ALABAMA BOARD OF EXAMINERS FOR SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY

ADMINISTRATIVE CODE

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870-X-1-.01 Definition of Terms

(1) “Audiologist,” any person that engages in the practice of audiology and who meets the qualifications set forth in Alabama Code § 34-28A-21 (1975). A person represents oneself to be an audiologist if that person holds out to the public that he/she practices audiology, by any means, or by any service or function performed, directly or indirectly, or by using the terms audiological, audiologist, audiology, audiometric, audiometrist, aural rehabilitationist, balance center, hearing aid audiologist, hearing and balance center, hearing and balance specialist, vestibular specialist, hearing center, hearing clinic, hearing clinician, hearing conservation, hearing conservationist, hearing therapist, hearing therapy, or any variation or synonym which expresses, employs, or implies these terms or functions.

(2) “Audiology”

(a) The application of principles, methods, and procedures related to the development and disorders of the human auditory-vestibular system, which disorders shall include any and all conditions whether of organic or functional origin, including, but not limited to, disorders of hearing, balance, tinnitus, auditory processing and other neural functions, as those principles, methods and procedures are taught in doctoral programs in audiology in accredited programs.

(b) Such principles, methods or procedures include, without limitation, those of diagnosis, assessment, measurement, testing, appraisal, evaluation, rehabilitation, treatment, prevention, conservation, identification, consultation, counseling, intervention, management,
interpretation, instruction or research related to hearing, vestibular function, balance auditory sensitivity, acuity, function or processing, speech, language or other aberrant behavior and fall prevention, and associated neural systems, or any abnormal condition related to tinnitus, resulting from hearing loss, for diagnosing, designing, and implementing audiological management and treatment or other programs for the amelioration of such disorders and conditions. Management and treatment shall include but not be limited to the activities described in subsection (c) below.

(c) Engaging in the practice of prescribing, selecting, specifying, evaluating, assisting in the adjustment to, and dispensing of prosthetic devices for hearing loss, including hearing aids, and hearing assistive devices by means of specialized audiometric equipment or by any other means accepted by the Board.

(3) “Audiology Assistant,” or any variation, synonym or coinage of the term, is defined as an individual who meets minimum qualifications established by the Board, which are less than those established by Alabama Code §34-28A-21 (1975) as necessary for licensing as an audiologist; does not act independently; and works under the direction and supervision of an audiologist licensed under Section 34-28A-21.

(4) “Board,” the Alabama State Board of Speech-Language Pathology and Audiology (ABESPA).

(5) “Clinical Fellowship (CF),” required practical experience following successful completion of a master’s degree in Speech-Language Pathology at an accredited university or equivalent as determined by the Board.

(6) “Doctor of Audiology,” an individual who holds a doctorate of audiology degree (Au.D.) from an accredited program, or the equivalent as determined by the Board.

(7) “Fourth-Year Internship,” required practical experience following successful completion of educational requirements for the doctorate of audiology degree (Au.D.) at an accredited university or equivalent as determined by the Board.

(8) “Good Moral Character,” A person shall be deemed to be of good moral character provided that said individual has not pleaded guilty to or been convicted of any felony, any violation of corruption of a minor, any offense of violence, theft offense, or drug abuse offense that is not a minor misdemeanor, or any substantively comparable ordinance of a municipal corporation or of another state.

(9) “Gross Negligence,” A Speech-Language Pathologist or Audiologist commits gross negligence, when his/her actions reveal a disregard for the services needed for proper treatment of the patient. This shall include, but is not limited to, the failure to properly diagnose the patient’s condition and failure to properly administer and interpret administered tests based upon current and established procedures of the profession. Evidence of gross negligence can be direct or circumstantial.
(10) “License,” any license issued by the Board to practice audiology or speech-language pathology.

(11) “Licensee,” a person holding a license to practice audiology or speech language pathology issued pursuant to this chapter, but not including the participants of (CF) or Fourth-Year Internship.

(12) “Person,” any individual, group, association, limited or general partnership, corporation, or any other business entity.

(13) “Preceptor/Supervisor/Other synonymous title,” any person who is licensed and has the responsibility of supervising or overseeing the training or activities of assistants, students, externs, participants of CF or Fourth-Year Internship and others providing audiological or speech language pathology services without full licenses.

(14) “Speech-Language Pathologist,” any person who engages in the practice of speech-language pathology and who meets the qualifications set forth in Alabama Code §34-28A-21 (1975). A person represents oneself to be a speech-language pathologist when he/she holds oneself out to the public by any means, or by any service or function performed, directly or indirectly, or by using the terms “speech pathology,” “speech pathologist,” “speech therapy,” “speech therapist,” “speech teacher,” “speech correction,” “speech correctionist,” “speech clinic,” “speech clinician,” “language therapy,” “language therapist,” “language pathology,” “language pathologist,” “logopedics,” “logopedist,” “communicology,” “communicologist,” “aphasiology,” “aphasiologist,” “phoniatrist,” or any variation, synonym, coinage or other word that expresses, employs or implies these terms, names or functions.

(15) “Speech-Language Pathology,” the application of principles, methods and procedures related to the development, disorders and effectiveness of human communication and related functions including but not limited to providing prevention, screening, consultation, assessment and diagnosis, treatment, intervention, management, counseling and follow-up services for disorders of speech (i.e. articulation, fluency, resonance and voice), language (i.e., phonology, morphology, syntax, pre-literate and language-based literacy skills), swallowing or other upper aerodigestive functions; and cognitive aspects of communication (i.e. attention, memory, problem solving). The practice of speech-language pathology also includes establishing augmentative and alternative communication techniques and strategies; including developing, selecting and prescribing of such systems and devices (e.g., speech generating devices); providing services to individuals with hearing loss and their families (e.g., auditory training, speech-reading, speech and language intervention secondary to hearing loss); screening hearing of individuals who can participate in conventional pure-tone air conduction methods and screening middle ear pathology through screening tympanometry for the purpose of referral for further evaluation; using instrumentation (e.g., videofluoroscopy) to observe, collect data and measure parameters of communication and swallowing; selecting, fitting and establishing effective use of prosthetic/adaptive devices for communication, swallowing or other upper aerodigestive functions (does not include sensory devices used by individuals with hearing loss); and providing services to modify or enhance communication performance.
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(16) "Speech-Language Pathology Assistant," or any variation, synonym or coinage of the term is defined as an individual who meets minimum qualifications established by the Board, which are less than those established by Alabama Code §34-28A-21 (1975) as necessary for licensing as a speech-language pathologist; does not act independently; and works under the direction and supervision of a speech-language pathologist licensed under Section 34-28A-21.

Authors: Ada Holyfield, Dr. Barbara Cady, Amanda Blaszczynski and Florence Cuneo.

870-X-1-02 Membership, Qualifications, And Term Of Appointment.

(1) There are seven members of the Board. The overall membership of the Board shall consist of not more than one member from any U.S. Congressional District at the same time. Members are appointed by the Governor from names submitted by the Speech and Hearing Association of Alabama, which shall recommend not less than three persons to fill each vacancy. These recommendations shall consist of at least two persons from each of those Districts not already represented on the Board.

(2) One member shall be a member of the consuming public or an allied professional. Three members shall be licensed speech-language pathologists and three shall be licensed audiologists. The six members who are speech-language pathologists or audiologists shall have been engaged in rendering services to the public and/or teaching and/or research in speech language pathology or audiology for at least five years immediately preceding their appointment and shall be citizens of this state. The six professional speech-language pathologist and audiologist Board members shall at all times be holders of active and valid licenses for the practice of speech-language pathology or audiology in the State of Alabama.

(3) Appointments shall be for a term of three years, with no member eligible to serve more than two full consecutive terms. Terms shall begin on October 1. In the event appointments are not made to fill the expired terms and/or vacancies on the Board, those members of the Board may continue to serve on the Board until new appointments are made.

Authors: Eugene C. Sheeley, Denise P. Gibbs, Loie P. Sears, Gina Murray and Keith Nicholls
(1) The Board shall elect a chair, a vice chair, and a recording secretary at its annual organizational meeting in October. The chair shall conduct the Board meetings, appoint committees, notify the Speech and Hearing Association of Alabama (Association) by registered mail in March of the terms of office that will expire the following September, and notify the Association immediately of any vacancy in an unexpired term. The vice chair shall assume the duties of the chair when the chairman is unable to carry them out. The recording secretary shall record the minutes of each Board meeting, distribute the minutes to each Board member, and serve as chair of the Minutes Committee.

(2) Four members of the Board constitute a quorum to do business. Business shall be transacted in accordance with the most current edition of Roberts' Rules of Order.

(3) The Board may employ, and at its pleasure discharge, an executive secretary and other officers and employees as may be necessary, and the Board shall also outline their duties and fix their compensation and expense allowances.

Authors: Eugene C. Sheeley, Gina Murray and Keith Nicholls. Rebecca Caviness, Susan Grigsby, Richard Talbott

870-X-1-.04 Standing Committees. Certain standing committees will be appointed by the chair. Each committee will follow the general policies of the Board in addition to their specific duties which follow.

