Aural Rehabilitation "Steps-To-Success"

1. After the Audiologist has performed an audiological evaluation and recommended Aural Rehabilitation, the SLP ensures that the *Audiogram* and *Patient Findings Summary* is placed in the patient’s medical record.
2. The SLP will follow-up on any physician’s referrals that were made by the Audiologist.
3. The SLP will complete an aural rehab evaluation as recommended by the Audiologist. ***An additional physician’s order for an aural rehabilitation evaluation is not required for this step***.
	1. The aural rehabilitation evaluation is documented as CPT Code 92507
		1. Standardized tests for the aural rehabilitation evaluation include: Wepman, Utley, Hearing Handicap Inventory for the Elderly (HHIE), etc.
		2. Using the standardized tests, establish a baseline for the patient’s ability to Speech-Read.
		3. Using an Assistive Listening Device, establish/document benefit of amplification.
	2. If patient is picked-up for Aural Rehabilitation, the SLP must complete a ***Supplemental Plan of Care*** to cover additional AR goals.
4. SLP writes aural rehabilitation goals on the ***Supplemental Plan of Care***.
5. SLP performs aural rehabilitation therapy using the CPT code 92507.
	1. Aural Rehabilitation therapy will most always include the following steps:
		1. Staff/Family Education
		2. Environmental Modification (reducing background noise, etc.)
		3. Assertiveness Training (informing communication partners that you have hearing loss)
		4. Speech Reading Therapy (phoneme level, syllable level, word level, sentence level-all in quiet) (then repeat entire process with background noise)
		5. Communication Strategies/Repair Strategies (Could you please repeat that? Could you please re-phrase that?)
		6. Counseling to facilitate adjustment to assistive listening devices, when recommended, and possible psychological, emotional, and occupation impacts of hearing loss.
6. SLP continues aural rehabilitation therapy for the appropriate number of days based on need. (Typically 14-21 days on caseload (average) to complete the program.)
7. SLP discharges patient when functional outcomes have been achieved (with *Functional Maintenance Plan* when appropriate).