), HIPAA regulations/law, Arkansas Law or Federal law

Procedures

Decisions about dismissal are made on a case by case basis. Recommendation for dismissal requires a majority vote for dismissal by the audiology faculty. In all cases the Director of Audiology, in consultation with the Chairman of the department and the Associate Dean of Students and Academic Affairs in the College of Health Professions, will notify the student of the final decision by certified letter and email with receipt and read confirmation.

DEPARTMENTAL GRIEVANCE PROCEDURES

If a student feels that he/she has been, or is being, treated unfairly in an academic or clinical teaching situation, the student must follow the following procedures in voicing his/her grievance:

1. Consult with your academic advisor to review this policy together.
2. After seeking guidance from your academic advisor, choose one of the following two courses of action:
   a. Contact the faculty member teaching the course or directing the clinical activity. Let this individual know that you are concerned and precisely why. Document your efforts to resolve the situation. If the situation has been resolved, consult your academic advisor about the documentation necessary to protect your interests. Most problems can be resolved at this level.
   b. Inform your academic advisor that you feel it is not in your best interest to handle the situation directly and that you wish to pursue the matter further. Your academic advisor will assist you in preparing documentation of the problem. Contact the Director of Audiology to discuss the matter. The Director of Audiology will consult with the Chair of the Department as needed to help you resolve the issue.
3. If the matter is not resolved with your instructor (either for clinic or academic issues), or if your concern is with your academic advisor or the Director of Audiology, bring the matter before the Department Chair.

The Chair will resolve the matter in question to the student's satisfaction or direct the student to the CHP Catalog and/or CHP Student Handbook for information regarding the student appeals process. The formal grievance procedure is detailed in the CHP Student Handbook (http://www.uams.edu/chrp/catalog/).
STUDENT SERVICES

STUDENT ACCOMMODATION

Students are referred to the CHP Student Handbook, “Section 4.10 CHP DISABILITY POLICY” about accommodations for schoolwork.

1. Office of Educational Development
   University of Arkansas for Medical Sciences
   4301 W. Markham St., #595
   Little Rock, AR 72205
   501-686-5720 (Voice)
   http://www.uams.edu/oed/

2. UAMS Student Wellness Program
   201 Jack Stephens Drive
   Little Rock, AR 72205
   686-8408
   http://www.uams.edu/student%5Fmentalhealth/

3. UALR Disability Support Services
   2801 S. University, DSC 103
   Little Rock, AR 72204
   501-569-3143 phone (voice/tty)
   501-569-8068 fax
   http://www.ualr.edu/dssdept/

4. Counseling and Career Planning Services
   University of Arkansas at Little Rock
   417 Ross Hall
   Little Rock, AR 72204
   501-569-3185.

WELLNESS/MENTAL HEALTH SERVICES

The UAMS Student Wellness Program (SWP) is a preventative service created to provide short term, confidential assistance for students who are actively enrolled at UAMS (Little Rock Campus). The purpose of this service is to provide the necessary tools for students to achieve their fullest potential.

Students seek help for depression, anxiety, grief, relationship conflicts, academic difficulties and numerous other issues interfering with their maximal functioning. Seeking care through the service is absolutely confidential. The only exceptions to the strict code of confidentiality (as required by law) include homicidality (planning to kill someone else, or being so severely impaired that patients in your care are in jeopardy), suicidality (planning to kill self) and child abuse. Record keeping is also strictly confidential within the
student mental health clinic (not entered into the campus wide UAMS electronic medical record).

For short term treatment, there is no financial cost to students seeking care. The service is made possible through the support of the UAMS Chancellor, the Deans of the Colleges at UAMS and a portion of the student health fee. When utilization reports are generated, the number of students utilizing the service and the types of problems students seek help for may be reported. Specific identifying information about students is NOT released. Note: Should a student's treatment require medication, the cost of filling a prescription is up to the student. Unfortunately sample medications are not readily available any longer.

Due to the high volume of utilization, students are asked to keep an appointment once it is made or cancel as far as possible in advance to allow other students needing services timely access.

**Referrals for Long Term Difficulties:**

Students suffering from major mental illnesses and/or severe substance addiction requiring inpatient hospitalization and/or intensive long term care will be referred to a community mental health center, the UAMS Psychiatric Clinic, or to appropriate resources in the community. The cost for this level of care is the responsibility of the student (it is important to maintain health insurance coverage without lapse through school).

**Hours:**

The Student Wellness Clinic can be reached between **7:15 AM & 4:30 PM Monday through Friday**. Students are seen by appointment only. To schedule a confidential appointment, telephone Ms. Meshelle Helms, (program manager) or Ms. Sherry Bullard at **(501) 686-8408**. Both are trained to confidentially elicit information to allow for effective triage and scheduling with the most skilled clinician for a student’s particular problem. In the rare event of an **after-hours emergency**, telephone the UAMS operator at **(501) 686-7000** identify yourself as a UAMS student with an emergent problem and request the operator to page the UAMS Department of Psychiatry resident on call.

**Location:**

The Student Wellness Office Suite is located at 201 Jack Stephen’s Drive, on the street level. Parking is available in front of the clinic in spots reserved for the ‘Student Wellness Program’ **for the duration of the appointment. Unauthorized vehicles are ticketed and towed.** Visit [http://www.uams.edu/student_mentalhealth/map.pdf](http://www.uams.edu/student_mentalhealth/map.pdf) for a map to the SWO.

**Medical Director:** Angela Shy, M.D.

The University of Arkansas at Little Rock also offers counseling services for students enrolled on their campus. Assistance can be obtained by contacting the Counseling and Career Planning Services, 417 Ross Hall, 569-3185.
GENERAL DEPARTMENTAL INFORMATION

BUILDING HOURS

The building is open Monday through Friday from 8:00 AM to 6:00 PM and other hours by appointment. The clinic must be locked nights and weekends; however a key that allows entry into the audiology portion of the clinic is available from the department chairman.

BULLETIN BOARDS

Notices of general and specific interest to students, faculty and staff are posted on the bulletin boards, in the clinic office and in the student study area. Students should check these notice areas daily. The Au.D. program has a dedicated bulletin board for student use in the hall near the student workroom.

COPYING EQUIPMENT

Students may NOT use the office copying equipment for personal use. The equipment is to be used for clinic and departmental business only with approval from faculty. Copying equipment for personal student use is available at various sites around the UALR campus. If a faculty member asks a student to make copies, the faculty member must complete a Copier Usage Authorization Slip which is then given to the clinic secretary. In addition each student is assigned a copy machine code and has to input this 4-digit code in order to make copies.

COMPUTER AVAILABILITY

Computers for student use are available in the student workroom, Room 674. These computers are connected to a laser printer, which is to be used only for clinic-related printing. No class (e.g., PowerPoint notes, journal articles) or personal materials may be printed on this machine.

Students may also use computers and printers located in the UALR Library Computer Lab (104); the UALR Student Union Computer Lab (A105); or computer labs at UAMS.

DEPARTMENT LIBRARY/STUDENT LOUNGE

The department’s library is housed in the student workroom, 674. This library has been provided for student use by donations from the faculty and other professionals. Books can be checked out for three-day periods. Please show courtesy to fellow students by returning books promptly. A microwave oven and small refrigerator are also available in this room for student use. Students are expected to maintain this area including cleaning appliances as they are needed.
FACULTY MAILBOXES

Faculty mailboxes are in the departmental office. Submit paperwork and other communications to your instructors using these mailboxes.

STUDENT LOCKERS

Student lockers are located in the student work area and are available for use only by AUSP students enrolled in practicum. Priority for use is given to graduate students. Students are required to provide their own locks for the lockers. In May, all lockers must be cleaned out and locks removed. Any student who fails to remove a lock from a locker will have the lock cut off. Locker sharing is required due to the large number of students enrolled in the program.

STUDENT MAILBOXES

Mailboxes are provided for all Au.D. students in the student study area and are for distribution of mail, phone messages, notes, notices and returned assignments. It is important to check your mailbox regularly.

STUDENT EMAIL

UAMS provides a free email account for each graduate student. The department has designated the UAMS email account as the official method of electronic communication between students and the department and the faculty. If an official departmental email is sent, it will be sent to your UAMS account and you will be responsible for knowing that information. Therefore, it is important to check your university email account every day.

OFFICE SUPPLIES

Students are not to remove supplies or materials from the secretaries' desks, the clinic office, or the office supply closet without permission.

HEALTH RELATED ISSUES

IMMUNIZATIONS AND TUBERCULOSIS TESTING

Proof of immunization for tetanus and diphtheria within the last ten years as well as immunizations against measles, mumps and rubella is required of all entering students prior to registration. All students must provide proof of two immunizations against Hepatitis B before the end of the first semester of the program. All students are required to have a PPD (TB skin) test done within one year prior to initial registration as a student at UAMS. (Refer to current CHP Catalog for more information).
**PROFESSIONAL LIABILITY INSURANCE COVERAGE**

All entering students are required to purchase and maintain professional liability insurance. Insurance coverage must be purchased through UAMS at fall semester registration at a cost of $13.00 per academic year.

**PROFESSIONAL MEMBERSHIP, DEVELOPMENT AND SERVICE**

One key attribute of a professional is participation in associations and societies which influence the direction, education and practice of the members of a profession. In order to develop this aspect of professionalism, the student will be expected to maintain active student membership in at least one appropriate professional association or society during their tenure in the Doctor of Audiology program. Membership in the Student Academy of Audiology, the National Speech-Language-Hearing Student Association, or student membership in the American Academy of Audiology, the American Speech-Language-Hearing Association, the Arkansas Academy of Audiology, or the Arkansas Speech-Language-Hearing Association is strongly encouraged to meet this requirement. (See Appendices H and I for professional organization and governmental information.)
Appendix A:

AMERICAN SPEECH LANGUAGE HEARING ASSOCIATION: SCOPE OF PRACTICE

AND

AMERICAN ACADEMY OF AUDIOLOGY: SCOPE OF PRACTICE
Professional Roles and Activities

ASHA Professional Roles and Activities (taken from the 2004 Scope of Practice Statement)

Audiologists serve a diverse population and may function in one or more of a variety of activities. The practice of audiology includes:

A. Prevention

1. Promotion of hearing wellness, as well as the prevention of hearing loss and protection of hearing function by designing, implementing, and coordinating occupational, school, and community hearing conservation and identification programs;
2. Participation in noise measurements of the acoustic environment to improve accessibility and to promote hearing wellness.