(a) Minutes Committee. The committee on minutes is charged with submitting unofficial minutes to Board members for review 10 days prior to the next scheduled meeting and to prepare the official minutes as approved by the Board. A member of the Minutes Committee designated by the committee chair shall prepare and distribute the unofficial minutes in the absence of the committee chair. The Minutes Committee will follow this protocol:

1. The original official minutes will be signed by the presiding officer of the Board at the time of approval and by the secretary who prepared the minutes.
2. Any changes or corrections, other than obvious typographical errors, in the original official minutes shall be initialed and dated by the secretary who made the change or correction.

3. The original, signed, official minutes as approved by the Board will be filed in the Board's office and bound by fiscal years.

4. The original minutes shall not be removed from the Board's office except for removal for binding.

5. A copy of the official minutes, bound by fiscal years, shall be kept by the secretary of the Minutes Committee.

6. A copy of the official minutes shall be filed with the chair of the Board.

(b) Credentials Review and Enforcement Committee. The committee on credentials review and enforcement is charged with investigating and reporting to the Board instances of apparent violations of the Alabama law governing the licensing of speech-language pathologists and audiologists and with monitoring the enforcement of the Alabama law for the Board.

(c) Continuing Education Committee. The committee on continuing education is charged to assist the Board in supporting continuing education to licensees in speech-language pathology and audiology in the form of educational grants. Annually, the committee will review licensees' compliance of continuing education requirements and will conduct audits of continuing education documentation for licensees and assistants.

(d) Rules and Regulations Committee. The committee on rules and regulations is charged with continuous review of existing rules and regulations and with developing and writing all new rules and regulations subject to the approval of the Board.

(e) Application Review Committee. The committee on application review is charged to receive and review all applications that meet ABESPA requirements and make recommendations to the Board for approval or other action.

(f) Budget Committee. The committee on budget is charged to prepare the annual budget and submit it to the State Budget Office within the guidelines required by the State Budget Office. The committee will also present the monthly budget report at each regularly scheduled meeting of the Board.

(g) Liaison and Information Committee. The committee on liaison and information is charged to serve as a link between the Board and any agency or organization who may be seeking information on licensing speech-language pathologists or audiologists,
on the functions of the Board. The role of this committee is to facilitate communications by channeling the questions from those who are seeking information to those committees and Board members who are the most appropriate to furnish the requested information. It is also the responsibility of this committee to report to the Board any information that may be obtained from other state or national agencies, licensure Boards or other organizations, which may in some way affect the function of the Board.

(h) Special Assistance Committee. The committee on special assistance shall be charged with ensuring the Board meets the requirements of ADA or other laws regarding discrimination in serving the public. The committee will receive and review any complaints made regarding the ADA and other discrimination laws or designee. The chair of the special assistance committee will attend any special meetings established by the State of Alabama addressing ADA requirements and other discriminations.

Authors: Eugene C. Sheeley, Denise P. Gibbs, Gina Murray, Keith Nicholls and Paul Stephens

870-X-1-05 Filling An Expired Or Unexpired Term. It is the responsibility of the Board chair to notify the Speech and Hearing Association of Alabama by registered mail in March of Board members whose terms will expire in September of that year. It is also the responsibility of the Board chair to inform the Speech and Hearing Association of Alabama immediately of any vacancy in an unexpired term. A successor shall be chosen by the Governor from not less than three persons submitted by the Speech and Hearing Association of Alabama.

Authors: Eugene C. Sheeley, Gina Murray and Keith Nicholls

870-X-1-06 Removal Of A Board Member From Office. The Governor has power to remove from office any member of the Board for neglect of any duty required by the act creating the Board, for incompetency, or for unprofessional conduct. The Board may vote to recommend to the Governor by a minimum of four aye votes the removal of a member for any one of the following reasons:

(a) Revocation or suspension of license to practice speech-language pathology and/or audiology.
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(b) Conviction of a crime involving moral turpitude.

(c) Failure to attend a majority of Board meetings scheduled at least 10 days in advance.

Author: Eugene C. Sheeley

870-X-1-07 Scheduling Of Meetings. The Board should meet monthly to ensure that applications for licensure, Clinical Fellowship, Fourth-Year Internship, and registration of assistants may be reviewed in a timely manner, but the Board shall meet no less than once every two months. Mandatory meetings include: an organizational meeting in October, a meeting at the annual convention of the Speech and Hearing Association of Alabama and another general meeting before the end of the fiscal year. Meetings shall be held at the permanent office of the Board or such other places as the Chair shall prescribe. Meetings shall be open to the public, and all business of the Board shall be conducted in accordance with the current Open Meetings Act (OMA).

Authors: Eugene C. Sheeley, Robin Auerbach, Beth Hardaway, Gina Murray and Keith Nicholls

870-X-1-08 Public Information.

(1) The public may obtain information about the operation of the Board by communicating with the Board at its permanent address.

(2) The rules and regulations governing the Board shall be published by the Legislative Reference Service.

(3) The Board’s official roster of current licensees will be printed annually in February. To be on this roster, a licensee must renew annually on or before January 31. Information regarding licensure status can be obtained by communicating with the Board at its permanent address.
(4) The Board shall present a report of its activities at the annual convention of the Speech and Hearing Association of Alabama.

(5) An annual report of the business conducted by the Board during the previous year shall be compiled during October of each year. Copies of the annual report shall be submitted to the Governor or his duly named representative and filed in the permanent office of the Board and offices of the members of the Board. The annual report should include an overview of the previous year. Specific items in the report include the following:

1. Members of the Board
2. Executive secretary
3. Board’s address
4. Number and dates of Board meetings
5. Number of all applications reviewed
6. Number of applicants licensed
7. Number of applicants approved for CF
8. Number of Administrative/Disciplinary hearings
9. Number of licenses suspended, pending, or impaired
10. Number of complaints received
11. Number complaints investigated
12. Total money received
13. Total money disbursed
14. Money encumbered at the end of fiscal year
15. Number of continuing education workshops
16. Number of CE participants

Authors: Eugene C. Sheeley, Gina Murray and Keith Nicholls

870-X-1.09 Management Of Funds. The Board shall be financed from income accruing to it from fees, licenses, and other charges and funds collected by the Board. All employee salaries and other expenses shall be paid as budgeted after budgets are approved by the comptroller or within the limitations of any appropriation or funds available for that purpose.

Author:
History: Filed September 20, 1982.
870-X-2-.01 Exemptions. Nothing in these rules and regulations or the current law shall be construed as preventing or restricting:

(a) Physicians or surgeons or persons under their supervision from engaging in the examining, testing and diagnosing of speech and auditory disorders in this state;

(b) A licensed hearing aid fitter and seller (dealer) from engaging in the practice of fitting, testing and selling hearing aids in this state;

(c) Any person licensed in this state by any other law from engaging in the profession or occupation for which that person is licensed;

(d) The activities and services of a person who holds a valid and current credential as a speech and/or hearing specialist issued by the Department of Education of this state, or a person who is employed as a speech-language pathologist or audiologist by the Government of the United States, if such person performs speech-language pathology and audiology services solely within the confines or under the jurisdiction of the organization by which he/she is employed. This provision does not exempt persons who perform speech-language pathology and audiology services outside the confines or jurisdiction of the Department of Education of this state or the Government of the United States. Such persons may, without obtaining a license under this Act, consult with or
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disseminate his/her research findings and other scientific information to speech-language pathologists and/or audiologists outside the jurisdiction of the organization by which he/she is employed. Such persons may also offer lectures to the public for a fee, monetary or other, without being licensed under this act. Such persons may additionally elect to be subject to and licensed under this provisions of this Act;

(e) Persons designated as an intern, trainee, or other such title, who are pursuing a course of study and/or training in speech-language pathology and/or audiology at a college or university. Such activities and services must be part of a supervised course of study and/or training at that institution or its cooperative programs approved by the University;

(f) The activities and services of a person fulfilling the Clinical Fellowship or Fourth-Year Internship if such person is registered as a clinical fellow with the Board;

(g) An unlicensed speech-language pathologist or audiologist, who resides in another state if:

1. The person meets the qualifications and requirements for application for licensure described herein; and

2. Services are performed for no more than seven days in any calendar year; and

3. Services are performed in cooperation with a speech-language pathologist or audiologist licensed by the Board;

(h) A licensed speech-language pathologist or audiologist, who resides in another state and who is not licensed by the Board, may perform speech-language pathology or audiology services in this state provided:

1. The person is licensed under the laws of another state that has established licensure requirements at least equivalent to those established by the State of Alabama, or who holds a Certificate of Clinical Competence in speech-language pathology or audiology from the American Speech-Language-Hearing Association, or its equivalent; and

2. Services are performed for no more than 30 days in any calendar year; and

3. Services are performed in cooperation with a speech language pathologist or audiologist licensed by the Board.
Any practitioner seeking an exemption under paragraphs (g) or (h) must notify the Board.

Any practitioner who does not meet the exemptions stated above must hold an Alabama license. This shall be required for all individuals providing services for consumers in Alabama via in-office practice as well as telepractice or any other electronic means.

Authors: David Savage, H. Gregory Adams, Kay Wilson, Ken Earley, Robert L. Rane and Paul Stephens, Lawrence Molt
History: Filed September 20, 1982. Amended: Filed December 12, 1988; May 17, 1991; Filed June 20, 1997; Filed June 20, 1997.

