10 Things My Son Taught Me That I Didn't Learn in My Audiology Program

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Meet the Petralba Family



Becoming an Audiologist

- Always wanted to work in health care
- Was originally interested in SLP
- Quickly became more drawn to audiology
- Bachelor of Science in communication disorders at Central Michigan University in 2011
- Doctorate of Audiology at East Tennessee State University in 2015





EAST TENNESSEE STATE UNIVERSITY

Meet Benjamin

- Will turn 3 in May
- Hearing aid in the right ear, cochlear implant left ear
- Total communication, mostly vocalizations
- 20-30 expressive words and signs
- Planning to attend preschool in a total communication classroom in the fall



Benjamin's Arrival

- Normal pregnancy, no complications
- Expecting healthy child
- Spontaneous uncomplicated delivery
- Immediately nurses were concerned about his color
- Taken to the NICU
- Initial Diagnosis
 - Congenital heart disease
 - Trunkus Arteriosis
 - Interrupted Aortic Arch
 - Choanal atresia
 - Abnormal pinna shape
 - Horseshoe kidney
 - Colobomas
 - Germinal matrix brain bleed



#1 Hearing is not always the first priority

Heart

Airway

Feeding



#2 How much parents have to advocate for their children

- -NICU attending refused to do CT of ears with heart CT as there was no ENT at the hospital Benjamin was in.
- -Ear imaging was delayed until he was 2 years old due to dealing with other medical issues and difficulty accessing ENT care
- -NICU attending also refused to do a hearing screening because, "He would probably fail it."



#3 Accessing care in the community is not always easy

Trouble scheduling with audiologist office

Early Intervention said he was too young for a hearing test



#4 Not all providers use best practices

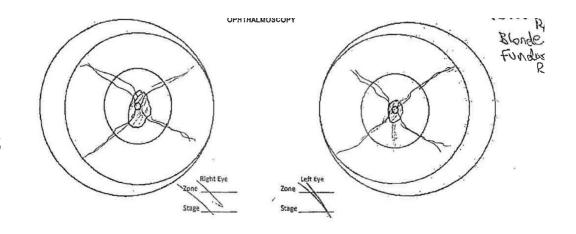
 Hearing aids had two different fitting formulas

 If you are not comfortable doing a procedure get comfortable with it or refer out to someone that is



#5 Choosing communication approach can be complex

- Vision status
- Vocal cord paralysis
- Delayed motor milestones



#6 Kids don't keep hearing aids in!

- OT checklist
 - Removing a hat
 - Removing socks
- Hearing aid lost in the baby bouncer for over a month
- Cochlear implant is currently missing
- #1 topic in hearing loss Facebook group
 - Favorite answer to this question: First we put the hearing aid in 500 times a day, eventually it was 400 times a day, then 300, then 200, etc...



#7 Importance of teaching families clear speech

- Cranial helmet use for 10 months
- Hospitalizations not able to wear hearing technology sometimes
- Not all families can put the hearing aids in 500 times a day



8 Importance of support network

- Charge Syndrome Foundation
 - State liaisons
 - West family support group
 - o Birth to 3 support group
 - Bi-annual conferences
- Local Hands and Voices Chapter
- Facebook groups



#9 Navigating insurance coverage can be challenging

- Can be very frustrating somehow my head has not exploded
- A good case manager is invaluable
- Hospital social workers are also very helpful



#10 How rewarding it is to be a mom of a kiddo with hearing loss

The journey has not been easy but nothing is more exciting than watching Benjamin develop a new skill!



Take Away Points

- -Are you providing best practices? Don't be afraid to refer out if necessary.
- -Are you referring all newly diagnosed patient to local Hands and Voices chapter?
- -ls it easy for patients to make appointments with your office?
- -Are you providing as much help as possible with navigating insurance coverage for devices?
- -Are there any opportunities to give in-services in the community regarding hearing loss in the pediatric population?