B. Identification

1. Activities that identify dysfunction in hearing, balance, and other auditory-related systems;
2. Supervision, implementation, and follow-up of newborn and school hearing screening programs;
3. Screening for speech, orofacial myofunctional disorders, language, cognitive communication disorders, and/or preferred communication modalities that may affect education, health, development or communication and may result in recommendations for rescreening or comprehensive speech-language pathology assessment or in referral for other examinations or services;
4. Identification of populations and individuals with or at risk for hearing loss and other Auditory dysfunction, balance impairments, tinnitus, and associated communication impairments as well as of those with normal hearing;
5. In collaboration with speech-language pathologists, identification of populations and individuals at risk for developing speech-language impairments.

C. Assessment

1. The conduct and interpretation of behavioral, electroacoustic, and/or electrophysiologic methods to assess hearing, Auditory function, balance, and related systems;
2. Measurement and interpretation of sensory and motor evoked potentials, electromyography, and other electrodiagnostic tests for purposes of neurophysiologic intraoperative monitoring and cranial nerve assessment;
3. Evaluation and management of children and adults with Auditory-related processing disorders;
4. Performance of otoscopy for appropriate Audiological management or to provide a basis for medical referral;
5. Cerumen management to prevent obstruction of the external ear canal and of amplification devices;
6. Preparation of a report including interpreting data, summarizing findings, generating recommendations and developing an Audiology treatment/management plan;
7. Referrals to other professions, agencies, and/or consumer organizations.

D. Rehabilitation

1. As part of the comprehensive Audiology (re)habilitation program, evaluates, selects, fits and dispenses hearing assistive technology devices to include hearing aids;
2. Assessment of candidacy of persons with hearing loss for cochlear implants and provision of fitting, mapping, and Audiology rehabilitation to optimize device use;
3. Development of a culturally appropriate, Audiology rehabilitative management plan including, when appropriate:
   a. Recommendations for fitting and dispensing, and educating the consumer and family/caregivers in the use of and adjustment to sensory aids, hearing assistive devices, alerting systems, and captioning devices;
   b. Availability of counseling relating to psychosocial aspects of hearing loss, and other Auditory dysfunction, and processes to enhance communication competence;
   c. Skills training and consultation concerning environmental modifications to facilitate development of receptive and expressive communication;
   d. Evaluation and modification of the Audiology management plan.
4. Provision of comprehensive Audiology rehabilitation services, including management procedures for speech and language habilitation and/or rehabilitation for persons with hearing loss or other Auditory dysfunction, including but not exclusive to speechreading, Auditory training, communication strategies, manual communication and counseling for psychosocial adjustment for persons with hearing loss or other Auditory dysfunction and their families/caregivers;
5. Consultation and provision of vestibular and balance rehabilitation therapy to persons with vestibular and balance impairments;
6. Assessment and non-medical management of tinnitus using biofeedback, behavioral management, masking, hearing aids, education, and counseling;
7. Provision of training for professionals of related and/or allied services when needed;
8. Participation in the development of an Individual Education Program (IEP) for school-age children or an Individual Family Service Plan (IFSP) for children from birth to 36 months old;
9. Provision of in-service programs for school personnel, and advising school districts in planning educational programs and accessibility for students with hearing loss and other Auditory dysfunction;
10. Measurement of noise levels and provision of recommendations for environmental modifications in order to reduce the noise level;
11. Management of the selection, purchase, installation, and evaluation of large-area amplification systems.

E. Advocacy/Consultation

1. Advocacy for communication needs of all individuals that may include advocating for the rights/funding of services for those with hearing loss, Auditory, or vestibular disorders;
2. Advocacy for issues (i.e., acoustic accessibility) that affect the rights of individuals with normal hearing;
3. Consultation with professionals of related and/or allied services when needed;
4. Consultation in development of an Individual Education Program (IEP) for school-age children or an Individual Family Service Plan (IFSP) for children from birth to 36 months old;
5. Consultation to educators as members of interdisciplinary teams about communication management, educational implications of hearing loss and other Auditory dysfunction, educational programming, classroom acoustics, and large-area amplification systems for children with hearing loss and other Auditory dysfunction;
6. Consultation about accessibility for persons with hearing loss and other Auditory dysfunction in public and private buildings, programs, and services;
7. Consultation to individuals, public and private agencies, and governmental bodies, or as an expert witness regarding legal interpretations of audiology findings, effects of hearing loss and other Auditory dysfunction, balance system impairments, and relevant noise-related considerations;
8. Case management and service as a liaison for the consumer, family, and agencies in order to monitor Audiologic status and management and to make recommendations about educational and vocational programming;
9. Consultation to industry on the development of products and instrumentation related to the measurement and management of Auditory or balance function.

F. Education/Research/Administration

1. Education, supervision, and administration for audiology graduate and other professional education programs;
2. Measurement of functional outcomes, consumer satisfaction, efficacy, effectiveness, and efficiency of practices and programs to maintain and improve the quality of Audiologic services;
3. Design and conduct of basic and applied Audiologic research to increase the knowledge base, to develop new methods and programs, and to determine the efficacy, effectiveness, and efficiency of assessment and treatment paradigms; disseminate research findings to other professionals and to the public;
4. Participation in the development of professional and technical standards;
5. Participation in quality improvement programs;
6. Program administration and supervision of professionals as well as support personnel.
1. 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 interprofessional 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.

2. 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 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.
3. 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:

A. 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.

B. 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.

C. 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 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 the 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 post surgical 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 psycho-social 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.

D. 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 protection, employee education, and the training and supervision of non-audiologists performing hearing screening in the industrial setting.

E. 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.

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

G. 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 in order to reflect changing clinical demands of audiologists and in order to keep pace with the changing scope of practice reflected by these changes and innovations in this specialty.
Appendix B:
Essential Functions Document and
Signature Page

University of Arkansas at Little Rock
University of Arkansas for Medical Sciences
Department of Audiology and Speech Pathology

Essential Functions of Candidates for Program Continuance

INTRODUCTION
The graduate degrees in Audiology (Au.D.) and Speech Pathology (M.S.) are recognized as broad degrees requiring the acquisition of general knowledge and basic skills in all applicable domains. The core curriculum is designed to support student attainment of the academic and clinical competencies needed for graduation, optional certification, and licensure. The education of speech-language pathologists and audiologists requires assimilation of knowledge, acquisition of skills, and development of judgment through client care experiences in preparation for independent and appropriate decisions required in practice. The current practices of speech-language pathology and audiology emphasize collaboration among audiologists, speech-language pathologists, other health care and education professionals, the client, and the client’s family.

POLICY
The accredited graduate programs in speech-language pathology and audiology of the University of Arkansas at Little Rock (UALR) / University of Arkansas for Medical Sciences (UAMS), Department of Audiology and Speech Pathology (ASP) adhere to the standards set by the American Speech-Language-Hearing Association (ASHA). Within ASHA standards, the AUD program has the freedom and ultimate responsibility for: the selection of students; the design, implementation, and evaluation of the curriculum; the evaluation of student progress; and, the determination of who should be awarded a degree.

The AUD faculty has a responsibility for the welfare of clients tested, treated, or otherwise affected by students enrolled in the programs. The department has the responsibility to the public to assure that its graduates can become fully competent audiologists and speech-language pathologists, capable of delivering quality care in a timely manner and preserving the well-being of the clients they serve. Thus, it is important that persons admitted, retained, and graduated possess the intelligence, integrity, compassion, humanitarian concern, and the physical and emotional capacity necessary to practice speech-language pathology or audiology.

The Department of Audiology and Speech Pathology, as part of the College of Professional Studies (UALR) and the College of Health Professions (UAMS), is committed to the principle of equal opportunity. The Universities, Colleges, and the Department do not discriminate on the basis of race, color, creed, religion, national origin, gender, sexual orientation, age, marital status, or disability. When requested, the Universities, Colleges,
and the Department will provide reasonable accommodations to otherwise qualified students with properly certified disabilities. The AUD faculty has responsibility for the welfare of students in the department. In order to fulfill this responsibility, the department has established academic standards and minimum essential requirements that must be met, with or without reasonable accommodations, in order to participate in the program and graduate.

**ESSENTIAL FUNCTIONS**

In order to acquire the knowledge and skills requisite to the practice of speech-language pathology or audiology to function in a broad variety of clinical situations, and to render a wide spectrum of client care, students must have essential skills and attributes in five areas: communication, motor, intellectual-cognitive, sensory-observational, and behavioral-social. These skills enable a student to meet graduate and professional requirements as measured by state and national credentialing agencies. Many of these skills can be learned and developed during the course of the graduate program through coursework and clinical experience. Failure to meet or maintain essential functions may result in action against the student, including, but not limited to, dismissal from the program.

**Communication**

A student must possess adequate communication skills to:

- Speak, hear and observe others for the purpose of eliciting and/or perceiving information.
- Communicate effectively and efficiently in oral and written forms.
- Modify their communication style to meet diverse communicative needs.

**Motor**

A student must possess adequate motor skills to:

- Execute movements reasonably required to move from area to area, maneuver in small places, use equipment, materials and technology (i.e. microphones, hearing aids, computers, AAC devices, etc.) as needed to provide clients with appropriate general care.
- Access transportation to clinical and academic placements.
- Participate in classroom and clinical activities for the defined workday.

**Intellectual / Cognitive**

A student must possess adequate intellectual, ethical, emotional, and cognitive skills to:

- Achieve academic and clinical knowledge and skills.
- Participate in clinical settings and achieve the levels of competence required by the academic and clinical faculty and off-campus supervisors.
- Solve problems critical to the practice of speech-language pathology and audiology.
- Self-evaluate, identify, and communicate limits of one’s own knowledge and skills.
- Identify and utilize resources in order to increase knowledge and skills.
• Utilize detailed written and verbal instruction in order to make unique and independent decisions.
• Measure, calculate reason, analyze, and synthesize as needed in the academic and clinical arenas.

**Sensory / Observational**
A student must possess adequate senses of vision and hearing to:
• Accurately observe clients and interpret and analyze their behaviors.
• Adequately treat clients and use equipment appropriately.

**Behavioral / Social**
A student must possess adequate behavioral and social attributes to:
• Display mature, empathetic, and effective professional relationships by exhibiting compassion, integrity, and concern for others.
• Recognize and show respect for individuals of different ages, genders, races, religions, sexual orientations, cultural and socioeconomic backgrounds, and disabilities.
• Recognize when a client’s family does or does not understand the clinician’s written and/or verbal communication.
• Maintain generally good emotional and mental health to fully utilize their intellectual abilities and exercise good judgment including prompt completion of all academic and clinical responsibilities.

