February 24, 2015

Leslie L. Knachel, Executive Director
Virginia Board of Audiology and Speech-Language Pathology
9960 Maryland Drive
Suite 300
Richmond, VA 23233-1463

Re: Performance of Cerumen Management by Audiologists

Dear Ms. Knachel:

The American Academy of Audiology (the “Academy”) appreciates the opportunity to offer comments in response to the emergency regulation issued by the Virginia Board of Audiology and Speech-Language Pathology regarding the performance of cerumen management by audiologists. The Academy is the world’s largest professional organization of, by, and for audiologists, representing over 12,000 members. The Academy promotes quality hearing and balance care by advancing the profession of audiology through leadership, advocacy, education, public awareness, and support of research.

The Academy appreciates the Board of Audiology and Speech-Language Pathology’s commitment to ensuring that patients in the commonwealth of Virginia receive high quality hearing health-care. The Academy recognizes the importance of the Board’s decision to further define cerumen management as part of an audiologist’s scope of practice in Virginia, a positive step for audiologists and patients alike. It is also the Academy’s position that any regulations issued to define the performance of cerumen management by audiologists should accurately reflect the education, training, and scope of practice of an audiologist, and should be written in a way that accounts for emerging technologies, best practice guidelines, and educational standards. The Academy has reviewed the emergency regulation and respectfully submits the following points for your consideration.

Cerumen Management and Audiology Scope of Practice

The Academy is concerned that as written, the emergency regulation for cerumen management, will restrict the ability of the audiologist to provide services within their scope of practice. Audiologists are highly educated, trained, and qualified to perform cerumen management. Cerumen management is and has been a part of the curriculum for the Doctor of Audiology degree (AuD) for more than twenty years, as described in the Knowledge and Competency Standards for the AuD outlined at http://www.audiology.org/publications-resources/document-
library/proposed-academic-performance-standards-aud-degree. This specialized level of education and training means that audiologists are among the most qualified providers to perform cerumen management. In many instances, it is common practice for physicians to refer their patients to an audiologist for safe and effective cerumen management. If an audiologist determines that there is medical condition that will prevent the safe practice of cerumen management, the audiologist will refer that patient to a physician. Additionally, the Academy’s Code of Ethics clearly states that audiologists shall only provide those professional services for which they are qualified by education and experience, and shall refer to other specialties when necessary. The Academy’s Code of Ethics can be accessed at http://www.audiology.org/publications-resources/document-library/code-ethics. Audiologists are ethically, and most often legally, bound to adhere to these important principles of professional conduct and to act in the best interest of the patient.

Limiting the ability of an audiologist to perform cerumen management could adversely affect patients. Safe cerumen management is a key factor in the fitting of hearing aids, and restricting the audiologist from performing this service could affect the audiologist’s ability to properly fit a patient’s hearing aid, or even to perform an accurate audiologic assessment. This creates barriers to care including multiple, unnecessary office visits, thus resulting in a negative experience for the patient by delaying the proper and comfortable fitting of hearing aids.

To account for the important role of the audiologist in performing cerumen management, and ensure that state regulations reflect this practice, the Academy supports the adoption of broader language that more closely resembles the language found in its Scope of Practice document, available at http://www.audiology.org/publications-resources/document-library/scope-practice. This less restrictive approach is on par with the regulations, laws, or policies enacted in the majority of other states that include cerumen management in an audiologist’s scope of practice, including the states that neighbor Virginia: North Carolina, West Virginia, and Maryland.

Proposed Modifications to Section: 18VAC30-20-241. Limited cerumen management.

The Academy would also like to draw your attention to section 18VAC30-20-241, which states the following: “A. In order for an audiologist to perform limited cerumen management, he shall: 1. Be a graduate of a doctoral program in audiology which is accredited by the Council on Academic Accreditation of the American Speech-Language-Hearing Association and which included didactic education and supervised clinical experience in cerumen management as specified in subsection B of this section; or...”

The Academy strongly encourages the Board of Audiology and Speech-Language Pathology to consider alternative language that represents the current landscape in audiology education accreditation. The Accreditation Commission for Audiology Education (ACAE), not referenced in
the current language, is an active accrediting body for audiology education and received recognition and approval from the Council of Higher Education Accreditation (CHEA) in 2012. The Academy urges the Board of Audiology and Speech-Language Pathology to recognize the ACAE in section 18VAC30-20-241, or to adopt language that is more neutral and inclusive.

The Academy would like to thank the Virginia Board of Audiology and Speech-Language Pathology for the opportunity share our position regarding cerumen management by audiologists as outlined in the emergency regulation. We hope that the Board will consider adopting language that is less prescriptive for qualified audiologists providing safe cerumen management, and modify the emergency regulation to include other accrediting organizations. Please contact Kate Thomas, director of payment policy and legislative affairs at 703-226-1029 or kthomas@audiology.org if you should need additional information or clarification regarding the Academy's comments.

Sincerely,

[Signature]

Erin L. Miller, AuD
President
American Academy of Audiology