

# Pediatric Audiology: What You May Not Learn in School!

## Tips and Tricks from the Trenches

Lauren Durinka, AuD  
Hospital

Maggie Kettler, AuD

Shelley Moats, AuD, PASC  
Group

Charlotte Mullen, AuD

Nationwide Children's

Cincinnati Children's Hospital  
Norton Children's Medical

Boston Children's Hospital

# Financial Disclosures

**Lauren Durinka** Employed by Nationwide Children's Hospital

Non-financial: None

**Maggie Kettler** Employed by Cincinnati Children's Hospital Medical Center

Non-financial: AAA Chair; OSHGAC Secretary; OSLHA Volunteer

**Shelley Moats:** Employed by Norton Children's Medical Group

Non-financial: Chair, KY EHDI Advisory Board; AAA Volunteer; invited presenter for various organizations

**Charlotte Mullen:** Employed by Boston Children's Hospital

Non financial: None

# How Do Pediatric Audiologists Get Data on Small Children? It's MAGIC!



## The Real Answer:

- OTJ tricks that you learn patient by patient
- Creativity
- Flexibility
- Persistence!



## Unsedated ABR - PRE-INSTRUCTION IS KEY!

- Give instructions when appointment is scheduled and again at appointment confirmation
- Provide schedulers/front desk with a script for test instructions
- If possible also send instructions via patient communication in the medical record have translated versions available for common languages

# Unsedated ABR

Provide room that is dark (dimmer on lights is optimal), rocking chair for parents to feed (bobby/nursing pillow), vibrating seat for baby to sleep



Image: boppy.com



Image: Pampers.com

# Unsedated ABR

- Be prepared to change plans!
- Swaddle, Super Swaddle! Sound machine!
- Will baby fall back asleep in the car?



Image: theollieworld.com



Image: The Today Show

# Tips for successful behavioral evaluation (6 month -3 years)

- For objective measures:
  - Talk to the child's parent/caregiver
  - Prepare the child!
    - Get on their level!
    - Let them touch the probe
    - Do the procedure on the parent first
  - Work backwards if needed



# 6 months-3 years

- DISTRACT, DISTRACT, DISTRACT!
  - Dollar aisle light up toys! Plastic is best so they can be wiped
  - Ask parents to pull up child's favorite video on their phone/use a clinic tablet
  - Bubbles
  - Stickers
  - Give the child a lollipop or snack if all else fails!



# 6 months-3 years

- For VRA:
  - Find out if patients have any nicknames or favorite songs
  - Think about seating
    - High chair, parent lap, child-sized chair
  - Keep moving!
  - Don't be afraid to interact (test assist)



## 3-5 year olds!

Start building the relationship as soon you see the patient.

Talk to patient-get to their level.

Tell the patient what is happening in words that they understand.

# 3-5 years old

- Have numerous options of toys!



If infection control is a concern (pandemic protocol) or children with complex medical conditions

- Disposable CPA toy: cotton balls into a Solo cup or sticker cart



# Tips for successful audiologic evaluation 3 years-5 years

Make it fun-Let child make a mess with a soft toy (and I clean up)



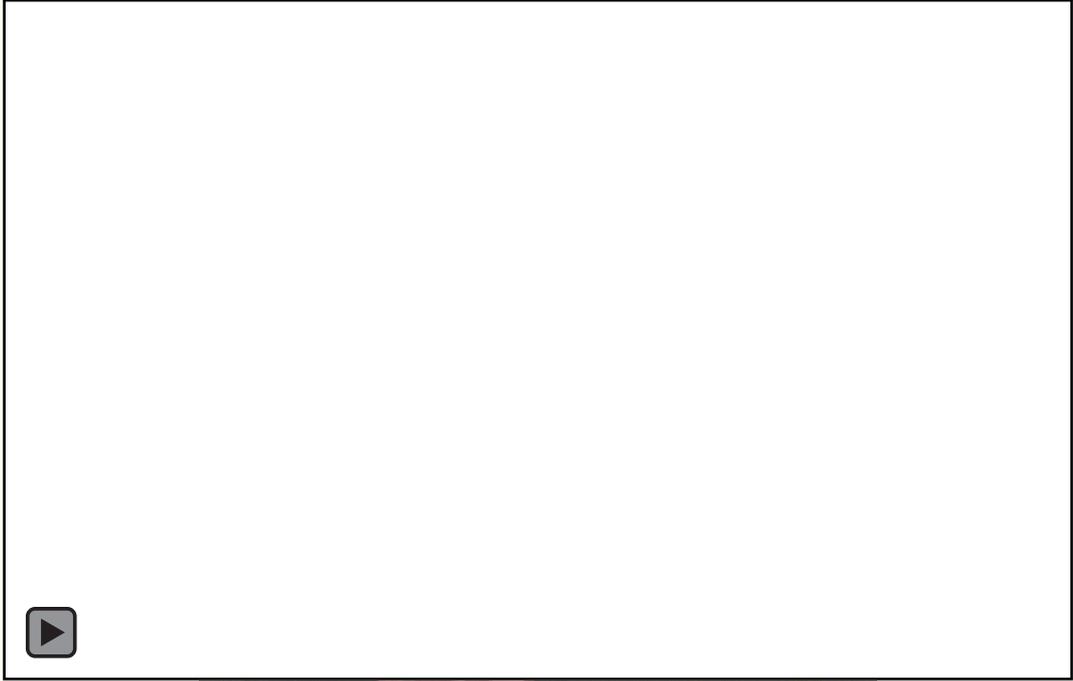
# Tips for successful audiologic evaluation 3 years-5 years