Candidates for the Master of Science in Communicative Disorders (M.S.) and/or the Doctor of Audiology (Au.D.) who have been accepted for admission will be required to verify that they understand and meet these essential functions. Admission decisions are made on the assumption that each candidate can meet the essential functions and fulfill essential functions without consideration of disability.

The *Disability Support Services* office at UALR will review a student’s request for accommodation and confirm that the stated condition qualifies as a disability under applicable laws.

If an applicant states she/he can meet the essential functions with accommodation, then the department will determine whether it agrees that the student can meet the essential functions with reasonable accommodation; this includes a review of whether the accommodation would jeopardize client safety or the educational process of the student or the institution, including all coursework and internships/practicum placements deemed essential to graduation. At any time in the course of a student’s enrollment in the department, should their needs change; the student can request accommodation through the *Disability Support Services* office.

*Disability Support Services* and the Department of Audiology and Speech Pathology will jointly decide what accommodations are suitable and possible in terms of reasonable accommodation, and will render the person capable of performing all essential functions established by the program.
Reference: Adapted from the Council of Academic Programs in Communication Sciences and Disorders (2007)
Rev. 8-12-09

Please sign one of the following Essential Functions statements:

Statement for Students who are NOT Requesting Accommodations

I certify that I have read and understand the Essential Functions of Candidates for Program Admission and Continuance listed above and I believe to the best of my knowledge that I meet each of these standards without accommodation. I understand that if I am unable to meet these standards, I may be dismissed from the program.

_________________________________ / _____ / ____
Signature of Applicant

_________________________________
Printed Name of Applicant

Statement for Students Requesting Accommodations

I certify that I have read and understand the Essential Functions of Candidates for Program Admission and Continuance listed above and I believe to the best of my knowledge that I can meet each of these standards with certain accommodations. I will contact the Disability Support Services Office to determine what accommodations may be available. I understand that if I am unable to meet these standards with or without accommodation, I may be dismissed from the program.

_________________________________ / _____ / ____
Signature of Applicant

_________________________________
Printed Name of Applicant
Printed Name
Appendix C:

Audiology Guide to Professional Conduct

and

CHP Policy on Professionalism and Professional Conduct
AUDIOLOGY GUIDE TO PROFESSIONAL CONDUCT

Professionalism relates to the intellectual, ethical, behavioral and attitudinal attributes necessary to perform as a health care provider. Examples of professional behavior are listed in the CHP Student Handbook in the section entitled "Noncognitive Performance Standards." These examples should be reviewed by the student; however, professional behavior is not limited to these examples. In addition, the student will be expected to:

Attention

1. Demonstrate awareness of the importance of learning by asking pertinent questions, identifying areas of importance in clinical practice and reporting and recording those areas.
2. Avoid disruptive behavior in class, lab and clinic, such as talking or other activity which interferes with effective teaching and learning.

Participation

1. Complete assigned work and prepare for class, laboratory, and clinical objectives prior to attending.
2. Participate in formal and informal discussions, answer questions, report on experiences, and volunteer for special tasks and research.
3. Initiate alteration in patient care techniques when appropriate via notification of instructors, supervisors and preceptors.

Dependability and Appearance

1. Attend and be punctual and reliable in completing assignments with minimal instructor supervision.
2. Promote a professional demeanor by appropriate hygiene, grooming and attire.

Communication

1. Demonstrate a pleasant and positive attitude when dealing with patients and co-workers by greeting them by name, approaching them in a non-threatening manner, and setting them at ease.
2. Explain procedures clearly to the patient.
3. Ask patients how they feel and solicit patient comments regarding the patient's overall condition.
4. Communicate clearly to other professionals regarding patient status, using appropriate charting, oral communication and the established chain of command.
5. Demonstrate a pleasant and positive attitude when interacting with co-workers, instructors, faculty, supervisors and preceptors.
Organization

1. Display recognition of the importance of interpersonal relationships with students, faculty, and other members of the health care team by acting in a cordial and pleasant manner.
2. Work as a team with fellow students, instructors, supervisors and preceptors in providing patient care.
3. Organize work assignments effectively.
4. Collect information from appropriate resources.
5. Devise or suggest new techniques that promote patient welfare or increase efficiency.

Safety

1. Verify identity of patients before initiating therapeutic action.
2. Interpret written information and verbal directions correctly.
3. Observe and report significant changes in patient's condition promptly to appropriate person(s).
4. Act to prevent accidents and injury to patients, other personnel and self.
5. Transfer previously learned theory and skills to new/different patient situations.
6. Request help from faculty/staff when unsure.
7. Comply with university and off-campus site guidelines for performance.

Examples of critical errors in professional conduct and judgment include but are not limited to:

1. Failure to place the patient's welfare as first priority.
2. Failure to maintain physical, mental, and emotional composure in all situations.
3. Consistent ineffective, inefficient use of time in clinical setting.
4. Failure to be honest with patients, faculty, and colleagues.
5. Academic misconduct in any form.
CHP POLICY ON PROFESSIONALISM AND PROFESSIONAL CONDUCT

Policy on Professionalism and Professional Conduct
(Effective 10.21.2010)
College of Health Professions
University of Arkansas for Medical Sciences

Purposes of Policy

Professional conduct and professionalism are important in education and the health care professions. Individuals seeking service from professionals in health care or education must be able to trust their provider. This policy establishes standards of professionalism and professional behavior for students, staff, and faculty in the College of Health Professions (CHP).

The policy is meant to be consistent with University-wide policies regarding student, staff, and faculty conduct. It does not supersede any policy established by the University of Arkansas for Medical Sciences.

Fundamental Attributes of Professionalism

Professionalism in health care and education is based upon values that reflect the very special nature of the interaction between a provider and a patient, client, or family and between a teacher and student. Individuals confronting illness, social disruption, or other life-changing challenges are vulnerable. Individuals learning the knowledge, skills, and attitudes of a profession face many new challenges. Patients and students rely upon professionals to address their needs in an expert, professional manner. All who work with patients and their families and those who work with students are expected to act in accordance with the standards of professional conduct outlined below.

There are core values of professionalism that are universal and apply to those in health care professions and in education. These include, but are not limited to, moral values such as honesty, integrity, and trustworthiness; values that are specific to one’s profession (e.g., confidentiality), to society (e.g., commitment to excellence), to oneself (e.g., self-reflection), and to humanistic values such as empathy and compassion.

Standards for Professional Conduct

Professional behaviors and professionalism are critical to the effective education of allied health students and the practice of their respective professions. All students, staff, and faculty in the College of Health Professions are expected to demonstrate high standards of professional behavior in all educational settings, including classrooms and laboratories, professional and clinical sites, and in non-educational settings. Examples of such behavior include, but are not limited to:

This policy is partially based upon the “Policy on Professionalism and Professional Conduct” of the Skaggs School of Pharmacy of the University of Montana.2
1. Honesty and integrity:
   a. Act with honesty or truthfulness
   b. Demonstrate integrity or firm adherence to moral principles in academic matters and professional relationships.

2. Trustworthiness:
   a. Demonstrate dependability to carry out responsibilities.

3. Empathy and cultural diversity:
   a. Differentiate appropriate interpersonal interaction with respect to culture, race, religion, ethnic origin, gender, and sexual orientation.
   b. Demonstrate regard for differing values and abilities among peers, other health care professionals, and patients.
   c. Demonstrate an ability to share someone else’s feelings or experiences by imagining what it would be like to be in his/her situation

4. Communication:
   a. Communicate effectively with faculty, staff, students, patients, and other professionals.
   b. Demonstrate confidence in actions and communications.
   c. Formulate written communications with professional content and tone.
   d. Ensure the confidentiality of communications that contain personal information

5. Punctuality:
   a. Demonstrate punctuality in academic and professional environments.
   b. Adhere to established times for classes, laboratories, professional experiences, and meetings.
   c. Comply with established oral and written deadlines.
   d. Respond to requests (written, oral, e-mail, telephone) in a timely fashion.

6. Professional behavior:
   a. Display professional behavior toward faculty, staff, students, patients, and other health professionals in all settings, including but not limited to the classroom, laboratory, and clinical settings.
   b. Show regard for persons in authority in classroom, laboratory, and clinical settings.
   c. Exhibit fitting behavior when representing the College of Health Professions in extracurricular activities and professional meetings.

7. Ethical standards:
   a. Demonstrate high moral standards related to allied health education, practice, research, and service. These standards include, but are not limited to, telling the truth, maintaining confidentiality, and respecting individuals.

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1 The Human Resources Employee Relations Basic Code of Conduct may be found at http://uams.edu/AdminGuide/WIN04401.html
8. Social contracts:
   a. Conduct interactions with patients and their families in a professional manner.
   b. Relate to patients and their families in a caring and compassionate manner.
   c. Recognize instances when one’s values and motivation are in conflict with those of the patient and his/her families, and proceed in a manner that is patient focused. If there is a conflict of values or motivations that you think may involve something illegal, unethical, or unprofessional, seek guidance from your supervisor, instructor, or chairman.
   d. Identify to one’s supervisor any activity that is dangerous to the welfare of a patient or colleague.
   e. Demonstrate an attitude of service by putting others’ needs above one’s own.
   f. Comply with federal, state, university, school, and institutional requirements regarding confidentiality of information.

9. Negotiation, compromise, and conflict resolution:
   a. Demonstrate good skills of conflict resolution.
   b. Formulate constructive evaluation of others’ performance.
   c. Display a positive attitude when receiving constructive criticism.

10. Lifelong improvement and professional competence:
    a. Produce quality work in academic and clinical settings.
    b. Take responsibility for learning.
    c. Demonstrate continuous professional development by identifying what should be learned and how one might assess his or her competence in new knowledge and skills.

11. Time management and decision-making:
    a. Utilize time efficiently.
    b. Demonstrate self-direction in completing assignments.
    c. Demonstrate accountability for decisions.

12. Appearance:
    a. Maintain a professional appearance when representing the College of Health Professions.
    b. Maintain personal hygiene and grooming appropriate to the setting.

Adherence to professional standards is an academic requirement for graduation from the College of Health Professions and a performance standard for staff and faculty. Failure to meet these standards will result in disciplinary action, which may include dismissal from the academic program and the college.
Resolution of Alleged Incidents of Misconduct

Observation of Unprofessional Behavior

When a member of the CHP community (student, staff, or faculty member) observes inappropriate behavior that represents a possible violation of expected professional standards, he or she will meet with the individual directly to discuss the misconduct. If both parties agree that a satisfactory resolution results from the meeting, no further action is required. If the observer is unable to meet the individual, the matter should be referred directly to the supervisor/chairman.

