

(Approved by the Board of Directors of the Educational Audiology Association May 18, 2005)

The Educational Audiology Association believes that educational audiologists are uniquely qualified to serve as active members of cochlear implant teams during the assessment, programming, and management stages of cochlear implantation for children considering or using this device in educational programs. Children who receive cochlear implants spend a great deal of time in a structured learning environment, i.e., the formal school setting. Therefore, it is imperative that appropriate staff in the child's school system be involved from the beginning of discussions addressing the use of a cochlear implant as an option for current or prospective students. The educational audiologist is in a pivotal position to facilitate the exchange of information between the educational setting and the implant center. This collaboration is essential for making informed decisions, developing an individualized education program or family service plan that includes an emphasis on auditory skill development, and, ultimately, helping to ensure optimal use of a cochlear implant in all learning environments.

The Educational Audiology Association believes the following to be responsibilities of educational audiologists as members or potential members of cochlear implant teams:

- Maintenance of accurate information about current candidacy criteria, devices approved for use by children, and outcomes reported in the literature for children who use cochlear implants
- Knowledge of the potential impact of classroom acoustics on the listening of students who use cochlear implants, as well as strategies and devices to facilitate use of cochlear implants in the educational environment
- Familiarization with local implant center personnel and their protocols for assessment, device programming, and follow-up appointments
- Support for families considering cochlear implants by providing unbiased information and additional resources for acquiring accurate knowledge about the device, rehabilitation strategies, alternative amplification devices, and expected outcomes when used with a variety of communication options
- Support for each family's choice concerning the option of a cochlear implant for their child.

The Educational Audiology Association believes that a collaborative approach to service delivery is in the best interest of students and their families and recommends that local implant teams, including educational audiologists, design flexible protocols appropriate for their settings and the students they serve. Early and close collaboration is particularly important in the planning and delivery of appropriate educational audiology services and technology for new students who use cochlear implants and for those who are transitioning from early intervention into school-based programs.

Specific services related to cochlear implants that may be provided by the educational audiologist are identified in the Appendix to this position statement. Many of these services traditionally have been provided by audiologists housed in implant centers, but each service has also been provided by audiologists in educational settings. Services will vary with the needs of each student and family and can also be affected by availability of local resources and equipment, experience, and expertise of implant team members and school personnel, and schedule flexibility for service providers. Additional services and service options may be identified as cochlear implant technology evolves and changes in the future.

Finally, the Educational Audiology Association believes that the ability to use auditory input for communication and learning varies from child to child and should be assessed on an individual basis apart from whatever technology is being considered for accessing the auditory environment. Further, it is the position of the Educational Audiology Association that a cochlear implant is an electrical prosthetic device developed to provide access to auditory input and should not, by itself, limit the choice of communication options used within the educational environment.

In summary, the Educational Audiology Association believes that ongoing collaboration between implant centers and educational audiologists is in the best interest of students who are considering or currently using cochlear implants. Further, it is a mutual responsibility to initiate and maintain this collaborative relationship

between the educational audiologist and the implant center. It is the position of the Educational Audiology Association that an educational audiologist be included as an active member of any cochlear implant team evaluating or providing services to students currently enrolled or anticipating enrollment in an educational program.

APPENDIX: EDUCATIONAL AUDIOLOGY SERVICE OPTIONS FOR STUDENTS USING OR CONSIDERING USE OF A COCHLEAR IMPLANT

(Note: Services will vary with the age (chronological and/or developmental) and language level of each student.)

I. DURING IMPLANT CONSIDERATION AND CANDIDACY PROCESS

- Provision of written/oral information about implants to family and student
- Referral of student/family to other families who have considered implants
- Referral of students/family to implant center(s)
- Support/counseling for family concerning expectations
- Support/counseling for student concerning expectations
- Accompaniment of student/family to implant center
- Exchange of prior audiologic information with implant center
- Participation in implant team meetings
- Facilitation of the exchange of educational information with implant center
- Provision of inservice for school staff concerning available devices, candidacy criteria, and outcome data

II. AWAITING SURGERY AND INITIAL STIMULATION

- Provision of support/information for student and family
- Assistance to student/family in preparing for surgical and initial stimulation experiences
- Teaching of student concepts needed for programming
- Assistance at implant center during device fitting and programming
- Provision of inservice for school staff and students, including expectations and potential classroom modifications

III. DURING COCHLEAR IMPLANT USE

- Consultation/collaboration with school personnel concerning auditory goals/materials/curricula
- Provision of auditory skills training
- Collaboration with implant center concerning auditory performance, effect of classroom acoustics, and need for additional assistive listening devices (e.g., FM systems)
- Completion of traditional audiologic reassessment
- Completion of functional auditory assessment within the classroom environment
- Provision of assessment/modification/management of classroom acoustics
- Collaboration with implant center concerning the fitting and use of personal assistive listening devices for students using cochlear implants
- Participation in educational team meetings
- Assistance with equipment trouble-shooting and maintenance in the learning environment
- Assistance with completion of integrity checks
- Provision of inservice for school personnel targeting the impact of classroom acoustics, use of assistive listening devices, and other issues related to cochlear implant use in the school environment
- Assistance with peer orientation related to cochlear implants and their use
- Participation in implant team meetings
- Participation in programming(mapping) sessions (onsite or remote)
- Provision of processor programming(mapping)*

**NOTE: Programming(mapping) a cochlear implant requires specialized training, expertise, and equipment not typically found in educational audiology programs.*