870-X-2-02 Application For Licensure.

(1) Be of good moral character.

(2) A person eligible for licensure shall make application upon a form and in such a manner as the Board prescribes and shall mail or deliver the application to a permanent address set and made known to the general public by publication by the Board. The application must be received at least five (5) business days prior to the Board meeting at which it will be reviewed.

(3) Applications must be accompanied by a $200.00 application fee, which can in no case be refunded. Applications should be submitted prior to the initiation of practice in Alabama. However, those holding a valid Certificate of Clinical Competence (CCC) and/or an equivalent certification including an active license in Audiology or Speech-Language Pathology in another state may practice during the interim period between submission of the licensure application form and Board action on the application. It is the responsibility of the applicant to ensure that the application is complete.

(4) A license will be issued in either speech language pathology or audiology upon Board approval of the license application and receipt of a $75.00 license fee. The license fee may be prorated based on the following criteria:

(a) Full initial fee of $75.00 is due for all licenses that are approved by the Board within the first eight (8) months of the licensure year (January-August).

(b) Applications submitted after August 31st will be assessed a license fee of $10.00 less per month from the full fee up to December 31st. This proration will be
effective based on the date of license approval, not based on the date of application. The prorated license is valid until December 31st.

(c) The proration fee schedule described in (b) above applies only for individuals submitting applications for licensure for the first time. It does not apply to late renewals see 870-X-4-.03 for information regarding late renewals.

(5) Be a citizen of the United States or, if not a citizen of the United States, a person who is legally present in the United States with appropriate documentation from the federal government.

(6) Each licensee shall notify the board in writing by certified mail within 30 days after he/she receives notice of:

a. a disciplinary action by another licensure board in another jurisdiction; or
b. any criminal convictions, misdemeanors, or felonies from the State of Alabama or another jurisdiction.

Failure to notify the board of such will result in disciplinary action, as stated in Section 870-X-5-.01, est. seq. of the ABESPA rules and regulations.

Authors: David Savage; Robin Auerbach, Beth Hardaway, Kay Wilson, Ken Earley, Robert L. Rane; Fran Buttram, Florence Cuneo, and Denise Heffel and Mark Carroll.

870-X-2-.03 Requirements For Licensure.

(1) Upon receipt of the licensure application and payment of the licensing fee, the Board may grant licensure to any person certified by the American Speech-Language-Hearing Association that is, holding a currently valid Certificate of Clinical Competence (CCC) or an equivalent certification from an accrediting Association or Academy in the area for which licensure is applied. A license may be granted in either speech-language pathology or audiology. Licenses in both speech-language pathology and audiology may be granted to an applicant who requests both licenses and who are certified in both areas. The fee will be twice that of a license in a single area.
(2) Persons without the CCC (not holding a currently valid Certificate of Clinical Competence from the American Speech-Language-Hearing Association) or an equivalent certification from another accrediting Association or Academy must meet the following:

(a) Education Requirements. Submit official transcripts from one or more accredited colleges or universities approved by the Board, showing evidence of possession of at least a Master’s degree, the completion of academic requirements preceding the Fourth-Year Internship in Au.D. programs or the equivalent in speech-language pathology or audiology. The word “equivalent” as stated in the Code of Ala. 1975, §34-28A-1 is defined in these Rules and Regulations as being equal to or greater than requirements for the Master’s degree or Doctorate of Audiology degree.

(b) Practicum Requirements. Provide documentation (letter on university/college letterhead with original signature) from the director of the training program that the individual meets the clinical requirements commensurate with the training program and degree (specifically defined in the document). The practical experience was obtained under the qualified supervision within the training institution or one of its cooperative training programs.

(c) Written Examination Requirements. See Chapter 870-X-3.

Authors: David Savage, Beth Hardaway, Robin Auerbach, Kay Wilson, Ken Earley, Robert L. Rane, Florence Cuneo, and Richard Talbott.

870-X-2-.04 Disposition Of Applications For Licensure.

(1) Board Action.

(a) Applications, which are deemed to be in order, will be reviewed by the Board. If approved, the applicant will be notified and will be licensed upon receipt of the $200.00 application fee and appropriate license fee. Failure of the applicant to respond to the Board’s notification (within 30 days) will necessitate investigation by the chair of the Board’s Committee on Credentials Review and Enforcement.
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(b) A majority vote by a quorum (four members) or more shall be required to determine disposition of an application for licensure. The applicant will be notified by letter of the Board’s decision.

(2) Restrictions on Member Voting. Board members must abstain from voting in the licensing process if there is a conflict of interest.

(3) Issuance of License Certificate.

(a) Each person approved for licensure by the Board shall be issued a license. Licenses will be issued at least quarterly. Applications should be received five (5) days prior to the meeting for review.

(b) A license certificate will identify the licensee as a speech-language pathologist or audiologist.

(c) License certificates shall bear the full name of the licensee, the date of Board approval, and a serial number. They shall be signed by the chair and executive secretary under the seal of the Board.

Authors: David Savage, Denise P. Gibbs, Kay Wilson, Ken Earley, Robert L. Rane and Richard Talbott

870-X-2-05 Clinical Fellowship or Fourth-Year Internship and Requirements.

(1) Persons fulfilling the clinical experience (Clinical Fellowship or Fourth-Year Internship) are required to apply for a provisional license with the Board within thirty (30) days of beginning employment or an internship. The application process must be completed within sixty (60) days of receipt of application. If requirements listed below are not met within sixty (60) days the applicant will lose the application fee and must reapply. A license will not be granted until the applicant has successfully applied with the Board and the supervised clinical experience is complete. The following apply to both Clinical Fellowship and Fourth-Year Internship:

(a) Provisional license application.
(b) $200 application fee.
(c) A notarized statement from the applicant’s Clinical Fellowship or Fourth-Year Internship supervisor which must include:
(i) Beginning date of Clinical Fellowship or Fourth-Year Internship.

(ii) Expected completion date

(iii) Number of hours to be worked each week.

(iv) Place of employment.

(v) Supervisor’s name and Alabama license number.

(d) ALL official undergraduate and graduate transcripts.

(2) The applicant must notify the Board within ten (10) days of any changes in employer or supervisor.

(3) Following approval of the Clinical Fellowship or Fourth-Year Internship, the Board shall issue a provisional license. This provisional license shall reveal the full name of the Clinical Fellowship/Fourth Year Internship, the beginning date of the clinical experience, the expected completion date, the number of hours worked per week, the number of weeks worked, supervisor’s name, supervisor’s license number (supervision to be provided in accordance with the accrediting Association or Academy guidelines), and shall bear a serial number. The provisional license shall be signed by the chair of the Board or the executive secretary under the seal of the Board. The purpose of the provisional license is to indicate to the general public legal compliance by the Clinical Fellowship/Fourth Year Internship with the Board rules and regulations for the period of time indicated on the provisional license. The provisional license shall contain the following statement: “This is to certify that (Clinical Fellowship/Fourth Year Internship’s name) is engaged in the completion of his/her clinical experience and to further certify that (Clinical Fellowship/Fourth Year Internship’s name) is under the supervision of (supervisor’s name) a licensed (speech-language pathologist or audiologist) (license number)”.

(4) Applicant has thirty (30) days to complete the process to obtain a license in Speech-Language Pathology and/or Audiology following the supervised clinical experience.

(5) The Clinical Fellowship must be completed within a maximum of 36 months. The following is a suggested work schedule that may be used to meet Clinical Fellowship requirements:

(a) Full-time Clinical Fellowship:
   30 hours or more per week for 9 months

(b) Part-time Clinical Fellowship:
   25-29 hours per week for 12 months
   20-24 hours per week for 15 months
   15-19 hours per week for 18 months

Professional employment of any less than 15 hours per week will not fulfill any part of this requirement.
For the Fourth-Year Internship, the acquisition of a total 1,820 hours (that include hours obtained prior to the commencement of the Fourth-Year Internship). Total number of clinical practicum hours may vary based on current academic requirements.

Roles and Responsibilities of the Clinical Fellowship/Fourth Year Internship Supervisor.

(a) Provide meaningful mentoring and feedback to the Clinical Fellow/Fourth Year Internship to assist the Clinical Fellowship/Fourth Year Intern in developing independent clinical skills.

(b) Conduct the required minimum supervisory obligations. Supervisory obligations are specified for each segment of the Clinical Fellowship or Fourth Year Internship period. Each segment is one-third the length of the Clinical Fellowship/Fourth Year Internship; for the Clinical Fellowship, a nine-month fellowship would be broken into three segments, each three months in duration, a thirty-six-month Clinical Fellowship would be broken into three segments of twelve months each. For the Fourth Year Internship, the length of the internship period and the consequent length of each one-third interval is determined by the academic institution under whose authority the intern is completing the internship.

(c) Supervisory obligations include 6 hours of direct supervision per segment and 6 indirect monitoring activities per segment. Indirect monitoring might include reviewing diagnostic report/treatment records/plans of treatment, monitoring the Clinical Fellowship/Fourth Year Intern’s work by consulting with colleagues or clients and their families. These requirements are not intended to supplant or supersede supervisory requirements of appropriate accrediting or certifying entities or academic programs.