If the observer is not able to meet with the individual or, after discussing the issue with the individual, the observer thinks that a satisfactory resolution has not been reached, he or she will notify in writing either the supervisor of the staff or faculty member or the department chairman of the student and describe the incident, the alleged breach of professional conduct, and the failure to obtain resolution. The supervisor/chairman will discuss the nature of the incident with the individual, the observer, and other students, staff, or faculty as appropriate to assess the evidence of misconduct and to develop a remediation plan or course of action. If the evidence is not considered sufficient to pursue the allegation, the incident is considered to be resolved. If the evidence is considered sufficient, the chairman/supervisor will notify in writing the Associate Dean for Academic and Student Affairs (for student conduct) or the Associate Dean for Administrative Affairs (for employee conduct) the nature of the incident and the corrective steps recommended. The associate dean will review the report and the recommendations by the supervisor/chairman to ensure that policies and procedures have been followed and that the rights, including due process, of all parties involved have been preserved.

The chairman or supervisor will meet with the student or employee and discuss the breach of professional conduct and the proposed remediation plan or plan of action. Students and employees will be given at least five (5) week days’ notice of the meeting. The notice will be in writing, and mailed to the student’s or employee’s address of record. The notice will contain the time, place, and nature of the meeting, and a brief description of the misconduct. The notice will also inform the student or employee of his/her right to present witnesses on his/her behalf. The accused student or employee must notify the chairman or supervisor about his/her intention to present such witness(es) at least two days prior to the meeting. The chairman or supervisor may have another faculty/staff member present to validate the proceedings in the meeting with the student or employee. The remediation plan may include placing the student or employee on probationary status, mandating counseling, or other actions designed to emphasize the importance of professional conduct and to educate the student or employee about professional behavior. The course of action may also include dismissal or termination. The supervisor or chairman’s findings and actions shall be recorded in the individual’s file.

At the conference with the student or employee, the chairman or supervisor will:

a. Present the accusation;

b. Hear the explanation, admission, and/or denial of the alleged act of misconduct by the accused student or employee;

c. Discuss the seriousness of the alleged act of misconduct, the implications, and the process for resolution of the allegation;
d. Inform the student or employee of the probable remediation plan previously determined by the chairman or supervisor, for the alleged misconduct.

If the student or employee admits to the allegation and agrees with the recommended remediation plan, the chairman or supervisor will inform the student or employee in writing of the remediation plan to be imposed. The chairman or supervisor will communicate to the student or employee in a written report of the incident and remediation plan. The report will be signed by the chairman or supervisor and the student or employee and forwarded to the Dean of the CHP for review. The Dean may approve or modify the remediation plan recommended in the report but shall not increase the severity of the remediation plan. The Dean’s decision must be communicated to the student and faculty member within five (5) week days after receiving the report, at which time the remediation plan for the admitted misconduct is implemented.

Appeal Process for Students

If the student disagrees with the recommended remediation plan, the student may appeal the decision in writing to the Dean of the CHP, within five (5) week days after being informed of the decision by the chairman. The Dean’s decision on the appeal will be based on the student’s written reasons for disagreement and other pertinent evidence, as well as the written report cited above. The Dean, in ruling on the appeal, may enlist the aid of the Professional Conduct Advisory Panel. The Dean’s decision is final and must be communicated to the student within 15 week days from the date the appeal was received by the Dean. If the Dean’s decision is to implement the remediation plan, it is implemented at the time of notification.

If the student denies the allegation at the time of the initial meeting with the chairman, the chairman and the student will each prepare a written report to be forwarded to the Dean. The reports shall include a description of the alleged incident of misconduct, the process used to address the allegation, and the outcome of the meeting. The student’s written report should include a clear statement of his/her rebuttal to the allegation. The chairman’s report should include a description of the alleged act of misconduct and all evidence related to the allegation. These written reports are to be signed by the authors and submitted to the Dean within five (5) week days following the meeting between the chairman and accused student.

The Dean’s decision will be based on the student’s and chairman’s written reports and other available relevant evidence. The Dean of the CHP has the prerogative of establishing a Professional Conduct Advisory Panel, as the need arises, to consider the issues related to alleged incidences of professional misconduct and/or the proposed remediation plans. The purpose of the Professional Conduct Advisory Panel is to insure full investigation of incidences of alleged misconduct and/or the remediation plans when use of the informal process, described previously, has not resolved an issue to the student’s satisfaction. The panel shall be advisory to the Dean, and its recommendations shall not be binding upon him/her. The Dean’s decision is final and must be communicated to the student within fifteen (15) week days from the date the appeal was received by the Dean. Following this notification, the applicable remediation plan is implemented.
The composition of the Professional Conduct Advisory Panel shall be:

1. A chairman appointed by the Dean
2. Two faculty members selected by the Dean. One faculty member shall be from the department in which the accused student is enrolled, but he/she shall not be involved in the allegation. The other faculty member shall be from another department of the CHP. If it is not possible to identify a faculty member in the student’s department who is not involved in the allegation, both faculty members shall be appointed from other departments.
3. Two students selected by the Dean. The students shall be in good standing. One student shall be selected from the department, in which the accused student is enrolled, but not from the same class as the accused student. The second student shall be from another department in the CHP. In the event the department has only one class, both students will be selected from other departments.

The primary duty of the Professional Conduct Advisory Panel shall be to review as rapidly and discreetly as possible all information provided about the alleged incident of misconduct and to seek other facts deemed necessary to insure adequate review of the allegation and/or recommended remediation plan. The student and the chairman involved in the allegation may be present and hear all witnesses. Confidentiality is expected from all Panel members and others involved. At the time the Panel is convened for this purpose, a reasonable deadline by which the Panel’s work must be completed will be established by the Dean, recognizing the overall 15-day deadline. At the completion of its review, a written report of the Committee’s process of review, findings, and its recommendations shall be forwarded to the Dean of the CHP, thereby completing the work of the Panel. Following the review of the findings and recommendations of the Professional Conduct Advisory Panel, the Dean of the CHP shall make the final decision.

Appeal Process for Staff
If the employee disagrees with the allegation and/or remediation plan proposed by his/her supervisor, the employee may submit a grievance in accordance with the general grievance procedure for non-academic employees of UAMS (See attached Grievance Procedure from the UAMS Staff Handbook). The employee will grieve the decision to the next level above his/her supervisor.

Appeal Process for Faculty
If a faculty member disagrees with the allegation and/or the remediation plan proposed by his/her supervisor, the faculty member may grieve to the Dean by following the procedures outlined in Section G-3 of the 1996 UAMS Faculty Handbook (See attached Academic Employee Grievance Procedure from the UAMS Faculty Handbook).

Immediate Responses
If the observer believes that an individual has committed a serious breach of professional conduct that may place another individual, the College, or a clinical site in jeopardy, he or she will refer the matter directly to the Associate Dean for Academic and Student Affairs or the Associate Dean for Administrative Affairs who will take appropriate action as defined under the Policy On Administrative Actions (See the CHP Handbook).
Appendix D: Assurances

Honor Code

Ausp Confidentiality Statement
CHP Confidentiality Statement
CHP Professionalism Signature Page
Essential Functions Signature Page
Au.D. Academic Handbook Statement
Au.D. Clinic Handbook Statement
Au.D. Practicum and Externship Handbook Statement
DEPARTMENT OF AUDIOLOGY AND SPEECH PATHOLOGY

STUDENT HONOR CODE

Whereas, the degree program in audiology and speech-language pathology is dual purpose – academic and professional – it is designated to produce graduates who are competent both as scientists and clinicians. For the health of the field, it is imperative that its member work in the best interest of the population they serve and for the general society. In order to achieve this goal, members must be trusted to work independently. That is, competent scientists and professionals must work on their honor. It follows that students striving to become honorable scientists and professionals must be trustworthy and must be able to perform on their honor.

Therefore, I, _________________________, pledge that I will work on my honor in all facets of the program – class work, practicum, research – to accomplish the assignments, tasks, and activities which may be required of me. I understand that academic, scientific, or professional dishonesty will result in my dismissal from the program.

Student _______________________________ Date_________________

Department Chair________________________ Date_________________
AUSP CONFIDENTIALITY STATEMENT

UALR/UAMS DEPARTMENT OF AUDIOLOGY & SPEECH PATHOLOGY
UALR Speech and Hearing Clinic
2801 South University, Suite 600
Little Rock, AR 72204
501-569-3155 Phone 501-569-3157 Fax

I understand that, as a related part of my coursework, supervised observation practicum, and supervised practicum, I will have access to confidential information regarding clients of the UALR Speech and Hearing Clinic and other facilities.

I promise NOT to violate the privacy of any client by:

1. discussing information with persons other than faculty, supervisors, and other student clinicians for the purpose of clinical education.

2. placing confidentiality of information at risk by removing client files from the clinic or failing to implement appropriate procedures for reviewing files*.

I understand that a breach of confidentiality will result in serious penalties as determined by the faculty and administration of the program or sponsoring institutions. Penalties could include dismissal from the UALR/UAMS Department of Audiology and Speech Pathology.

My signature below indicates that I have read this statement carefully. In addition, the statement and its ramifications have been explained by a faculty member in the context of either practicum meetings or classes.

__________________________________________
Student Signature                      Date

______________________________________
Printed Name

*Procedures for reviewing files are posted in the clinic office.
Patients are entitled to confidentiality with regard to their medical and personal information. The right to confidentiality of medical information is protected by state law and now by federal privacy regulations known as the Health Insurance Portability and Accountability Act (HIPAA). Those regulations specify substantial penalties for breach of patient confidentiality.

1. All patient medical and personal information is confidential information regardless of my educational or clinical setting(s) and must be held in strict confidence. This confidential information must never become casual conversation anywhere in or out of a hospital, clinic or any other venue. Information may be shared with only health care providers, supervising faculty, hospital or clinic employees, and students involved in the care or services to the patient or involved in approved research projects who have a valid need to know the information.

2. Under strict circumstances, upon receipt of a properly executed medical authorization by the patient or a subpoena, medical information may be released to the requesting party. Inquiries regarding the appropriateness of the authorization or subpoena should be directed to the medical records department, the Hospital’s counsel or the University’s Office of Legal Counsel at 501-686-5699 or 501-603-1379, depending on the situation.

