TeleAudiology

Taking Diagnostics to the Infant

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NDCPD
Minot State University
Center of Excellence

Purpose and Objectives

✓ Contract with HRSA

✓ Develop protocols to complete audiology diagnostics with infants 0-6 months of age using the internet

✓ Deliverables

- Management Protocol
- Technical Protocol
- Tool Kit

Software

✓ Making your Choice

✓ Requires <u>both</u> **"videoconferencing"** and **"desktop-sharing/collaboration"**

Can be accomplished with:

- two separate software solutions or
- one solution that provides both

TeleAudiology is fairly unique

KEY: Desktop Sharing

(HUB needs to take control of the SPOKE desktop/and still see their desktop)

Instrumentation Located at Spoke Site

- ✓ Intelligent Hearing Systems
  Auditory Brainstem Evoked Response Unit
    - All disposables
      (i.e. electrodes, probe tips for insert earphones, etc.)

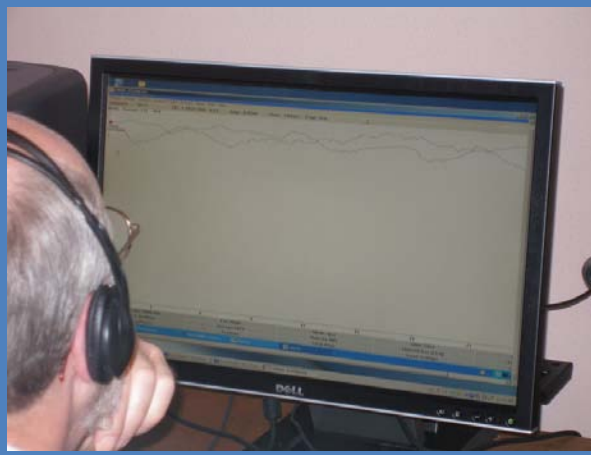- ✓ Laptop Computer

Instrumentation at Hub Site

- ✓ Desk Top Computer with dual screen capability

- ✓ Dual screen allows the video to be observed on one screen and the test results on the other.

  (we use 17" and 19" monitors)

The Paraprofessional at the Spoke Site

✓ Requires intensive training in:

- Importance of testing environment.
- ABR and computer function/hook-up/troubleshooting.
- Electrode site preparation/application
- Function of Pre-Amplifier
- Checking electrode impedance
- Use of insert earphones
- Video conferencing software

- ✓ Once the spoke and hub site are in audio and video contact, the spoke site will relinquish control of their computer to the hub site.

- ✓ The audiologist now controls the ABR test protocols, using the spoke site computer.

- ✓ ABR testing procedures continue as if the patient was in the audiologist 's office.

Test Results:

- ✓ Results of the ABR are stored on the Spoke Computer.
- ✓ Records can be accessed, interpreted and a report generated from the Hub following the assessment as long as the Spoke grants computer control.
- ✓ No patient records are stored on the Hub computer.