(d) The main purpose of the Clinical Fellowship/Fourth Year Internship is to improve the clinical effectiveness of the Clinical Fellowship/Fourth Year Intern. The mentoring SLP or Audiologist must provide performance feedback to the Clinical Fellowship/Fourth Year Intern throughout the Clinical Fellowship/Fourth Year Internship. Feedback and goal-setting require two-way communication whereby both the Clinical Fellowship/Fourth Year Intern mentoring SLP or Audiologist and the Clinical Fellowship/Fourth Year Intern share important information about the Clinical Fellowship’s/Fourth Year Internship’s performance of clinical activities. A specific time should be set aside for each performance feedback session at the end of each of the three segments of the Clinical Fellowship/Fourth Year Internship. This session should be used to identify performance strengths and weaknesses and through discussion and goal-setting, to assist the Clinical Fellow/Fourth Year Intern in developing necessary clinical skills for appropriate and effective clinical practice.

(e) If the Clinical Fellowship/Fourth Year Internship supervisor anticipates at any time during the Clinical Fellowship/Fourth Year Internship that the Clinical Fellow under supervision will fail to satisfactorily complete the Clinical Fellowship/Fourth Year Internship, the supervising SLP or Audiologist must counsel the Clinical Fellowship/Fourth Year
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Intern (both verbally and in writing) and maintain written records of all contract and conferences over the ensuing months.

(f) Submit a notarized statement indicating satisfactory completion of the Clinical Fellowship/Fourth Year Internship submission of the academic transcript showing completion of the doctoral program is required to indicate completion of the Fourth Year Internship.

Authors: Martha Paxton, Susan Grigsby, Florence Cuneo. Amanda Blaszczeneski, Florence Cuneo and Lana Langley.


870-X-2-.06 Assistant Registration. Any person not eligible for a license under the provisions of this act who assists in the practice of speech-language pathology and/or audiology under the supervision of a licensed speech-language pathologist and/or audiologist, must have a bachelor's degree or equivalent, as stated in the Code of Alabama 1975, §34-28A-1, in communication disorders or related field in speech-language pathology and register with the Board. Before granting such registration, the Board will consider the academic training and clinical experience of the applicant, the specific duties and responsibilities that will be assigned to the applicant and the amount and nature of the supervision that will be given to the applicant. Registration to assist licensed speech-language pathologist and/or audiologist will be granted under the following conditions:

(a) Qualifications. Under the supervision of a licensed Speech-Language Pathologist or Audiologists, Assistants may assist in providing services commensurate with their training and experience.

(b) Duties: Under supervision of a licensed Speech-Language Pathologist or Audiologist, Assistants may:

- conduct speech-language-hearing screenings
- implement documented treatment plans or protocols as prescribed by the supervising clinician
- document as prescribed by the supervision clinician patient/client progress
- assist during assessment
- assist with informal documentation, prepare charts, record graphs, or otherwise display data
- perform checks and maintenance of equipment
- participate in research projects, in-service training, and public relations programs
(c) **Prohibited Duties:** Assistants will not:
- evaluate speech, language, or hearing
- interpret measurements of speech, language, or hearing
- make recommendations regarding treatment or management of clients
- counsel
- sign test reports and other documents regarding the practice of speech-language pathology and/or audiology

(d) **Assistant Titles.** The applicant, if registered to assist the licensed speech-language pathologist and/or audiologist, may use only the titles, “speech pathology assistant”, "audiology assistant", or “speech-language pathology and audiology assistant”, depending upon the area(s) in which the assistant is registered to assist with the Board.

(e) **Assistant Supervision.** The applicant, if registered, must assist the licensed speech-language pathologist or audiologist. A licensee who supervises a speech-language pathology assistant or an audiology assistant shall be responsible for the direction of all clinical services provided by said assistant and shall be responsible to the client for the performance of these services. The assistant must be under the direct supervision of a licensee. Supervision requires the physical presence of the licensee in the same facility at all times when the assistant is carrying out assigned clinical responsibilities. The licensed supervisor must document direct observation of at least ten percent (10%) of all clinical services provided by the assistant. The licensee shall be responsible for the legal, ethical, and moral professional behavior relating to the approved work each assistant is conducting under the licensee's supervision.

(f) **Advertising.** Registered assistants are not allowed to represent themselves or to be represented as practitioners of speech-language pathology or audiology. Preparation or distribution of announcements of practice, independent telephone listings, or other such notices shall be in violation of the registration to assist and will lead to automatic revocation of such registration.

(g) **Application for Registration.** Application for registration of an assistant must be made to the Board. The application will be completed by the supervisor, signed by the proposed assistant and supervisor, and must be notarized. It will contain the plan (described below) for the assistant and a statement that the proposed supervisor accepts the complete and legal responsibility for the speech-language pathology and/or audiology services of the proposed assistant. An official copy of the proposed assistant’s transcript must be sent to the Board by the school registrar. A statement indicating the number and types of practicum hours obtained must be provided by the director of the training program.

(h) **The Plan for an Assistant.** Registration for a speech-language pathology assistant or an audiology assistant will be considered after a specific work plan has been reviewed and approved by the Board to include:
1. The place(s) in which the assistant will work,

2. A description of the activities to be performed by the assistant,

3. A description of the amount and circumstances of supervision to be given to the assistant, and

4. A description of the training the assistant is to receive in preparation for the performance of the planned activities.

(i) Length of Registration. Registration for assisting a speech-language pathologist or audiologist shall expire December 31 of each year. This registration must be renewed each year effective January 1. Failure to apply for renewal of registration shall result in automatic revocation of registration to assist.

(j) Speech-Language Pathology Assistant and/or Audiology Assistant Fee. There will be a $100.00 fee charged for assistant registration and $50.00 assistant registration renewal. This fee must be submitted with the application and is non-refundable.

(k) Renewal of Registration. All assistant registrations expire on December 31 following their issuance or renewal and are invalid thereafter unless renewed. Renewals of registration must be accompanied by:

1. Written request for registration renewal from the supervisor.

2. Statement of any proposed modifications of the original plan. (see section (f) above).

3. Evidence of a minimum of ten (10) continuing education hours completed in the twelve-month period beginning January 1 and ending December 31 of that year. Academic course work approved by the Board may be used to meet this requirement completed in the twelve-month period beginning January 1 of each year and ending December 31. These continuing education hours must be related to the activities registered to be performed by the assistant as outlined in the application for the assistant (see Section (f) above).

4. A $50.00 annual renewal fee.

(l) Changes in Plan. If changes are desired in the approved supervisory plan, a new application must be filed. An additional registration fee is not required to make changes in the Plan.
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(m) Licensed Supervisor. Each speech-language pathologist and/or audiologist supervising assistants will accept no more than the equivalent of two full-time assistants concurrently.

(n) Board Member Restriction. A Board member shall abstain from evaluating and voting on registration of assistants (aides) if there is any question of conflict of interest.


870-X-2-.07 Reciprocity. The Board, subject to the provisions of this chapter and the rules and regulations of the Board promulgated there under may grant, at its discretion any person who has successfully complied with the requirements of the American Speech-Language-Hearing Association (ASHA) or an equivalent accrediting Association or Academy, and is a holder of a Certificate of Clinical Competence in speech-language pathology or audiology or its equivalent, or who holds a current license in another state in speech-language pathology or audiology may be granted a license according to the following conditions:

(a) That the other state maintains a system and standard of qualifications and examinations for speech-language pathologists or audiologists which meet or exceed the current requirements for licensure in the state of Alabama.

(b) Payment of the current fee established by the Board for other licensees.

(c) Submission of evidence satisfactory to the Board, i.e., proof of current out-of-state license.

Authors: H. Gregory Adams, Kay Wilson, Ken Earley and Robert L. Rane
Continuing education is required for renewal of license. See Chapter 870-X-4-.08 for specific requirements for continuing education.

Authors: Ruth Tucker, Richard Sweitzer, Kay Wilson, Ken Earley and Robert L. Rane
(1) The applicant must pass an examination promulgated by or approved by the Board that shows the applicant has mastered knowledge of:

(a) Anatomical, physiological, physical, perceptual, and linguistic aspects of normal speech, language, and hearing;

(b) The current principles, procedures, techniques, and instrumentation used in evaluating speech, voice, language and hearing;

(c) The disorders of voice, speech, language and hearing and their classifications, causes and manifestations;

(d) The principles and remedial procedures used in the habilitation and rehabilitation for disorders of communications; and

(e) The relationships between voice, speech, language, and hearing problems.

(2) The Educational Testing Service (ETS) national examination Praxis II Audiology exam or the Praxis II Speech-Language Pathology exam may serve as the approved examination for audiology or speech-language pathology respectively. Any equivalent examination approved by the Board may also serve as the approved examination. Passage will constitute achievement of a score at or above the cutoff score determined by the Board. Official notice of the applicant’s score must be sent to the Board by ETS or other approved equivalent examination body.
870-X-3-02 Reexamination. A person who fails an examination may reapply for licensure, submitting the results of later examinations, as long as the applicant meets the other requirements for licensure.

Author: David Savage
870-X-4.01 Expiration.

(1) Licenses expire on December 31st following their issuance or renewal and are invalid thereafter unless renewed. The Board shall mail a notice to every person licensed under this Act giving the expiration date and renewal fee. The notice shall be mailed before December 1 to the licensee's last known address.