3. Hospital Information System’s user codes/passwords are confidential. Only the individual to whom the code/password is issued should know the code. No one may attempt to obtain access through the computer system to information to which s/he is not authorized to view or receive. If you are aware that another individual knows your code/password, it is your responsibility to request a new user code/password.

4. If a violation of this policy occurs or is suspected, report this information immediately to your supervising faculty.

5. Violations of this policy will result in disciplinary action up to and including termination from the program. Intentional misuse of protected health information could also subject an individual to civil and criminal penalties.

I, _______________________________, acknowledge receipt of this Confidentiality Policy. I have read the policy and agree to abide by its terms and requirements throughout my education/training at UAMS and as a part of my participation in patient care activities.

Date received and reviewed_____________________________________________________

Signature_____________________________________________________________
Adherence to professional standards is an academic requirement for graduation from the College of Health Professions and a performance standard for students, staff and faculty. Failure to meet these standards will result in disciplinary action, which may include dismissal from the academic program and the college.

I, _____________________________, acknowledge receipt of the CHP Policy on Professionalism and Professional Conduct. I have read the policy and agree to abide by its terms and requirements throughout my education/training at UAMS and as a part of my participation in patient care activities.

Date received and reviewed_______________________________________________

Signature_____________________________________________________________

Printed Name__________________________________________________________
Please sign one of the following Essential Functions statements:

Statement for Students who are NOT Requesting Accommodations

I certify that I have read and understand the Essential Functions of Candidates for Program Admission and Continuance listed above and I believe to the best of my knowledge that I meet each of these standards without accommodation. I understand that if I am unable to meet these standards, I may be dismissed from the program.

______________________________ /   /  
Signature of Applicant          Date

______________________________
Printed Name of Applicant

Statement for Students Requesting Accommodations

I certify that I have read and understand the Essential Functions of Candidates for Program Admission and Continuance listed above and I believe to the best of my knowledge that I can meet each of these standards with certain accommodations. I will contact the Disability Support Services Office to determine what accommodations may be available. I understand that if I am unable to meet these standards with or without accommodation, I may be dismissed from the program.

______________________________ /   /  
Signature of Applicant          Date

______________________________
Printed Name
AU.D. ACADEMIC HANDBOOK STATEMENT

My signature on this page serves as verification that I have received the Au.D. Academic Handbook. By signing this form, I certify that I have read and understand the “Au.D. Academic Handbook” for the Audiology Program in the UALR/UAMS Department of Audiology and Speech Pathology. I agree to abide by all of the policies and procedures stated in this manual and understand that failure to do so may jeopardize my progress in the Au.D. program. Potential consequences include probation, withdrawal from clinic, and in more egregious cases, withdrawal from the program.

__________________________________________________________  ________________________________
Name of Student                                            Date

Signature of Applicant

Return this document to:

Director of Audiology
UALR/UAMS Department of Audiology and Speech Pathology
2801 South University Ave.
Little Rock, AR  72204
AU.D. CLINIC HANDBOOK STATEMENT

My signature on this page serves as verification that I have received the Au.D. Clinic Handbook. By signing this form, I certify that I have read and understand the “Au.D. Clinic Handbook” for the Audiology Program in the UALR/UAMS Department of Audiology and Speech Pathology. I agree to abide by all of the policies and procedures stated in this manual and understand that failure to do so may jeopardize my progress in the Au.D. program. Potential consequences include probation, withdrawal from clinic, and in more egregious cases, withdrawal from the program.

_________________________  __________________________
Name of Student                  Date

_________________________
Signature of Applicant

Return this document to:

Director of Audiology
UALR/UAMS Department of Audiology and Speech Pathology
2801 South University Ave.
Little Rock, AR 72204
Appendix E:
Advising Documents

Graduate Advising File Checklist
Au.D. Program Advising Worksheet
Degree Plan With B.S. Requirement
Au.D. Plan of Study (Advising Guide)
Audiology KASA Form
Diversity Form
GRADUATE ADVISING FILE CHECKLIST  
(Doctor of Audiology, Au.D.)

NAME ________________________ ADVISOR ________________________________

SECTION 1: ADMISSION INFORMATION
_____ Program Admission Letter
_____ UAMS CHP Application Form
_____ GRE Scores
_____ Undergraduate Transcript(s)
_____ Undergraduate Course Review

SECTION 2: ASSURANCES
_____ Signed Honor Code
_____ Signed Essential Functions Statement
_____ Signed Confidentiality Statement – Department
_____ Signed Confidentiality Statement – CHP
_____ Signed Au.D. Program Handbook Statement
_____ Signed Au.D. Clinic Handbook Statement
_____ Signed Au.D. Externship Manual Statement

SECTION 3: ADVISING DOCUMENTS
_____ Degree Plan
_____ Advising Guide
_____ CHP Working Transcript

SECTION 4: CLINIC DOCUMENTS
_____ Clock Hour Summary Forms
_____ Clinical Evaluations

SECTION 5: RESEARCH DOCUMENTS
_____ Human Subjects Research Training
_____ Research Contract
_____ Copy of Signature Page for Research Project/Thesis

SECTION 6: PROGRAM ASSESSMENT DOCUMENTS
_____ Diversity Checklist
_____ KASA Tracking Form
_____ Professionalism Evaluations
_____ Performance Based Examination (Diagnostic)
_____ Performance Based Examination (Treatment)
_____ Comprehensive Examination Documents

SECTION 7: GRADUATION DOCUMENTATION
_____ Report of Comprehensive Exam (Copy to CHP)
_____ Final Clock Hour Summary Form
_____ Completed Knowledge and Skills Form
_____ Final KASA Verification Form
_____ Advisor Letter to Program Director re: Completion of Degree Requirements
_____ Program Director Letter Asserting Completion of Degree Requirements
_____ Final Copy of UAMS Transcript (With Degree)

SECTION 8: MISCELLANEOUS
_____ CHP Registration Forms (Copies Received from CHP)
_____ CHP Grades (Copies Received from CHP)
_____ Action Plans and Remediation (As Applicable)
_____ Other
Au.D. PROGRAM STUDENT ADVISING WORKSHEET

Student Name_____________________________ Anticipated Graduation Date_______

Y1 Fall Date_______

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UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES
COLLEGE OF HEALTH PROFESSIONS
DEGREE PLAN

NAME: ___________________________ MAJOR ____________ Audiology

AWARD: _____A.S. _____B.S. _____CERTIFICATE  __X___OTHER:  Au.D.

DATE PLAN PREPARED __________ CATALOG USED __________
SC ACCEPTED IN TRANSFER: __________

This plan is provided to the student as a guide to planning work toward a degree. It is based upon, but does not supersede, the student's official records. Students are strongly urged to carefully review the general education requirements for graduation, as well as for the student's major field, as set forth in the appropriate college catalog. Frequent communication between the student and advisor should be maintained during the period covered by this plan. For this plan to remain valid, all requirements must be completed within eight (8) years from the date on this document. If the general education requirements are changed by the State, additional course work that is not currently identified on this plan may be needed to complete the degree requirements. Withdrawal from the college, school or program prior to completion of professional coursework invalidates this plan.

REQUIREMENTS REMAINING

<table>
<thead>
<tr>
<th>General Education</th>
<th>Hours</th>
<th>Comments or Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>At least one course in each of the areas listed to the left.</td>
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<table>
<thead>
<tr>
<th>Degree Requirements</th>
<th>Hours</th>
<th>Comments or Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td>A minimum of 118 SC must be completed for the Au.D. degree. See __________ CHP Catalog for specific program education requirements.</td>
<td>118</td>
<td>Total SC Remaining: 118</td>
</tr>
</tbody>
</table>

I understand and agree to the stipulations of this degree plan.

Student: ___________________________________________ Date: __________________

Approval Signatures
Advisor: ___________________________________ Date: __________________
Program Director: _____________________________ Date: __________________
Registrar: ___________________________________ Date: __________________
Associate Dean: _______________________________ Date: __________________
### AU.D. PLAN OF STUDY (ADvising Guide)

<table>
<thead>
<tr>
<th></th>
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<th>Summer</th>
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<tr>
<td><strong>Year 1</strong></td>
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<tr>
<td><strong>Fall 11</strong></td>
<td>AUD 5023</td>
<td>AUD 5073</td>
<td>3 AUD 5162 Genetics of Hearing Loss</td>
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<td></td>
<td>AUD 5043</td>
<td>AUD 5183</td>
<td>3 AUD 5192 Professional Issues</td>
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<td></td>
<td>AUD 5053</td>
<td>AUD 5183</td>
<td>3 AUD 540V Audiology Practicum</td>
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<td>AUD 5113</td>
<td>AUD 5223</td>
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<td>AUD 540V</td>
<td>AUD 540V</td>
<td>3 AUD 5041 Clinical Laboratory</td>
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<td><strong>Year 2</strong></td>
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<td>AUD 5233</td>
<td>3 AUD 5232 Audiology: Practice Management</td>
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<td>AUD 5083</td>
<td>AUD 5103</td>
<td>3 AUD 536V Directed Research</td>
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<td>AUD 5013</td>
<td>AUD 5243</td>
<td>3 AUD 540V Audiology Practicum</td>
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<td>AUD 5253</td>
<td>AUD 5263</td>
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<td><strong>Fall 13</strong></td>
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<td>AUD 5063</td>
<td>3 AUD 536V Directed Research (if not complete)</td>
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<td>AUD 5033</td>
<td>AUD 5212</td>
<td>3 AUD 546V Clinical Externship</td>
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<td>AUD 5173</td>
<td>3 AUD 5401 Clinical Laboratory</td>
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<td><strong>Minimums to Total</strong></td>
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| Coursework    | 73          |        |                               |
| Clinical Laboratory | 11          |        |                               |
| Practicum     | 13          |        |                               |
| Research      | 6           |        | Final Count                  |
| Externship    | 16          | 119    | Date  Advisors Signature     |

Rev 8/11/13
| Knowledge and Skills Acquisition (KASA) Summary Form | For Certification in Audiology | January 1, 2011 Standards |
### KNOWLEDGE AND SKILLS ACQUISITION (KASA)

### SUMMARY FORM FOR AUDIOLOGY

### INSTRUCTIONS FOR USE

1. All students who will be applying for certification under the 2011 Standards for Certification in Audiology must use this form to track their progress.

2. All CAA-accredited graduate programs must maintain this record for all students in order to demonstrate during the accreditation site visit the program’s compliance with accreditation standards related to preparing students to meet the ASHA certification requirements.

