LIST OF CLINICAL PRIVILEGES – AUDIOLOGY

PRINCIPAL P performance. ROUTINE US professional st	Title 10, U.S.C. Chapter 55, Sections 1094 and 1102. URPOSE: To define the scope and limits of practice for individual providers. Privileges are be E: Information on this form may be released to government boards or agencies, or to professi tandards of health care providers. It may also be released to civilian medical institutions or or	onal societies or organizations, if needed to lic	ense or monitor
DISCLOSURE	separating from the Air Force. E IS VOLUNTARY: However, failure to provide information may result in the limitation or term	ination of clinical privileges	
	INSTRUCTIONS		
forward to you CLINICAL SU II, check appro	In Part I, enter Code 1, 2, or 4 in each REQUESTED block for every privilege listed. This is to r Clinical Supervisor PERVISOR: In Part I, using the facility master privileges list, enter Code 1, 2, or 4 in in each ¹ opriate block either to recommend approval, to recommend approval with modification, or to re- Credentials Office.	VERIFIED block in answer to each requested	privilege. In Part
CODES: 1. Fu 2. Su 3. No	Illy competent within defined scope of practice. Jpervision required. (Unlicensed/uncertified or lacks current relevant clinical experienc of approved due to lack of facility support. (<i>Reference facility master Strawman. Us</i> u ot requested/not approved due to lack of expertise or proficiency, or due to physical dis	e of this code is reserved for the Credential	s Function.)
CHANGES: A	ny change to a verified/approved privileges list must be made in accordance with Service spe		
NAME OF A	PPLICANT NAME OF MEDI	CAL FACILITY	
I Scope		Requeste	d Verified
P384943	The scope of privileges in Audiology includes the evaluation, diagnosis, treatment and consultation for patients of all ages with dysfunction in hearing, auditory function, vestibular balance, and related disorders. Audiologists manage the hearing conservation program, perform worksite assessment of noise exposure, and noise measurement and analysis.		
Diagnosis	s and Management (D&M)	Requested	Verified
P384945	Tinnitus assessment, rehabilitation and management		
P384947	Auditory processing evaluation		
P384949	Vestibular and balance assessment and management		
P384951	Implantable amplification device evaluation, management and services		
P384953	Rehabilitation counseling and training		
P384957	Hearing protective device fabrication and fitting		
P384959	Hearing protection fit check assessment		
P384961	Hearing aid candidacy assessment, selection, fitting, and counseling		
P389176	Fitness for duty examinations		
Procedures		Requested	Verified
P384963	Pure tone and speech audiometry		
P384965	Acoustic immitance and auditory reflex evaluation		
P384967	Otoacoustic emissions testing		
P384970:	Speech in Noise testing (filtered speech)		
P384972	Auditory evoked potentials		
P384974:	Earmold fabrication, fitting and modification		
P384976	Electroacoustic measurement of hearing aids		
P384978	Verification measurement (i.e. Real Ear, functional assessments)		
D&M Adva	nced Privileges (Requires Additional Training):	Requested	Verified
P420696	Cerumen management		
Other (Facility- or provider-specific privileges only):		Requested	Verified
SIGNATURE	OF APPLICANT	DATE	

CLINICAL PRIVILEGES – AUDIOLOGY (CONTINUED)						
II CLINICAL SUPERVISOR'S RECOMMENDATION						
	RECOMMEND APPROVAL WITH MODIFICATION (Specify below)		DMMEND DISAPPROVAL cify below)			
STATEMENT:						
CLINICAL SUPERVISOR SIGNATURE	CLINICAL SUPERVISOR PRINTED NAME OR S	STAMP	DATE			