(2) A person who fails to renew the license within a period of two years after the date of its expiration may not renew it. It may not be restored or reissued. The license is revoked and may not be renewed or validated. Such person may apply for and obtain a new license if the requirements of this Act are met.

Authors: David Savage, Lissa Van Doorn and Gina Murray

870-X-4.02 Renewal.

(1) Licenses must be renewed annually and the license renewal fee of $100.00 must be paid to the Board on or before January 1 following their issuance or renewal.
The license renewal application must include indication that the licensee has met continuing education requirements as specified in 870-X-4-.08.

(2) Checks drawn on insufficient funds or otherwise invalid must be replaced by certified bonds or a cashier’s check. A service charge of $30.00 will be levied upon licensee in reference to §13A-9-13.2, Code of Alabama (1975).

(3) The licensee is responsible for license renewal. It is also the responsibility of licensees to keep the Board informed of their current mailing addresses.

Authors: David Savage, Denise P. Gibbs, Lissa Van Doorn, Gina Murray and Florence Cuneo

870-X-4-.03 Late Renewal.

(1) Failure to pay the renewal fee prior to January 1 following issuance or renewal will not deprive the licensee of the right to renew but prohibits that individual from continuing to provide speech-language pathology and/or audiology services unless in an exempt situation. The individual will be subject to mandatory continuing education audit and a late renewal penalty if the renewal fee is received after January 31. Any renewal fee paid after January 31 will be increased by $20.00 for each month or fraction thereof that the payment is late up to a maximum of twice the current renewal fee.

(2) All licensees failing to respond to the second renewal notice by March 31 shall be placed on a delinquent list by the executive secretary and referred to the Credentials Review and Enforcement Committee.

Authors: David Savage, Lissa Van Doorn, Gina Murray, and Florence Cuneo

870-X-4-.04 LEAVE BLANK

Author: David Savage

4-2
Inactive Status.

(1) A person holding a valid license and not practicing may put the license in an inactive status by request to the Board, and by paying a fee of one-half (1/2) of the renewal fee. The renewal application must be received by the Board by January 31st.

(2) A license may be held inactive for a maximum period of two years following expiration date of a valid license, at which time notice shall be mailed to the licensee at the last known address. If the licensee fails to renew the license within 30 days of notice of the expiration of two years inactive status, it shall be revoked and becomes invalid. Any licensee wishing to renew thereafter may reapply to the Board. In applying for a new license, the individual must meet continuing education requirements as specified in 870-X-4-.08(b).

(3) An inactive licensee shall not accrue any penalty for late payment of the renewal fee that activates the license.

Author: Denise P. Gibbs and Richard Talbott

Suspension and Revocation, or Reprimand. The license of any person licensed by the Board may be suspended or revoked or a reprimand may be issued by the Board. The provisional license of a Clinical Fellow (CF), Fourth-Year Intern or the registration of a Speech-Language Pathology or Audiology Assistant may be suspended or revoked, or a reprimand may be issued by the Board. The licensed supervisor of the CF, Fourth-Year Intern or Speech-Language Pathology or Audiology Assistant shall be responsible for the legal, ethical, and moral professional behavior of the registered CF, Fourth-Year Intern or Assistant. A second reprimand within a five-year period will be cause for revocation of a license. A license or registration may be suspended or revoked, or a reprimand may be issued upon a finding by the Board that:

(1) The licensee or registered clinician (CF, Fourth-Year Intern or Speech-Language Pathology or Audiology Assistant) has been convicted of a felony in any court within the United States, if the acts for which the person has been convicted are found by the Board to have a direct bearing on whether the person should be entrusted to serve the public as a speech-language pathologist or audiologist.

(2) The licensee or registered clinician (CF, Fourth-Year Intern or Speech-Language Pathology or Audiology Assistant) has been guilty of fraud or deceit in connection with services rendered as a speech-language pathologist or audiologist.
(3) The licensee or registered clinician (CF, Fourth-Year Intern or Speech-Language Pathology or Audiology Assistant) has aided or abetted a person, not a licensed speech-language pathologist or audiologist, in illegally representing such person as a speech-language pathologist or audiologist within this state.

(4) The licensee or registered clinician (CF, Fourth-Year Intern or Speech-Language Pathology or Audiology Assistant) has been grossly negligent in the practice of speech-language pathology and/or audiology.

(5) The licensee or registered clinician (CF, Fourth-Year Intern or Speech-Language Pathology or Audiology Assistant) has willfully violated any of the provisions of state law governing said licensee or any regulations adopted by the Board.

(6) The licensee or registered clinician (CF, Fourth-Year Intern or Speech-Language Pathology or Audiology Assistant) has been guilty of unprofessional conduct or violation of the Code of Ethics.

(7) The licensee or registered clinician (CF, Fourth-Year Intern or Speech-Language Pathology or Audiology Assistant) has used fraud or deception in applying for a license.

(8) Any disciplinary violation by a licensee may be punished with a fine not to exceed $1000.00 per violation. Any disciplinary violation by a registered clinician (CF, Fourth-Year Intern or Speech-Language Pathology or Audiology Assistant) may be punished with a fine not to exceed $500.00 per violation. The Board has the authority to effect any legal proceedings necessary to enforce compliance of this rule.

Authors: David Savage, Loie Sears, and Denise P. Gibbs

870-X-4-07 Replacement. Application can be made to the Board for replacement of a license certificate that has been lost, destroyed, or mutilated. A letter of request will serve as an application and it must be accompanied by a $15.00 fee for replacement license certificate.

Authors: David Savage
History: Filed December 12, 1988.
870-X-4-.08  Mandatory Continuing Education.

(1) Continuing Education Requirements

   (a) Each licensee shall annually complete and report at least twelve (12) hours of continuing education. A minimum of ten (10) shall be in the area of licensure – Content Area I; one of the ten hours should be in the area of ethics; and a maximum of (2) may be in areas related to the profession of speech-language pathology or audiology – Content Area II, all which must contribute to professional competency of licensee. The Board shall not issue a renewal of a licensee’s certificate of registration unless the licensee documents completion of twelve (12) hours of continuing education. The period for completion of the continuing education requirements shall be the period beginning January 1 and ending December 31 of each renewal period.

   (b) Any speech-language pathologist or audiologist whose license has been placed on inactive status must obtain at least twelve (12) continuing education hours for each year of inactive status (refer to 870-X-4-.05 for inactive status) prior to license reactivation. These twelve (12) hours must be in compliance with the content area requirements.

   (c) Any speech-language pathologist or audiologist whose license has been revoked due to failure to renew must demonstrate that they have obtained at least twelve (12) continuing education hours for each year during which the license was in revoked status in addition to the continuing education hours that were required for renewal at the time the license was revoked prior to the granting of a new license.

   (d) Individuals with dual licenses in both speech-language pathology and audiology shall complete at least twenty-four (24) hours of continuing education on an annual basis as a condition of licensure renewal. All twenty-four (24) required hours must meet the qualifying criteria specified. The required hours must be equally distributed between the two areas of speech-language pathology and audiology and must be completed in the twelve (12) month period beginning January 1 and ending December 31 of each renewal period. At the time of renewal, the licensee is required to specify the applicable area for each continuing education activity. Licensees with dual licenses should complete two of the 24 hours of continuing education in ethics.

   (e) A single continuing education activity shall not apply to both areas of dual licensure.

(2) Record Keeping, Recording and Monitoring.
(a) It is the responsibility of each speech-language pathologist or audiologist to maintain and compile accurate records relating to all continuing education courses or activities attended and completed. It shall be the responsibility of each speech-language pathologist and audiologist to maintain the above described documentation and information pertaining to each renewal period for a period of five (5) years and this information shall be submitted on line or a form approved by and provided by the Alabama Board of Examiners for Speech Language Pathology and Audiology at the time of license renewal. The Board will not be responsible for maintaining the licensee’s documentation of the continuing education hours.

(b) Each speech-language pathologist or audiologist must submit by December 31 (the time of annual license renewal) of each year evidence of satisfactory completion of the required hours of continuing education provided for in these rules. This information shall be submitted on a form provided by the Board or on line. Upon receipt, the Board shall have the authority to review this information. Each speech language pathologist and audiologist will be notified that either (1) the requirements of these rules have been fulfilled (by automatic renewal of their license) or (2) that there are deficiencies resulting in noncompliance with rules and regulations relating to license renewal. Licensee with deficiencies will be notified that their license(s) may not be renewed until the noncompliance has been remedied in accordance with the rules relating to license renewal.

(c) Auditing. The Board requires documentation of continuing education for audit purposes. If a licensee fails to renew his/her license on time, this will result in an automatic audit. Each year 25% of all licensees will be randomly selected for audit of their continuing education hours. If it is determined that the speech-language pathologist or audiologist submitted false or misleading documentation to ABESPA, such person may be subject to penalties outlined in Code of Ala., 1975, §34-28A-26.

(d) Each licensee shall certify by signature, electronic or otherwise, on his/her licensure renewal form, under penalty of perjury, that she/he has completed the required twelve (12) hours of continuing education, and that the continuing education obtained meets the qualifying criteria specified.