3. Indicate with a checkmark in Column B whether each knowledge and skill was achieved. If a particular knowledge or skill was acquired through work completed in a specific course or courses, the title and number of the course(s) should be entered in Column C. If the knowledge or skills were acquired in clinical practicum, enter the title and number of the practicum in Column D. If the knowledge or skill was acquired through course work and/or clinical practicum and/or lab or research activities, there should be entries in all of the applicable columns: C, D, and/or E.

4. Students should review this form periodically with their advisor and/or program director to ensure that they are making sufficient progress toward meeting ASHA certification requirements.

5. At the conclusion of the graduate program, the student must have the program director review the KASA and complete the Verification by Program Director page.

6. Students are advised to retain a copy of the KASA in a safe place should they need to provide information to the Council For Clinical Certification at a later date (e.g., upon application for reinstatement should certification lapse).

7. The Verification by Program Director page, appropriately completed and signed, must accompany any application that is submitted for ASHA certification.
<table>
<thead>
<tr>
<th>Standard/Level</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
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</thead>
<tbody>
<tr>
<td>Standard</td>
<td></td>
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<tr>
<td>A1. Embryology and development of the auditory and vestibular systems, anatomy and physiology, neuroscience and neurophysiology, and pathophysiology</td>
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<tr>
<td>A2. Genetics and associated conditions related to hearing and balance</td>
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<td>A3. Normal aspects of auditory physiology and behavior over the life span</td>
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<tr>
<td>A4. Normal development of speech and language</td>
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<tr>
<td>A5. Language and speech characteristics and their development across the life span</td>
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<tr>
<td>A6. Phonologic, morphologic, syntactic, and pragmatic aspects of human communication associated with hearing impairment</td>
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<tr>
<td>A7. Effects of hearing loss on communication and educational, vocational, social, and psychological functioning</td>
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<tr>
<td>A8. Effects of pharmacologic and teratogenic agents on the auditory and vestibular systems</td>
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<tr>
<td>A9. Patient characteristics (e.g., age, demographics, cultural and linguistic diversity, medical history and status, cognitive status, and physical and sensory abilities) and how they relate to clinical services</td>
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<tr>
<td>A10. Pathologies related to hearing and balance and their medical diagnostic and treatment</td>
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<tr>
<td>A11. Principles, methods, and applications of psychometrics</td>
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<tr>
<td>A12. Principles, methods, and applications of psychoacoustics</td>
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<td>A13. Instrumentation and bioelectrical hazards</td>
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<td>A14. Physical characteristics and measurement of electric and other nonacoustic stimuli</td>
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<tr>
<td>A15. Assistive technology</td>
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<td>A16. Effects of cultural diversity and family systems on professional practice</td>
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<tr>
<td>A17. American Sign Language and other visual communication systems</td>
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<tr>
<td>A18. Principles and practices of research, including experimental design, statistical methods, and application to clinical populations</td>
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<tr>
<td>A19. Legal and ethical practices (e.g., standards for professional conduct, patient rights, credentialing, and legislative and regulatory mandates)</td>
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<td>A20. Health care and educational delivery systems</td>
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<tr>
<td>A21. Universal precautions and infectious/contagious diseases</td>
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<tr>
<td><strong>Standard IV-A. Foundations of Practice. The applicant must have knowledge and skills in:</strong></td>
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<tr>
<td>A22. Oral and written forms of communication</td>
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<tr>
<td>A23. Principles, methods, and applications of acoustics (e.g., basic parameters of sound, principles of acoustics as related to speech sounds, sound/noise measurement and analysis, and calibration of audiometric equipment), as applicable to: a. occupational and industrial environments, b. community noise, c. classrooms and other educational environments, and d. workplace environments</td>
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<td>A24. The use of instrumentation according to manufacturer’s specifications and recommendations</td>
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<tr>
<td>A25. Determining whether instrumentation is in calibration according to accepted standards</td>
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<tr>
<td>Standard IV.B. Prevention and Identification. The applicant must have knowledge and skills in:</td>
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<tr>
<td>B1. Implement activities that prevent and identify dysfunction in hearing and communication, balance, and other auditory-related systems</td>
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<tr>
<td>B2. Promote hearing wellness, as well as the prevention of hearing loss and protection of hearing function by designing, implementing, and coordinating universal newborn hearing screening, school screening, community hearing, and occupational conservation and identification programs</td>
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<tr>
<td>B3. Screen individuals for hearing impairment and disability/handicap using clinically appropriate, culturally sensitive, and age- and site-specific screening measures</td>
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<tr>
<td>B4. Screen individuals for speech and language impairments and other factors affecting communication function using clinically appropriate, culturally sensitive, and age- and site-specific screening measures</td>
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<tr>
<td>B5. Educate individuals on potential causes and effects of vestibular loss</td>
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<tr>
<td>B6. Identify individuals at risk for balance problems and falls who require further vestibular assessment and/or treatment or referral for other professional services</td>
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<td>Standard IV.C. Assessment. The applicant must have the knowledge of:</td>
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<tr>
<td>C1. Measuring and interpreting sensory and motor evoked potentials, electromyography, and other electrophysiologic tests for purposes of neurophysiologic intraoperative monitoring and cranial nerve assessment</td>
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<td>Standard IV-C: Assessment. The applicant must have the knowledge and skills in:</td>
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<tr>
<td>C2. Assessing individuals with suspected disorders of hearing, communication, balance, and related systems</td>
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<tr>
<td>C3. Evaluating information from appropriate sources and obtaining a case history to facilitate assessment planning</td>
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<tr>
<td>C4. Performing otoscopy for appropriate audiological assessment/management decisions, determining the need for cerumen removal, and providing a basis for medical referral</td>
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<tr>
<td>C5. Conducting and interpreting behavioral and/or electrophysiologic methods to assess hearing thresholds and auditory neural function</td>
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<tr>
<td>C6. Conducting and interpreting behavioral and/or electrophysiologic methods to assess balance and related systems</td>
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<tr>
<td>C7. Conducting and interpreting otoacoustic emissions and acoustic immittance (reflexes)</td>
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<tr>
<td>C8. Evaluating auditory-related processing disorders</td>
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<td>C9. Evaluating functional use of hearing</td>
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<td>C10. Preparing a report, including interpreting data, summarizing findings, generating recommendations, and developing an audiological treatment/management plan</td>
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<tr>
<td>C11. Referring to other professions, agencies, and/or consumer organizations</td>
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<td>Standard IV-D. Intervention (Treatment). The applicant must have the knowledge and skills in:</td>
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<tr>
<td>D1. The provision of intervention services (treatment) to individuals with hearing loss, balance disorders, and other auditory dysfunction that compromises receptive and expressive communication</td>
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<tr>
<td>D2. Development of a culturally appropriate, audiologic rehabilitative management plan that includes, when appropriate, the following:</td>
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<tr>
<td>3. Evaluation, selection, verification, validation, and dispensing of hearing aids, sensory aids, hearing assistive devices, alerting systems, and captioning devices, and educating the consumer and family/caregivers in the use of and adjustment to such technology</td>
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<tr>
<td>4. Determination of candidacy of persons with hearing loss for cochlear implants and other implantable sensory devices and provision of fitting, mapping, and audiologic rehabilitation to optimize device use</td>
<td></td>
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<tr>
<td>C. Counseling relating to psychosocial aspects of hearing loss and other auditory dysfunction, and processes to enhance communication competence</td>
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<tr>
<td>5. Provision of comprehensive audiologic treatment for persons with hearing loss or other auditory dysfunction, including but not exclusive to communication strategies, auditory training, speech reading, and visual communication systems</td>
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<td>D3. Determination of candidacy for vestibular and balance rehabilitation therapy to persons with vestibular and balance imbalances</td>
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<tr>
<td>D4. Treatment and audiologic management of tinnitus</td>
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<tr>
<td>D5. Provision of treatment services for infants and children with hearing loss; collaboration/consultation with early interventionists, school based professionals, and other service providers regarding development of intervention plans (i.e., individualized education programs and/or individualized family service plans)</td>
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<td>D6. Management of the selection, purchase, installation, and evaluation of large-area amplification systems</td>
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<tr>
<td>Standard IV-E.</td>
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<tr>
<td>Advocacy/Consultation. The applicant must have the knowledge and skills necessary to:</td>
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<tr>
<td>F1. Educating and advocating for communication needs of all individuals that may include advocating for the programmatic needs, rights, and funding of services for those with hearing loss, other auditory dysfunction, or vestibular disorders</td>
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<tr>
<td>F2. Consulting about accessibility for persons with hearing loss and other auditory dysfunction in public and private buildings, programs, and services</td>
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<td>F3. Identifying underserved populations and promoting access to care</td>
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</table>

<table>
<thead>
<tr>
<th>Standard IV-F.</th>
<th>Education/Research Administration. The applicant must have the knowledge and skills</th>
<th></th>
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<tbody>
<tr>
<td>F1. Measuring functional outcomes, consumer satisfaction, efficacy, effectiveness, and efficiency of practices and programs to maintain and improve the quality of audiologic services</td>
<td></td>
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<tr>
<td>F2. Applying research findings in the provision of patient care (evidence-based practice)</td>
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<tr>
<td>F3. Critically evaluating and appropriately implementing new techniques and technologies supported by research-based evidence</td>
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<td>F4. Administering clinical programs and providing supervision of professionals as well as support personnel</td>
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<tr>
<td>F5. Identifying internal programmatic needs and developing new programs</td>
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<td>F6. Maintaining or establishing links with external programs, including but not limited to education programs, government programs, and philanthropic agencies</td>
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# Knowledge and Skills Acquisition (KASA) Summary Form

For Certification in Audiology (2011 Audiology Standards)

## Verification by Program Director

The applicant for certification:

<table>
<thead>
<tr>
<th>? Yes</th>
<th>? No</th>
<th>Completed a course of study that address the knowledge and skills necessary to independently practice in the profession of audiology. (Standard I)</th>
</tr>
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<tbody>
<tr>
<td>? Yes</td>
<td>? No</td>
<td>Been granted a graduate degree from a program accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology. (Standard II)</td>
</tr>
<tr>
<td>? Yes</td>
<td>? No</td>
<td>Completed a course of study that includes academic course work and a minimum of 1,820 hours of supervised clinical practicum sufficient in depth and breadth to achieve the knowledge and skills outcomes stipulated in Standard IV. Supervision was provided by individuals who held the ASHA Certificate of Clinical Competence (CCC) in Audiology. (Standard III)</td>
</tr>
<tr>
<td>? Yes</td>
<td>? No</td>
<td>Knowledge delineated in Foundations of Practice. (Std. IV. A1-A21)</td>
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<tr>
<td>? Yes</td>
<td>? No</td>
<td>Knowledge and skills delineated in Foundations of Practice. (Std. IV. A22-A29)</td>
</tr>
<tr>
<td>? Yes</td>
<td>? No</td>
<td>Knowledge and skills delineated in Prevention and Identification. (Std. IV. B1-B6)</td>
</tr>
<tr>
<td>? Yes</td>
<td>? No</td>
<td>Has knowledge delineated in Assessment. (Std. IV. C1)</td>
</tr>
<tr>
<td>? Yes</td>
<td>? No</td>
<td>Knowledge and skills delineated in Assessment. (Std. IV. C2-C11)</td>
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<tr>
<td>? Yes</td>
<td>? No</td>
<td>Knowledge and skills delineated in Intervention (Treatment). (Std. IV.D1-D7)</td>
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<td>? Yes</td>
<td>? No</td>
<td>Knowledge and skills delineated in Advocacy/Consultation. (Std. IV. E1-E3)</td>
</tr>
<tr>
<td>? Yes</td>
<td>? No</td>
<td>Knowledge and skills delineated in Education/Research/Administration. (Std. IV. F1-F6)</td>
</tr>
<tr>
<td>? Yes</td>
<td>? No</td>
<td>Met the program's requirements for demonstrating satisfactory performance through ongoing formative assessment of knowledge and skills. (Std. V-A)</td>
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The program director, or official designee, verifies that the student met each standard and has successfully met the education program’s requirements.

