

SCOPE OF PRACTICE POSITION STATEMENTS

Policy for Doctorate Degree Representation

The Board of Examiners for Speech and Language Pathologists and Audiologists has established the following policy. It is inappropriate to use Dr. without further clarifying your professional role.

The Board suggests the following terminology: John Doe, Au.D./Ph.D. or John Doe, Au.D./Ph.D., Doctor of Audiology/Speech-Language Pathology, or Dr. John Doe, Audiologist/Speech-Language Pathologist. This clarifies the profession of the individual to the public.

The Board also requires an official transcript which indicates that the doctorate degree has been conferred before the licensee can represent himself/herself with that title.

Foreign-trained Applicants

Foreign-trained applicants must contact an education evaluation service and obtain an official education evaluation showing (a) your educational level and (b) a detailed course-by-course evaluation of your coursework and practicum completed.

ASHA Certificate of Clinical Competence

Effective June 1, 2006, the Board no longer accepts the ASHA Certificate of Clinical Competence as being reciprocal with the North Carolina statute requirements for licensure.

Fiberoptic Endoscopic Evaluation of Swallowing (FEES)

Whether any licensed speech-language pathologist may participate in FEES is a question of the level of the training of the individual speech-language pathologist, the quality of the facility in which the procedure is performed, and the risk management policy of the hospital. Accordingly, the Board is unable to say categorically that either all speech-language pathologists may perform the FEES procedure or that none are able to perform the procedure, as this is a matter of individual ethical consideration.

The question is not so much one of scope of practice as one of individual ethics. G.S. 90-301(A)(8) states that it is unethical for a person licensed to provide services for which the licensee is not properly prepared to perform.

Licensed speech and language pathologists who perform fiberoptic endoscopic evaluation of swallowing (FEES) should be prepared to produce evidence of special preparation in this field to the Board or to others who may question the specific qualifications of a particular licensee.

Pharyngeal and Tracheal Suctioning

Pharyngeal and tracheal suctioning is not recognized by ASHA as being within the scope of practice of speech and language pathology. This, however, does not prevent a speech-language pathologist from performing suctioning if the individual is appropriately trained. The North Carolina Board of Examiners considers this activity to be a workplace issue and therefore subject of professional oversight of the institution where the activity is conducted. Deep suctioning would be considered below the tongue base if performed orally and more than four inches (with an adult) if performed from the trachea, as long as the suctioning does not cause discomfort. The bottom line relative to this Board's stance is that the speech-language pathologist should be precepted by nursing or respiratory therapy and be in some manner credentialed to perform suctioning by the institution as a means of protecting the public. The primary statutory language in Article 22 can be found in 90-301A (8), Unethical acts and practices. This simply states that one can not perform an activity or task if one is not properly prepared or legally qualified to do so.

Topical Anesthetics in Speech-Language Pathology

Whether any licensed speech-language pathologist may participate in the administration of topical anesthetics is question of the level of the training of the individual speech-language pathologist, the quality of the facility in which the procedure is performed, and the risk management policy of the facility. Accordingly, the Board is unable to say categorically that either all speech-language pathologists may perform the administering of topical anesthetics or that none are able to perform the act of administering a topical anesthetic, as this is a matter of individual ethical consideration.

The question is not so much one of scope of practice as one of individual ethics. G.S. 90-301(A)(8) states that it is unethical for a person licensed to provide services for which the licensee is not properly prepared to perform.

The American Speech-Hearing-Language Association (ASHA) states in the ASHA Report (Supplement #7, March 1992) that "Administration of medication to achieve a desired patient state is a medical procedure requiring physician or dentist prescription, physician or dentist approval of the conditions of administration and monitoring, and physician or dentist availability for provision of emergency care that may be required."

These issues should be defined in specific, written protocol or institutional policy that the speech-language pathologist develops in collaboration with the physician who is responsible for patient care. The protocol or institutional policy should be signed off on by the physician authorizing administration of the anesthetic. At minimum, the protocol or institutional policy should include the following components:

- A. Facilities and Equipment
 1. Facilities
 2. Back up emergency services
 3. Equipment
- B. Informed consent
- C. Responsible Clinician (Physician)
- D. Documentation
 1. Prior to administration
 2. During administration
 3. After administration
- E. Personnel engaged in administration
- F. Monitoring procedures

Licensed speech-language pathologists who are institutionally credentialed to administer topical anesthetics should be prepared to produce evidence of special preparation in this area to the Board or to others who may question the specific qualifications of a particular licensee.

Certified Technician

The term “certified technician” as used in G.S. 90-294(f) is synonymous with “certified audiometric technician”, “certified industrial audiometric technician”, or similar designations used for audiometric technicians in industry. Certified audiometric technicians may perform air conduction, threshold audiograms required by the Occupational Safety and Health Act (OSHA) for industrial hearing conservation programs, provided that the following three conditions are met:

- The audiometric technician has received appropriate instruction, including supervised practicum, in the principles and specific techniques for testing hearing in the industrial environment. The standards established by the Council for Accreditation of Occupational Hearing Conservation (CAOHC) for certified occupational hearing conservationists meet this training requirement. Where other training programs are used, the curriculum shall be in writing and available for inspection by the Board of Examiners, if necessary.
- Supervision of the audiometric technician must be vested in a licensed physician or licensed audiologist.
- A licensed audiologist who supervises the activities of audiometric

technicians, whether as employer or program consultant, must provide documented sufficient on-site supervision of the technician to ensure continuous adherence to the standards of this statute as well as relevant OSHA regulations.

Audiology Habilitation/Rehabilitation

It is the Board of Examiner's opinion that habilitation/rehabilitation includes the dispensing of hearing aids. This does not supersede the requirements of any other statute.

Contracted Audiologist

A contracted audiologist is one who holds a valid North Carolina audiology license and provides audiology services at a particular location and is available each day for direct one to one testing, counseling, etc. with a work schedule listed for one or more sites.

Cerumen Management by Audiologists

Cerumen management is within the scope of practice of Audiology as defined in North Carolina G.S. 90-293(6) as being related to "disorders of hearing" and for the purpose of "ameliorating, or modifying such disorders." Such services may also be within the scope of practice of medicine and other disciplines.

The Board also notes that not all audiologists are adequately trained to perform this service. G.S. 90-301(A)(8) makes it unethical for a licensee to perform services for which the licensee is not properly prepared.

Whether any particular licensed audiologist may perform cerumen management is a question of the level of the training of such licensee. Licensed audiologists who perform this service should be prepared to produce evidence of special preparation in this field to the Board or to others who may question the specific qualifications of a particular licensee.

Supervised Experience Year for Au.D. Applicants

Students enrolled in Au.D programs who are completing their fourth year internship and do not hold a terminal degree must be continuously enrolled in a university training program for their temporary license to be valid. If they do not remain enrolled, the temporary license will be suspended.

License Renewal Notices

Be advised that the license renewal notice sent as a reminder that license renewal fee needs to be remitted in order to renew the license is sent as a courtesy by the Board. The notices are not required by the statute and it is the **LICENSEE'S RESPONSIBILITY TO KNOW WHEN THE LICENSE EXPIRES AND TO RENEW IT IN A TIMELY FASHION.**