(e) Any speech-language pathologist or audiologist who receives notification that the license will not be renewed because of noncompliance with these rules will have until January 31 to remedy noncompliance/deficiencies, without penalty.

(f) If noncompliance/deficiencies are not remedied by February 28, the speech-language pathologist or audiologist has an additional thirty (30) days to appeal, in writing, to the Board. Upon the receipt of the written appeal, the Board may request the submission of additional information or records or may require the speech-language pathologist or audiologist to appear before the Board in conjunction with the appeal. All applicable late renewal penalties apply during the appeal period.
(3) Extension.

An extension to the Continuing Education submission/completion timelines may, at its sole discretion, be granted by the Board under the following:

(a) A written request including documentation and justification for the request per the conditions set forth herein, shall be submitted to the Board, by January 31. The speech-language pathologist or audiologist who seeks such an extension shall submit to the Board any additional documentation required by the Board to make a decision concerning the extension.

(b) Extensions shall be granted by the Board only when in their judgment some extraordinary circumstances beyond the control of the licensee could reasonably have prohibited, with a good faith effort on the part of said licensee, compliance with this requirement (e.g. extended illness; force majeure).

(c) When an extension is approved by the Board, a new date for compliance shall be specified by Board.

(d) All late renewal penalties apply until deficiencies are remedied.

(4) Criteria for Approval of Continuing Education.

(a) Continuing Education in Speech-Language Pathology and Audiology shall consist of a series of planned learning experiences beyond the educational programs that have led to the degree that qualifies one for licensure. The licensee must participate in CEU activities of at least twelve (12) clock hours for each license period. A minimum of ten (10) of the required twelve (12) hours of continuing education must improve the professional clinical competency of the licensee in the area of licensure – Content Area I. A maximum of two (2) of the required twelve (12) hours can be in an area related to the area of licensure but must improve the professional competency of the licensee – Content Area II. Dual licensees must complete twenty four (24) clock hours with a minimum of ten (10) hours in each discipline from Content Area I.

CONTENT AREA I:

(1) Anatomic and physiologic bases for the normal development and use of speech, language and hearing and balance

(2) Physical bases and processes of the production and perception of speech, language and hearing

(3) Linguistic and psycho-linguistic variables related to normal
development and use of speech, language and hearing

(4) Technological, biomedical, engineering and instrumentation information which would enable expansion of knowledge in the basic communication processes

(5) Various types of disorders of communication, their manifestations, classification and cause

(6) Evaluation skills, including procedures, techniques, and instrumentation for assessment

(7) Principles in habilitation and rehabilitation of communication disorders

(8) Principles in diagnosis and rehabilitation of balance and vestibular disorders

(9) Ethical Practices

(10) Any other professional competency area that is relevant to treatment and diagnosis.

CONTENT AREA II: (Must relate to the professional competency of Speech-Language Pathology and/or Audiology)

(1) Regulations and implementation of federal and/or state regulated programs

(2) Service delivery models

(3) Administration for supervision issues

(4) Related areas which interface with delivery of speech-language pathology and audiology services

(b) One (1) hour of continuing education credit shall be given for each clock hour of attendance

(c) Acceptable continuing education activities include, but are not limited to:

(1) Workshops in the area of licensure approved by the American Speech-Language-Hearing Association (ASHA) or the American Academy of Audiology (AAA);

(2) Academic coursework at a regionally accredited college or
university in the area of licensure taken for credit or official audit (three semester hours or five quarter hours = 12 hours of continuing education);

(3) Distance learning and self study provided the activity is approved by ABESPA (i.e. continuing education lending library (CELL), video conferences, telephone seminars and Internet courses sponsored by individual private practitioners, universities, schools, clinics, state agencies, hospitals, professional organizations, or related professional organizations);

(4) Workshops and in-services that are university, school, clinic, hospital or state agency sponsored provided they are approved by ABESPA;

(5) Publication of articles in a peer-reviewed journal for the year in which they are published (maximum of two (2) hours;

(6) Scientific or educational lectures to include presentations such as poster sessions given by the licensee; the presenting licensee may count 1 ½ times the value of a workshop the first time it is presented to allow for preparation time (Example: a three hour workshop = 4 ½ hours.) No credit will be allowed for subsequent presentations of the same workshop;

(7) Related areas of study pertain to the understanding of human behavior, both normal and abnormal, as well as services available from related professions which apply to the contemporary practice of speech-language pathology/audiology, e.g., theories of learning and behavior; services available from related professions that also deal with persons who have disorders of communication; information from these professions about the sensory, physical, emotional, social or intellectual states of child or adult; and other areas such as, clinical supervision, counseling and interviewing.

(8) Teaching at the college level in the area of communication disorders is not acceptable.

(d) Pre-approval is required for continuing education events that do not meet the requirements as listed under c.

(e) During the first cycle of licensure renewal, the graduated scale for the collection of continuing education hours is based on the date an applicant receives his/her initial license. One clock hour CEU is required for every month a new licensee is licensed in the state.

(f) Preapproval, by the Board, of a continuing education activity may be requested by the licensee. Preapprovals cannot be retroactive, that is, must be for activities to occur after the Board approval date.
(g) No continuing education credit shall be given for identical courses taken during the same year.

(5) Documentation of continuing education compliance, as required during an auditing period, shall be evidenced by:

(a) A Continuing Education Registry Form from the American Speech-Language-Hearing Association (ASHA) and/or the American Academy of Audiology (AAA), specifically listing the continuing education obtained by the licensee and the dates of obtainment; or

(b) A certificate of attendance provided by a sponsor which contains the date of program, the program title and presenter(s), program site, number of clock hours attended, name of sponsor and name of licensee; or

(c) A personal letter to the licensee which contains the date of the program, the program title and presenter(s), program site, number of clock hours attended, name of sponsor, name of licensee and is signed by a program official; or

(d) An official transcript, from a regionally accredited college or university, indicating successful completion of academic coursework in appropriate subject matter as specified of this rule.

(6) Any speech-language pathologist or audiologist who fails to comply with the provisions of these rules or who otherwise violates provisions of Code of Ala. 1975, §34-28A-25 in connection with the requirements of these rules or relating to any information to be maintained or submitted to the Board as provided for in these rules shall be, upon notice of hearing, subject to the penalties outlined in the Code of Ala. 1975, Chapter 28A, §34-28A-26.

870-X-5-.01 Regulatory Functions Of The Board.

(1) The Board shall administer, coordinate, and enforce the provisions of this Act. The Board shall also evaluate the qualifications and supervise the examinations of applicants for licensure under this Act, and shall, at its discretion, investigate allegations of practices violating the provisions of this Act. Any such allegations submitted to the Board must be written, signed, and include a verifiable return address before the Board will consider investigation. The following procedure will be followed after the receipt of an allegation of a violation.

(a) The letter of allegation will be kept by the chair of the Credentials Review and Enforcement Committee. Any and all communication shall be addressed to the chair of the Credentials Review and Enforcement Committee, the Assistant Attorney General or the Executive Secretary. If any other member of the Board is contacted with regard to the complaint, the complaint may be dismissed. The complainant must be represented by either (1) self or (2) an attorney licensed by the State of Alabama.

(b) The chair of the Credentials Review and Enforcement Committee will write the complainant to acknowledge the receipt of the allegation.
(c) The allegation will be investigated if the Board deems such an investigation to be appropriate.

(d) The complainant will be informed whether the Board investigated and, if so, the outcome of the investigation.

(e) The Credentials Review and Enforcement Committee shall present its finding to the Board in a closed Executive Session of the Board.

(f) Any Board member will abstain from voting in connection with a complaint if there is any question of a conflict of interest.

(g) If the Board deems the facts are not sufficient for a violation of ABESPA’s law and Rules and Regulations, the file shall be closed, and all parties notified. Any party who disagrees with the Board’s closure of a case without further action may appeal the Board’s decision in accordance with Ala. Code §34-28A-26(c) and 41-22-20 (1975).

(h) If the Board finds there is probable cause to take “formal” action on the complaint, the complaint may be resolved through informal or formal proceedings.

(i) Informal Proceedings: This procedure allows the Board to settle a complaint where the following are met:

   i. The complaint is not contested.

   ii. The party admits his/her guilt to the charges.

   iii. The party agrees to a Consent Decree and Final Order.

(j) Formal Proceedings: This procedure requires the Board to conduct a hearing before a final decision is reached.

   i. The hearing on the complaint will be conducted in accordance with the provisions outlined in ALA. CODE §34-28A-26(b) (1975). This provision shall govern notices and the hearing procedure.

   ii. Evidence received at the hearing shall be received in accordance with ALA. CODE §41-22-13 (1975).
iii. After the hearing is conducted, the Board shall enter a final order setting forth its decision. The final order shall comply with the requirements of ALA. CODE §41-22-16 (1975).

iv. If the Board’s decision is decided adversely to a party, he/she may file an application for rehearing with the Board in accordance with ALA. CODE §34-28A-26© (1975).

v. An aggrieved party may appeal the Board’s final decision to the Circuit Court of Montgomery County, Alabama. All matters appealed from the Board’s final decision shall be governed by ALA. CODE §§34-28A-26© and 41-22-20 (1975).