<table>
<thead>
<tr>
<th>Name</th>
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Date coursework and clinical practicum requirements for ASHA certification were completed _________________________
Diversity Checklist
UALR/UAMS
Department of Audiology & Speech Pathology
Graduate Program

Directions: As you interact with your clients, keep track of the various sources of diversity you encounter as you perceive them (Refer to ASHA, 2004. Knowledge and Skills Needed by Speech-Language Pathologists and Audiologists to Provide Culturally and Linguistically Appropriate Services [Knowledge and Skills]. Available from www.asha.org/policy). At the end of each term, write the location where you encountered sources of diversity and the date you filled in this form. You only need to mark one encounter per diversity source. Feel free to add any comments.

<table>
<thead>
<tr>
<th>Demographic Category</th>
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<th>Spring, Year 1 Date</th>
<th>Summer, Year 2 Date</th>
<th>Fall, Year 2 Date</th>
<th>Spring, Year 2 Date</th>
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<td>American Citizen</td>
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Comments:
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**Ethnicity**

- European-American
- African-American
- Native-American
- Hispanic-American
- Asian-American
- Other

**Nationality**

- American Citizen
- Other

**Additional**

- SES
- Religion
- Sexual orientation
- Educational background
- Mental/physical disability

Comments:
APPENDIX F:  
2011 Standards and Implementation Procedures for the 
Certificate of Clinical Competence In Audiology

Introduction

A Practice and Curriculum Analysis of the Profession of Audiology was conducted in 2007 under the auspices of the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) and the Council For Clinical Certification in Audiology and Speech-Language Pathology (CFCC). Respondents were asked to rate clinical activity statements and foundational knowledge areas in terms of importance and in terms of where the activity should be learned (in graduate school versus on the job). The respondents were also able to indicate whether an activity or area would not be performed by a newly graduated doctoral level audiologist.

The CFCC reviewed the survey data and determined that the standards for clinical certification and the Praxis examination blueprint needed revision in order to be in line with the results of the survey. It is noteworthy that because there is no longer a period of supervised practice following the completion of graduate school, activities that are an essential part of clinical practice must be included in graduate education and in the certification standards. The Scope of Practice in Audiology and the Preferred Practice Patterns for the Profession of Audiology documents also served as resources in the development of the new standards. The proposed Standards were distributed for select and widespread peer review in 2008 and all comments were considered in the final version of the document. The CFCC approved the new standards in July 2009 and set an implementation date of January 1, 2011. For more detailed information—including knowledge and skill requirements—please consult the side-by-side comparison of the 2007 and 2011 standards.

Citation

The Standards for the Certificate of Clinical Competence in Audiology are shown in bold. The Council for Clinical Certification implementation procedures follow each standard.

**Standard I—Degree**

**Standard II—Education Program**

**Standard III—Program of Study**

**Standard IV—Knowledge and Skills Outcomes**

**Standard V—Assessment**

**Standard VI—Maintenance of Certification**

**Standard I: Degree**

Applicants for certification should have a doctoral degree. The course of study must address the knowledge and skills necessary to independently practice in the profession of audiology. Beginning January 1, 2012, applicants for certification must have a doctoral degree.

Implementation:

Verification of the graduate degree is required of the applicant before the certificate is awarded. Beginning January 1, 2012, applicants for certification must have a doctoral degree. Degree verification is accomplished by submitting (a) an application signed by the director of the graduate program, indicating the degree date, and (b) an official transcript showing that the degree has been awarded, or a letter from the university registrar verifying completion of requirements for the degree.

Individuals educated outside the United States or its territories must submit official transcripts and evaluations of their degrees and courses to verify equivalency. These evaluations are typically conducted by credential evaluation services agencies recognized by the National Association of Credential Evaluation Services (NACES). Information that must be provided is (a) confirmation that the degree earned is equivalent to a U.S. graduate degree (doctoral degree effective January 1, 2012), (b) translation of academic coursework into the American semester hour system, and (c) indication as to which courses were completed at the graduate level.

The CFCC has the authority to determine eligibility of all applicants for certification.
Standard II: Education Program

The graduate degree must be granted by a program accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA).

Implementation:

Applicants whose graduate degree was awarded by a U.S. institution of higher education must have graduated from a program holding CAA-accreditation in audiology.

Satisfactory completion of academic course work, clinical practicum, and knowledge and skills requirements must be verified by the signature of the program director or official designee of a CAA-accredited program or a program admitted to CAA candidacy.

Standard III: Program of Study

Applicants for certification must complete a program of study that includes academic course work and a minimum of 1,820 hours of supervised clinical practicum sufficient in depth and breadth to achieve the knowledge and skills outcomes stipulated in Standard IV. The supervision must be provided by individuals who hold the ASHA Certificate of Clinical Competence (CCC) in Audiology.

Implementation:

The program of study must address the knowledge and skills pertinent to the field of audiology. Clinical practicum must be approved by the academic program from which the student intends to graduate. The student must maintain documentation of time spent in supervised practicum, verified by the academic program in accordance with Standard IV.

Students shall participate in practicum only after they have had sufficient preparation to qualify for such experience. Students must obtain a variety of clinical practicum experiences in different work settings and with different populations so that they can demonstrate skills across the scope of practice in audiology. Acceptable clinical practicum experience includes clinical and administrative activities directly related to patient care. Clinical practicum is defined as direct patient/client contact, consultation, record keeping, and administrative duties relevant to audiology service delivery. Time spent in clinical practicum experiences should occur throughout the graduate program.

Supervision must be sufficient to ensure the welfare of the patient and the student in accordance with the ASHA Code of Ethics. Supervision of clinical practicum must include direct ob-
observation, guidance, and feedback to permit the student to monitor, evaluate, and improve performance and to develop clinical competence. The amount of supervision must also be appropriate to the student's level of training, education, experience, and competence.

Supervisors must hold a current ASHA CCC in the appropriate area of practice. The supervised activities must be within the scope of practice of audiology to count toward certification.

**Standard IV: Knowledge and Skills Outcomes**

**Applicants for certification must have acquired knowledge and developed skills in six areas: foundations of practice, prevention/identification, assessment, (re)habilitation, advocacy/consultation, and education/research/administration.**

**Implementation:**

This standard distinguishes between acquisition of knowledge for Standards IV-A.1–21 and IV-C.1, and the acquisition of knowledge and skills for Standards IV-A.22–29, IV-B, IV-C.2–11, IV-D, IV-E, and IV-F. The applicant must submit a completed application for certification signed by the academic program director verifying successful completion of all knowledge and skills in all six areas of Standard IV. The applicant must maintain copies of transcripts, and documentation of academic course work and clinical practicum.

**Standard IV-A: Foundations of Practice**

The applicant must have knowledge of:

**A1. Embryology and development of the auditory and vestibular systems, anatomy and physiology, neuroanatomy and neurophysiology, and pathophysiology**

**A2. Genetics and associated syndromes related to hearing and balance**

**A3. Normal aspects of auditory physiology and behavior over the life span**

**A4. Normal development of speech and language**

**A5. Language and speech characteristics and their development across the life span**

**A6. Phonologic, morphologic, syntactic, and pragmatic aspects of human communication associated with hearing impairment**
A7. Effects of hearing loss on communication and educational, vocational, social, and psychological functioning

A8. Effects of pharmacologic and teratogenic agents on the auditory and vestibular systems

A9. Patient characteristics (e.g., age, demographics, cultural and linguistic diversity, medical history and status, cognitive status, and physical and sensory abilities) and how they relate to clinical services

A10. Pathologies related to hearing and balance and their medical diagnosis and treatment

A11. Principles, methods, and applications of psychometrics

A12. Principles, methods, and applications of psychoacoustics

A13. Instrumentation and bioelectrical hazards

A14. Physical characteristics and measurement of electric and other nonacoustic stimuli

A15. Assistive technology

A16. Effects of cultural diversity and family systems on professional practice

A17. American Sign Language and other visual communication systems

A18. Principles and practices of research, including experimental design, statistical methods, and application to clinical populations

A19. Legal and ethical practices (e.g., standards for professional conduct, patient rights, credentialing, and legislative and regulatory mandates)

A20. Health care and educational delivery systems

A21. Universal precautions and infectious/contagious diseases

The applicant must have knowledge and skills in:

A22. Oral and written forms of communication
A23. Principles, methods, and applications of acoustics (e.g., basic parameters of sound, principles of acoustics as related to speech sounds, sound/noise measurement and analysis, and calibration of audiometric equipment), as applicable to:

a. occupational and industrial environments
b. community noise
c. classroom and other educational environments
d. workplace environments

A24. The use of instrumentation according to manufacturer’s specifications and recommendations

A25. Determining whether instrumentation is in calibration according to accepted standards

A26. Principles and applications of counseling

A27. Use of interpreters and translators for both spoken and visual communication

A28. Management and business practices, including but not limited to cost analysis, budgeting, coding and reimbursement, and patient management

A29. Consultation with professionals in related and/or allied service areas

Standard IV-B: Prevention and Identification

The applicant must have the knowledge and skills necessary to:

