

TRADITIONAL AUDIOMETRIC SCREENING

COMPETENCY		MET	NOT MET
A. BEFORE THE TESTING, STAFF SHOULD BE ABLE TO DEMONSTRATE THE FOLLOWING:			
1.	Utilizes a pure tone air conduction audiometer at appropriate ages (starting at age 4).		
2.	Checks to make sure the audiometer is working properly or has recently been calibrated.		
3.	Demonstrates competency in the operation of the audiometer.		
a.	Able to identify the audiometer's parts correctly (Power switch, ear selector control, Frequency dial, Intensity dial, and Tones button).		
b.	Able to demonstrate proper placement of the earphones (Red over Right).		
B. PRE-SCREENING STAGE			
1.	Positions the child on the screener's dominant side for screening.		
2.	Powers on the audiometer		
3.	The staff is able to demonstrate the steps in the different phases of the audiometric screening process.		
3a. Conditioning Phase Step 1 Set-Up			
1.	Keep the EARPHONE on the TABLE.		
2.	To start, Set the audiometer switch to the RIGHT EAR, Set the tone switch to PULSE TONE and sets the audiometer at 90 dB and 4000Hz.		
3b. Conditioning - Step 2: Present the Beep			
1.	The screener introduces the test, asks the patient to listen.		
2.	Presses the tone for "1 Mississippi."		
3.	Acknowledge that the patient heard the sound (hand raised).		
4.	Praises the patient.		

3c. Reconditioning or Confirmation

1.	Set audiometer to 50 dB & 4000 Hz.		
2.	Place earphones on the patient (red to right ear).		
3.	Ask patient to listen.		
4.	Press the tone.		
5.	If patient raises hand, START SCREENING the right ear at 20 dB and 4000 Hz.		
6.	If patient does not raise hand, switch to the left ear.		
7.	If patient still does not raise hand, take earphones off and repeat conditioning and confirmation steps.		
8.	If patient still does not respond schedule patient for a re-screen in 2-6 weeks.		

C. ACTUAL SCREENING

1.	Set Audiometer to 20 dB and 8000 Hz.		
2.	Confirm ear selector control knob is set to the right ear.		
3.	Beginning with the right ear, press the button for "1 Mississippi" until all frequencies are measured and the patient's responses are noted.		
4.	Praise the patient each time they respond (hand raised).		
5.	Switch the ear selector control knob to the left ear and repeat the process.		
6.	Start at 6000 Hz and progress up to 8000 Hz.		
7.	Praise the patient each time they respond (hand raised).		
8.	When the screening is complete, remove the earphones and thank the patient.		

D. DOCUMENTATION

1.	<p>Screener documents the results using the audiogram.</p> <p>ng Audiogram <u>Jane Doe</u> DOB: <u>1/1/2020</u> Date: <u>10/1/24</u></p> <p>es child responds at 20 dB (passing at the frequency) es child did NOT respond at 20 dB (rescreen within 2-6 weeks) <input type="checkbox"/> Child uncooperative</p> <table border="1"> <tr> <td colspan="8" style="text-align: center;">RIGHT EAR</td> </tr> <tr> <td>500</td><td>1000</td><td>2000</td><td>4000</td><td>6000</td><td>8000</td><td></td><td></td> </tr> <tr> <td>✓</td><td>✓</td><td>✓</td><td>✓</td><td></td><td></td><td></td><td></td> </tr> </table> <table border="1"> <tr> <td colspan="8" style="text-align: center;">LEFT EAR</td> </tr> <tr> <td>500</td><td>1000</td><td>2000</td><td>4000</td><td>6000</td><td>8000</td><td></td><td></td> </tr> <tr> <td>✓</td><td>✓</td><td>✓</td><td>✓</td><td></td><td></td><td></td><td></td> </tr> </table> <table border="1"> <tr> <td colspan="8" style="text-align: center;">RIGHT EAR</td> </tr> <tr> <td>500</td><td>1000</td><td>2000</td><td>4000</td><td>6000</td><td>8000</td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> <table border="1"> <tr> <td colspan="8" style="text-align: center;">LEFT EAR</td> </tr> <tr> <td>500</td><td>1000</td><td>2000</td><td>4000</td><td>6000</td><td>8000</td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>	RIGHT EAR								500	1000	2000	4000	6000	8000			✓	✓	✓	✓					LEFT EAR								500	1000	2000	4000	6000	8000			✓	✓	✓	✓					RIGHT EAR								500	1000	2000	4000	6000	8000											LEFT EAR								500	1000	2000	4000	6000	8000												
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2.	Records a passing audiometric result with a check mark at the completion of the screening procedure.																																																																																																		

3.	Immediately records a non-passing audiometric result with a dash mark while praising the child.		
4.	If unable to perform, charts reason/s and rescheduling within 2-6 weeks.		
5.	If the screening fails, documents re-screening in 2-6 weeks. <ol style="list-style-type: none"> Documents and informs the provider the 2nd failed screening for referral to a specialist. Documents follow up per clinic protocol. 		
TOTAL ITEMS MET:			

Total Possible Points: 34 points

Passing Score (80%): 27 points

*If score is below 27, please review the training module and retest.**

Name: _____	Designation: _____
Date of Evaluation: _____	
Name of Evaluator: _____	Signature of Evaluator: _____
Designation: _____	

INSTRUCTIONS FOR SUBMISSION

1. If you have completed the CHILD training module on Traditional Audiometric Screening, kindly have your office manager/trainer/provider or designee complete this checklist with you.
2. Once required score is met, the office manager/trainer/provider or designee will upload the checklist via the CHILD attestation page:  The completed checklist can also be sent directly to the FSR team at fsrteam@hpsj.com.
3. Once verified by the FSR Team, you will be issued a certificate of completion. The certificate of completion will be **valid for 4 years** unless revoked by the health plan.

For any questions or assistance needed, please reach out to the health plan's FSR team at fsrteam@hpsj.com.