- Buttons!



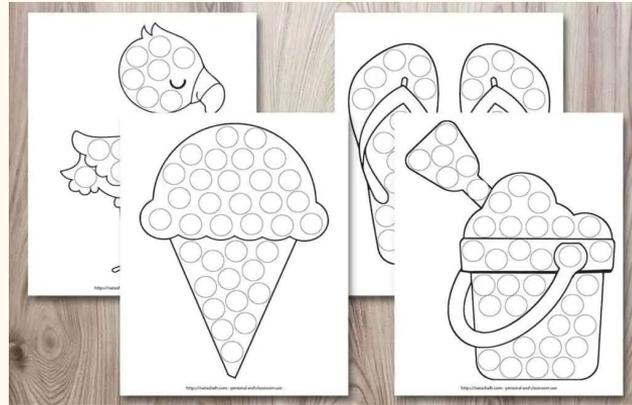
# 3-5 years old - extended testing or difficult to test

- Bring CPA toy from home so parents can practice with the child ahead of appointment
- Food and a plastic cup!
- Multiple ways to play with the same toy
- “RACE” - who can hear it first, child or test assistant?
- Variety of toys is KEY. Kids get bored quickly!

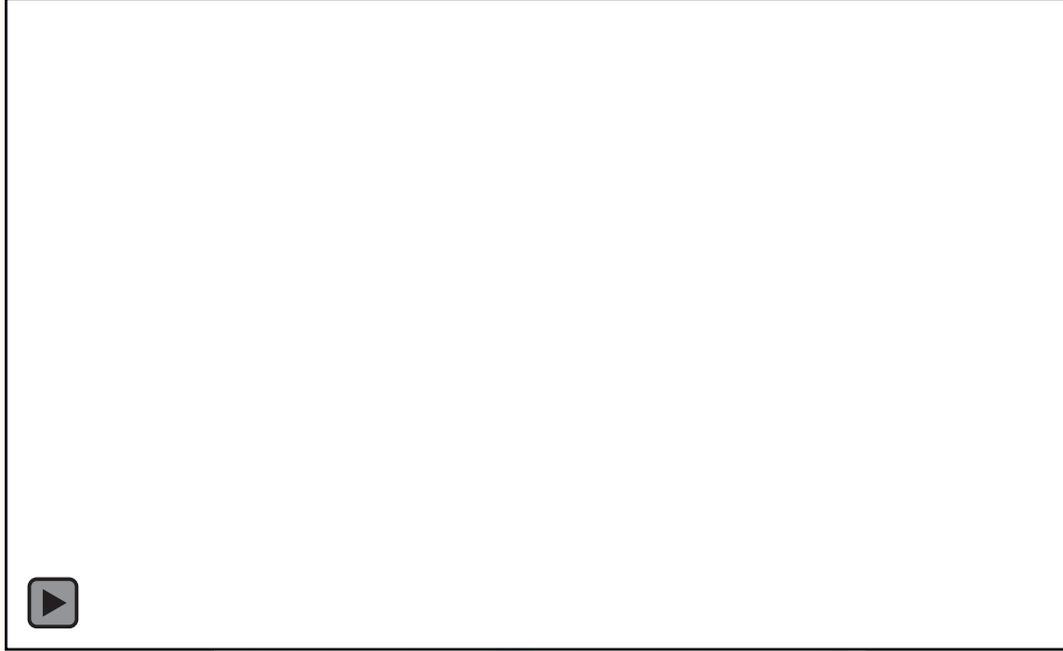


# Tips for successful audiologic evaluations 5 years and up

- Get creative with “responses”
- High five, thumbs up
- Dot sticker pages



- Play catch the beep with the clicker
- Use VRA reinforcer periodically as a surprise/with button
- Lots of encouragement, reminders to keep listening



# Thank you!

For more information visit:

Super Swaddle: [One Minute Mom: How to Swaddle a Baby - Super Swaddle to Help babies sleep longer - YouTube](#)