B1. Implement activities that prevent and identify dysfunction in hearing and communication, balance, and other auditory-related systems

B2. Promote hearing wellness, as well as the prevention of hearing loss and protection of hearing function by designing, implementing, and coordinating universal newborn hearing screening, school screening, community hearing, and occupational conservation and identification programs

B3. Screen individuals for hearing impairment and disability/handicap using clinically appropriate, culturally sensitive, and age- and site-specific screening measures
B4. Screen individuals for speech and language impairments and other factors affecting communication function using clinically appropriate, culturally sensitive, and age- and site-specific screening measures

B5. Educate individuals on potential causes and effects of vestibular loss

B6. Identify individuals at risk for balance problems and falls who require further vestibular assessment and/or treatment or referral for other professional services

Standard IV-C: Assessment

The applicant must have knowledge of:

C1. Measuring and interpreting sensory and motor evoked potentials, electromyography, and other electrodiagnostic tests for purposes of neurophysiologic intraoperative monitoring and cranial nerve assessment

The applicant must have knowledge and skills in:

C2. Assessing individuals with suspected disorders of hearing, communication, balance, and related systems

C3. Evaluating information from appropriate sources and obtaining a case history to facilitate assessment planning

C4. Performing otoscopy for appropriate audiological assessment/management decisions, determining the need for cerumen removal, and providing a basis for medical referral

C5. Conducting and interpreting behavioral and/or electrophysiologic methods to assess hearing thresholds and auditory neural function

C6. Conducting and interpreting behavioral and/or electrophysiologic methods to assess balance and related systems

C7. Conducting and interpreting otoacoustic emissions and acoustic imittance (reflexes)

C8. Evaluating auditory-related processing disorders
C9. Evaluating functional use of hearing

C10. Preparing a report, including interpreting data, summarizing findings, generating recommendations, and developing an audioligic treatment/management plan

C11. Referring to other professions, agencies, and/or consumer organizations

Standard IV-D: Intervention (Treatment)

The applicant must have knowledge and skills in:

D1. The provision of intervention services (treatment) to individuals with hearing loss, balance disorders, and other auditory dysfunction that compromises receptive and expressive communication

D2. Development of a culturally appropriate, audioligic rehabilitative management plan that includes, when appropriate, the following:

   a. Evaluation, selection, verification, validation, and dispensing of hearing aids, sensory aids, hearing assistive devices, alerting systems, and captioning devices, and educating the consumer and family/caregivers in the use of and adjustment to such technology

   b. Determination of candidacy of persons with hearing loss for cochlear implants and other implantable sensory devices and provision of fitting, mapping, and audioligic rehabilitation to optimize device use

   c. Counseling relating to psychosocial aspects of hearing loss and other auditory dysfunction, and processes to enhance communication competence

   d. Provision of comprehensive audioligic treatment for persons with hearing loss or other auditory dysfunction, including but not exclusive to communication strategies, auditory training, speech reading, and visual communication systems

D3. Determination of candidacy for vestibular and balance rehabilitation therapy to persons with vestibular and balance impairments

D4. Treatment and audioligic management of tinnitus
D5. Provision of treatment services for infants and children with hearing loss; collaboration/consultation with early interventionists, school based professionals, and other service providers regarding development of intervention plans (i.e., individualized education programs and/or individualized family service plans)

D6. Management of the selection, purchase, installation, and evaluation of large-area amplification systems

D7. Evaluation of the efficacy of intervention (treatment) services

Standard IV-E: Advocacy/Consultation

The applicant must have knowledge and skills in:

E1. Educating and advocating for communication needs of all individuals that may include advocating for the programmatic needs, rights, and funding of services for those with hearing loss, other auditory dysfunction, or vestibular disorders

E2. Consulting about accessibility for persons with hearing loss and other auditory dysfunction in public and private buildings, programs, and services

E3. Identifying underserved populations and promoting access to care

Standard IV-F: Education/Research/Administration

The applicant must have knowledge and skills in:

F1. Measuring functional outcomes, consumer satisfaction, efficacy, effectiveness, and efficiency of practices and programs to maintain and improve the quality of audiolologic services

F2. Applying research findings in the provision of patient care (evidence-based practice)

F3. Critically evaluating and appropriately implementing new techniques and technologies supported by research-based evidence

F4. Administering clinical programs and providing supervision of professionals as well as support personnel
F5. Identifying internal programmatic needs and developing new programs

F6. Maintaining or establishing links with external programs, including but not limited to education programs, government programs, and philanthropic agencies

Standard V: Assessment

Applicants for certification must demonstrate successful achievement of the knowledge and skills delineated in Standard IV by means of both formative and summative assessments.

Standard V-A: Formative Assessment

The applicant must meet the education program’s requirements for demonstrating satisfactory performance through ongoing formative assessment of knowledge and skills.

Implementation:

Applicants and program faculties should use the ongoing assessment to help the applicant achieve requisite knowledge and skills. Thus, assessments should be followed by implementation strategies for acquisition of knowledge and skills.

Standard V-B: Summative Assessment

The applicant must pass the national examination adopted by ASHA for purposes of certification in audiology.

Implementation:

Evidence of a passing score on the ASHA-approved national examination in audiology must be submitted to the ASHA National Office by the testing agency administering the examination. Acceptable exam results are those submitted for initial certification in audiology that have been obtained no more than 5 years prior to the submission of the certification application, and no more than 2 years after the application for certification is received by the Certification Unit of the ASHA National Office.
Standard VI: Maintenance of Certification

**Demonstration of continued professional development is mandated for maintenance of the Certificate of Clinical Competence (CCC) in Audiology. The renewal period will be three (3) years. This standard will apply to all certificate holders, regardless of the date of initial certification.**

Implementation:

Once certification is awarded, maintenance of that certification is dependent upon accumulation of the requisite professional development hours every three years. Payment of annual dues and/or certification fees is also a requirement of certification maintenance. A certificate holder whose dues and/or fees are in arrears on August 31, will have allowed their certification to expire on that date.

Individuals who hold the CCC in Audiology must accumulate 30 contact hours of professional development over the 3-year period and must submit a compliance form in order to meet this standard. Individuals will be subject to random review of their professional development activities.

If certification maintenance requirements are not met, certification will lapse. Reinstatement of certification will be required, and certification reinstatement standards in effect at the time of submission of the reinstatement application must be met.
APPENDIX G:

Comprehensive Examination

1. The examination is required of all doctoral degree candidates prior to graduation.
2. Students taking this examination must have earned at least a cumulative GPA of 3.00 in department graduate courses.
3. The examination is offered during the spring semester of the third year of the student’s graduate training. Additional testing opportunities will be made available if the student does not pass the first examination.
4. Comprehensive exams will be administered on a single morning.
5. The examination will be held in a room large enough to accommodate all students being examined. The examination will be proctored at all times.
6. The answers to individual questions may require synthesis and application of information from multiple knowledge and skill areas.
7. Anonymity of the students taking the examination will be maintained. Each student will select a four digit number that will act as the identifier for the student. Student numbers will be placed in a sealed envelope and will not be known to the faculty until final decisions regarding pass or fail have been made. Within 10 working days after the last day of the comprehensive examination, there will be a faculty meeting in which the faculty will recommend pass or fail for each student.
8. Each student will receive official notification of pass or fail on the examination in writing from the department chair. Letters will be placed in the student mailboxes or mailed to their home address, if requested. Student scores will be kept confidential; however, students who fail may review their examination with their academic advisor. All scores of both students who pass and who fail will be maintained by the department chair.
9. Passing the comprehensive examination is a prerequisite to beginning the fourth year externship.
10. If a student fails the examination, s/he will be required to retake the examination. If a student does not successfully complete the examination within three attempts, the student will be terminated from the program.
APPENDIX H:

Student Organizations

- The UAMS/UALR Student Academy of Audiology (SAA). Dues are $20 per year, payable in the fall semester.
  Samuel Atcherson, Ph.D., CCC/A, Faculty Advisor
  University Plaza, Suite 600
  501-569-3155

- The UAMS/UALR Student Speech-Language-Hearing Association (NSSLHA)
  Kathy Shapley, Ph.D., CCC/SLP, Faculty Advisor
  University Plaza, Suite 600
  501-569-3155

National Student Organizations

- National Student Speech Language Hearing Association
  2200 Research Boulevard #450 * Rockville, MD 20850
  PH: 800-498-2071 (ASHA Action Center) * Email: actioncenter@asha.org
  www.nsslha.org

- Student Academy of Audiology
  11730 Plaza America Drive, Suite 300 * Reston, VA 20190
  PH: 800-AAA-2336 * FX 703-790-8631
  http://www.audiology.org/education/students/SAA/Pages/default.aspx

State Professional Organizations with Student Memberships

- Arkansas Academy of Audiology (ARAA)
  www.ARAudiology.org
  PO Box 17447 * Little Rock, AR 72222

- Arkansas Speech-Language-Hearing Association (ArkSHA)
  P.O. Box 250261 * Little Rock, AR 72225
  PH: 877-427-5742 * FX: 501-244-2333 * email: arksha@arksha.org
  www.arksha.org

National Professional Organizations with Student Memberships

- American Speech Language Hearing Association
  2200 Research Boulevard * Rockville, MD 20850-3289
  PH: 301-296-5700 * Members: 800-498-2071 * Non-member: 800-638-8255
FX: 301-296-8580 * TTY 301-296-5650 * Email: actioncenter@asha.org
www.asha.org

- American Academy of Audiology
  11730 Plaza America Drive, Suite 300 * Reston, VA 20190
  PH: 800-AAA-2336 * FX 703-790-8631
  www.audiology.org
APPENDIX I:

Licensure and Governmental Information

State Licensing Agency
Board of Examiners for Speech Pathology & Audiology
101 E. Capitol
Suite 211
Little Rock, AR 72201
Voice: 501-682-9180
Fax: 501-682-9181

Arkansas and U.S. Legislative Information

Arkansas State Home Page: http://www.state.ar.us/
Arkansas House of Representatives Home Page: http://www.arkansas.gov/house/
Arkansas House of Representatives Home Page: http://www.arkansas.gov/senate/

Arkansas U.S. Representatives:

District 1: Rick Crawford http://crawford.house.gov/
District 2: Tim Griffin http://griffin.house.gov/
District 3: Steve Womack http://womack.house.gov/
District 4: Tim Cotton http://cotton.house.gov/

Arkansas U.S. Senators:

Mark Pryor http://pryor.senate.gov/
John Boozman http://www.boozman.senate.gov/public/