(k) Punishment: Any party, who is found to have violated the provisions governing the Alabama Board of Examiners for Speech-Language Pathology and Audiology through a formal or informal proceeding, shall be subject to the following punishment:

i. Licensees – A licensee’s license to practice Speech-Language Pathology and/or Audiology shall be subject to suspension, revocation, reprimand, or a fine not to exceed $1,000 for each offense. See ALA. CODE §§34-28A-26(a) and 34-28A-42(g) (1975).

ii. Non-Licensees - a non-licensee shall be fined not less than $100 nor more than $500 for each offense. See ALA. CODE §34-28A-4(a) (1975).

(2) The Board shall adopt rules and regulations relating to professional conduct commensurate with the policy of this Act, including, but not limited to, regulations which establish ethical standards of practice, and for other purposes, and may amend or repeal the same in accordance with the administrative procedures of this state. Following their adoption, such rules and regulations shall govern and control the professional conduct of every person who holds a license to practice speech language pathology and audiology in this state.

(3) The Board shall, by appropriate regulations, make provisions for the continuing professional education of persons subject to the provisions of this act.

(4) Upon request and payment of the administrative charge by any person, the Board shall furnish a list of persons licensed under the provisions of this Act.

(5) The Board shall promulgate the rules and regulations necessary to provide for registration and supervision of applicants for licensure while the applicant is meeting the professional experience requirement enumerated in Section 5D of this Act.

(6) The conferral and enumeration of specific powers elsewhere in this Act shall
not be construed as a limitation of the general functions conferred by this section.

Authors: Eugene C. Sheeley, Keith Nicholls


870-X-5-.02 Prohibited Acts.

(1) It is unlawful for any person to practice or offer to practice the profession of speech-language pathology or audiology, as defined in this Act, without being licensed or exempted in accordance with this Act.

(2) It is unlawful for any person to assume, use, or advertise any title or description tending to convey the impression that such person is a speech-language pathologist or audiologist without being licensed or exempted in accordance with the provisions of this Act.

(3) It is unlawful for any person to present or attempt to use the license of another, or to use or attempt to use an expired or revoked license of any person, firm, partnership or corporation.

(4) It is unlawful for any person to give any false or forged evidence to the Board or any member of the Board in obtaining a license [§34-28A-4(a)].

Author:
History: Filed September 20, 1982.

870-X-5-.03 Penalties For Violations of Provisions of the Act. Any person convicted of a violation of this Act shall be guilty of a misdemeanor, and upon conviction thereof, shall be fined not less than $100.00 nor more than $500.00 for each offense [§34-28A-4(a)].

Author:
History: Filed September 20, 1982.
870-X-5-.04 Hearings On Suspensions And Revocations Of Licenses. All such hearings shall be conducted in conformity with the relevant provisions of the Alabama Administrative Procedure Act.

Author:

History: Filed September 20, 1982.

870-X-5-.05 Restoration Of Revoked License And Other Related Relief. The Board, upon an affirmative vote of five members, may restore a previously revoked license, reduce a period of suspension or withdraw a reprimand. The person seeking such relief must meet the following criteria:

(a) The person must comply with any and all terms of probation if applicable,

(b) The person must not currently be in violation of any provision of the law and/or rules and regulations pertaining to speech-language pathology and audiology,

(c) The person must in all respects still be qualified for licensure as a speech-language pathologist and/or audiologist.

Author:
History: Filed September 20, 1982.

870-X-5-.06 Preferring Charges For Violations Of The Act.

(1) The Board, individual members thereof, or such person authorized by the Board to act in its stead, may prefer charges for any of the violations of this Act.

(2) Charges may be preferred in any county of the state in which such violations may have occurred [§34-28A-4 (b)].

Author:
History: Filed September 20, 1982.
(1) The Board, the attorney general, or the local district attorney may apply for an order enjoining or restraining the commission or continuance of unlawful acts.

(2) Application for restraining orders and injunctions shall be made to the circuit court of the county in which a violation of this Act is alleged to have occurred.

(3) The circuit court shall then have jurisdiction over the proceedings and may grant such temporary or permanent injunction or restraining order, without bond.

(4) This remedy is in addition to and independent of any other remedies available for the enforcement of this Act (§34-28A-5).

Author:
History: Filed September 20, 1982.
§ 870-X-6.01 Preamble.

(1) The preservation of the highest standards of integrity and ethical principles is vital to the responsible discharge of obligations in the professions of speech-language pathology and audiology. This Code of Ethics sets forth the fundamental principles and rules considered essential to this purpose. Every individual who is licensed by the Board, registered for CF/Fourth-Year Internship, or registered as an assistant shall abide by this Code of Ethics. Any action that violates the spirit and purpose of this Code shall be considered unethical. Failure to specify any particular responsibility or practice in this Code of Ethics shall not be construed as denial of the existence of such responsibilities or practices.

(2) The fundamentals of ethical conduct are described by Principles of Ethics and by Rules of Ethics as they relate to the responsibility to persons served, to the public and to the professions of speech-language pathology and audiology.

(a) Principles of Ethics, aspirational and inspirational in nature, form the underlying moral basis for the Code of Ethics. Individuals shall observe these principles as affirmative obligations under all conditions of professional activity.

(b) Rules of Ethics are specific statements of minimally acceptable professional conduct or of prohibitions and are applicable to all individuals.

Author: David Savage
870-X-6-.02 Principle Of Ethics I.

(1) Individuals shall honor their responsibility to hold paramount the welfare of persons they serve professionally.

Rules of Ethics

(a) Individuals shall provide all services competently.

(b) Individuals shall use every resource, including referral when appropriate, to ensure that quality service is provided.

(c) Individuals shall not discriminate in the delivery of professional services on the basis of race, sex, age, religion, national origin, sexual orientation, or handicapping condition.

(d) Individuals shall fully inform the persons they serve of the nature and possible effects of services rendered and products dispensed.

(e) Individuals shall evaluate the effectiveness of services rendered and, of products dispensed, and shall provide services or dispense products only when benefit can reasonably be expected.

(f) Individuals shall not guarantee the results of any treatment or procedure, directly or by implication; however, they may make a reasonable statement of prognosis.

(g) Individuals shall not evaluate or treat speech, language, or hearing disorders solely by correspondence.

(h) Individuals shall maintain adequate records of professional services rendered and products dispensed and shall allow access to these records when appropriately authorized.

(i) Individuals shall not reveal, without authorization, any professional or personal information about the person served professionally, unless required by law to do so, or unless doing so is necessary to protect the welfare of the person or the community.

(j) Individuals shall not charge for services not rendered, nor shall they misrepresent, in any fashion, services rendered, or products dispensed.
(k) Individuals shall use persons in research or as subjects of teaching demonstrations only with their informed consent.

(l) Individuals shall withdraw from professional practice when substance abuse or an emotional or mental disability may adversely affect the quality of services they render.

Author: David Savage

870-X-6-03 Principle of Ethics II.

(1) Individuals shall honor their responsibility to achieve and maintain the highest level of professional competence.

Rules of Ethics

(a) Individuals shall engage in the provision of clinical services only when they hold the appropriate license, CF provisional license, Fourth-Year Internship provisional license or assistant registration.

(b) Individuals shall engage in only those aspects of the professions that are within the scope of their competence, considering their level of education, training, and experience.

(c) Individuals shall continue their professional development throughout their careers.

(d) Individuals shall delegate the provision of clinical services only to persons who are certified or to persons in the education or certification process who are appropriately supervised. The provision of support services may be delegated to persons who are neither certified nor in the certification process, but are registered as assistants, only when a licensee provides appropriate supervision.

(e) Individuals shall prohibit any of their professional staff from providing services that exceed the staff member’s competence, considering the staff member’s level of education, training, and experience.

(f) Individuals shall ensure that all equipment used in the provision of services is in proper working order and is properly calibrated.
870-X-6-.04 Principle Of Ethics III.

(1) Individuals shall honor their responsibility to the public understanding of the professions, by supporting the development of services designed to fulfill the unmet needs of the public, and by providing accurate information in all communications involving any aspect of the profession.

Rules of Ethics

(a) Individuals shall not misrepresent their credentials, competence, education, training, or experience.

(b) Individuals shall not participate in professional activities that constitute a conflict of interest.

(c) Individuals shall not misrepresent diagnostic information, services rendered, or products dispensed or engage in any scheme or artifice to defraud in connection with obtaining payment or reimbursement for such services or products.

(d) Individuals’ statements to the public shall provide accurate information about the nature and management of communication disorders, about the professions, and about professional services.

(e) Individuals’ statements to the public shall not contain misrepresentations in advertising, announcing, and in the marketing of professional services, in reporting research results and in the promotion of products.
870-X-6-05 Principle Of Ethics IV.

(1) Individuals shall honor their responsibilities to the professions and their relationships with colleagues, students, and members of allied professions. Individuals shall uphold the dignity and autonomy of the professions, maintain harmonious interprofessional and intraprofessional relationships, and accept the professions’ self-imposed standards.

**Rules of Ethics**

(a) Individuals shall prohibit anyone under their supervision from engaging in any practice that violates the Code of Ethics.

(b) Individuals shall not engage in dishonesty, fraud, deceit, misrepresentation, or any form of conduct that adversely reflects on the professions or on the individual’s fitness to serve persons professionally.

(c) Individuals shall assign credit only to those who have contributed to a publication, presentation, or product. Credit shall be assigned in proportion to the contribution and only with the contributor’s consent.

(d) Individuals’ statements to colleagues about professional services, research results, and products shall adhere to prevailing professional standards and shall contain no misrepresentations.

(e) Individuals shall not provide professional services without exercising independent professional judgment, regardless of referral source or prescription.

(f) Individuals who have reason to believe that the Code of Ethics has been violated shall inform the Board.

(g) Individuals shall cooperate fully with the Board in its investigation and adjudication of matters related to this Code of Ethics.

Author: Denise P. Gibbs
Speech-Language Pathology and Audiology

70-X-6-.06 Principle Of Ethics V. (Repealed)
Author:

870-X-6-.07 Principle Of Ethics VI. (Repealed)

Author:
870-X-7-.01 Preamble. The purpose of this chapter is to define the scope of practice of speech-language pathology and audiology. The scope of practice defined here, and the areas specifically set forth are part of an effort to establish the broad range of services offered within these professions. It is recognized, however, that levels of experience, skill, and proficiency with respect to the activities identified within this scope of practice will vary among individual licensees. By defining the scope of practice of speech-language pathology and audiology, there is no intention to exclude members of other professions from rendering services in common practice areas for which they are competent by virtue of their respective disciplines. It is recognized that speech-language pathology and audiology are dynamic and continuously developing practice areas. In setting forth some specific areas as included within the scope of practice, there is no intention that the list be exhaustive or that other, new, or emerging areas be precluded from being considered as within the scope of practice.

Author: Denise P. Gibbs

870-X-7-.02 Speech-Language Pathology Scope Of Practice. The overriding principle is that speech-language pathologists will provide only those services for which they are adequately prepared through their academic and clinical training, their experience, and their continuing education. The practice of speech-language pathology includes:

(a) Providing screening, identification, assessment, diagnosis, treatment, intervention (i.e. prevention, restoration, amelioration, compensation) and follow-up services for disorders of:
Speech-Language Pathology and Audiology

(1) speech: articulation, fluency, voice (including respiration, phonation, and resonance)

(2) language (involving the parameters of phonology, morphology, syntax, semantics, and pragmatics; and including disorders of receptive and expressive communication in oral, written, graphic, and manual modalities)

(3) oral, pharyngeal, cervical esophageal, and related functions, (e.g. dysphagia, including disorders of swallowing and oral function of feeding; orofacial myofunctional disorders)

(4) cognitive aspects of communication (including communication disability and other functional disabilities associated with cognitive impairment)

(5) social aspects of communication (including challenging behavior, ineffective social skills, lack of communication opportunities);

(b) Providing consultation and counseling, and making referrals when appropriate;

(c) Training and supporting family members and other communication partners of individuals with speech, voice, language communication, and swallowing disabilities;

(d) Developing and establishing effective augmentative and alternative communication techniques and strategies, including selecting, prescribing, and dispensing aids and devices and training individuals, their families, and other communication partners in their use;

(e) Selecting, fitting, and establishing effective use of appropriate prosthetic/adaptive devices for speaking and swallowing (e.g. tracheoesophageal valves, electrolarynges, speaking valves);

(f) Using instrumental technology to diagnose and treat disorders of communication and swallowing (e.g., videofluoroscopy, nasenodoscopy, ultrasonography, stroboscopy);

(g) Providing aural rehabilitation and related counseling services to individuals with hearing loss and their families;

(h) Collaborating in the assessment of central auditory processing disorders in cases in which there is evidence of speech, language, and/or other cognitive-communication disorders; providing intervention for individuals with central auditory processing disorders;
(i) Conducting pure tone air conduction hearing screening and screening tympanometry for the purpose of the initial identification and/or referral of individuals with other communication disorders or possible middle ear pathology;

(j) Enhancing speech and language proficiency and communication effectiveness, including but not limited to accent reduction, collaboration with teachers of English as a second language, and improvement of voice, performance, and singing;

(k) Training and supervising support personnel;

(l) Developing and managing academic and clinical programs in communication sciences and disorders;

(m) Conducting, disseminating, and applying research in communication sciences and disorders;

(n) Measuring outcomes of treatment and conducting continuous evaluation of the effectiveness of practices and programs to improve and maintain quality of services.

Author: Denise P. Gibbs and Richard Talbott

870-X-7-03 Audiology Scope Of Practice. The overriding principle is that audiologists will provide only those services for which they are adequately prepared through their academic and clinical training, their experience, and their continuing education. The practice of audiology includes:

(a) Screening, identifying, assessing, interpreting, diagnosing, preventing, and (re)habilitating peripheral and central auditory system dysfunctions;

(b) Conducting otoscopic examinations and removing cerumen from external ear canal;

(c) Providing and interpreting behavioral and (electro)physiological measurements of auditory, vestibular, and neural functions.

(d) Evaluating and managing children and adults with central auditory processing disorders;
(e) Conducting newborn hearing screening programs;

(f) Assessing and providing nonmedical management of tinnitus;

(g) Facilitating the conservation of auditory system function; developing and implementing environmental and occupational hearing conservation programs;

(h) Selecting, fitting, and dispensing of hearing aids, assistive listening and alerting devices and other systems (e.g. implantable devices) and providing training in their use;

(i) Providing Audiological (re)habilitation and related counseling services to hearing impaired individuals, their families, and other professionals;

(j) Providing related counseling services to individuals with any type of hearing related communication disorder and their family members;

(k) Consulting with educators about communication management of children with hearing impairment;

(l) Consulting and providing rehabilitative services to persons with balance disorders;

(m) Developing and managing academic and clinical programs in communication sciences and disorders;

(n) Designing, implementing, analyzing, and interpreting the results of research related to auditory and vestibular systems;

(o) Screening of speech-language and other factors affecting communication function for the purposes of an audiological evaluation and/or initial identification of individuals with other communication disorders.

(p) Measuring outcomes of treatment and conducting continuous evaluation of the effectiveness of practices and programs to improve and maintain quality of services.

Authors: Robin Auerbach, Denise P. Gibbs, Martha W. Paxton, Lissa Van Doorn, Robert L. Rane and Richard Talbott
Dispensing Of Hearing Aids. These procedures, equipment, and protocols are to be followed and utilized by licensed audiologists who fit and sell hearing aids.

(a) The following minimal procedures shall be used:

(1) Pure tone audiometric testing by air and bone conduction to determine the type and degree of hearing deficiency when indicated.

(2) Appropriate masking when indicated.

(3) Appropriate testing to determine speech reception thresholds, speech recognition scores, the most comfortable loudness levels, discomfort levels and the selection of the best fitting arrangement for maximum hearing aid benefit when indicated.

(b) The following equipment shall be used:

(1) An audiometer which meets the specifications of the American National Standards Institute for diagnostic audiometers.

(2) A speech audiometer or a master hearing aid in order to determine the most comfortable listening level and speech discrimination when indicated.

(c) A final fitting ensuring physical and operational comfort of the hearing aid shall be made when indicated.

(d) Verification of the appropriateness of the hearing aid fitting, such as probe microphone measurements or functional gain, when indicated.

(e) The audiologist will refer the client to a physician when otoscopy, and/or audiological testing indicates infection or anomaly or the client reports a recent history of ear disorder. The hearing aid can be fitted when the client presents medical clearance or the client signs a medical waiver, provided otoscopy and audiological testing verify the medical condition has resolved. Any person with a significant difference between bone conduction hearing and air conduction hearing must be informed of the possibility of medical correction and should be advised to obtain medical clearance prior to the hearing aid fitting.

(f) A licensed audiologist’s office must have available, or have access to, a selection of hearing aid models, hearing aid supplies, and services complete enough to accommodate the various needs of the hearing aid wearers.
Unless otherwise indicated, each audimetric test conducted by an audiologist in the fitting and selling of hearing aids shall be made in a testing room that has been certified not to exceed the following sound pressure levels at the specified frequencies: 250Hz-40dB, 500Hz-40dB, 750Hz-40dB, 1000Hz-40dB, 1500Hz-42dB, 2000Hz-47dB, 3000Hz-52dB, 4000Hz-57dB, 6000Hz-62dB, and 8000Hz-67dB. An exception to this requirement shall be made in the case of a client who requests that the test be conducted in a place other than the licensee’s testing room. When a test is conducted under this exception, the licensee shall obtain a written waiver from the client. The executed waiver shall be attached to the client's copy of the contract, and a copy of the executed waiver shall be retained in the licensee's file. The Board shall have the power to prescribe the minimum procedures and equipment necessary for fitting and selling hearing aids.

Any licensee who fails to comply with the provisions of these rules or who otherwise violates provisions of Code of Alabama, 1975, §34-28A-25 in connection with the requirements of these rules or relating to any information to be maintained or submitted to the Board as provided for in these rules shall be, upon notice of hearing, subject to the penalties outlined in the Code of Alabama, 1975, Chapter 28A, §34-28A-26.

Authors: Richard Gresham, Richard S. Sweitzer, Denise P. Gibbs, Martha W. Paxton, Lissa Van Doorn and Robert L. Rane
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