Study Guide

International Licensing
Examination
for
Hearing Healthcare
Professionals

Prepared by:





Dear Candidate,

Welcome to the hearing healthcare profession!

This purpose of this Study Guide is to help you prepare for the International Licensing Examination for Hearing Healthcare Professionals (the written licensing examination.) It contains important information related to the administration of the examination. As you may know, the examination is used for purposes of licensing and is administered by the International Hearing Society (IHS) on behalf of your state/provincial licensing board.

Please read the Study Guide carefully, and follow the instructions given. In addition to the pertinent information about what to expect before, during, and after the examination, the Study Guide also provides you with a list of recommended reference materials and sample test questions that you may find helpful.

To give you a brief overview, the examination is comprised of one hundred and five (105) multiple-choice questions. You will receive a score based on eighty (80) scored items. Dichotomous scoring is used for grading the examination, which means the answer options are either right or wrong. You will earn one (1) point for each right answer and earn zero (0) points for each wrong answer. Please note that there are a few questions on the exam that request selection of multiple correct responses. For example, if the question asks, "Which two", you must select the two (2) correct answer options in order to earn (1) one point for that question. For more information, please continue reading this Study Guide.

Should you have any questions, please contact your licensing board or the International Hearing Society. We wish you the very best in your journey to become a dispensing hearing care provider.

Sincerely, International Hearing Society

> International Hearing Society 16880 Middlebelt Road, Suite 4 Livonia, MI 48154 Phone 734.522.7200 Fax 734.522.0200 www.ihsinfo.org

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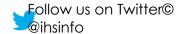
Introduction

About the International Hearing Society (IHS)

The International Hearing Society (IHS) is a membership association that represents hearing healthcare professionals worldwide. IHS members are engaged in the practice of testing human hearing and selecting, fitting and dispensing hearing instruments, and counseling patients/clients. Founded in 1951, the Society continues to recognize the need for promoting and maintaining the highest possible standards for its members in the best interests of the hearing impaired it serves.

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About the Study Guide

The purpose of this study guide is to help you, the "candidate", prepare for the International Licensing Examination for Hearing Healthcare Professionals ("examination"). Take this opportunity to become familiar with some of the various question formats utilized on the examination.

The study guide is not intended to represent the entire body of knowledge, nor does it present all possible types of questions and item styles that may appear in the examination. It is, however, a sample of typical items and item styles used in the exam. Candidates are strongly advised to become familiar with these multiple-choice itemstyles, and to use the guide to begin to learn how to handle this type of exam format.

This study guide does not provide the actual test questions contained in the examination but familiarizes you with the different question types and competency areas that will be tested. The questions are representative of the style and content of the questions used on the current *International Licensing Examination for Hearing Healthcare Professionals* and are based on the current body of knowledge.

¹ Please note: Use of this guide and/or the IHS *Distance Learning for Professionals in Hearing Health Sciences* course does not assure you a passing score on the examination.

About the Licensing Examination

The International Licensing Examination for Hearing Healthcare Professionals is a proprietary examination which is owned and copyrighted by the International Hearing Society.

This examination is intended to provide one of many tools needed in a licensing process. It assists the state/provincial licensing board in its responsibility to identify entry-level professionals whose knowledge and clinical skills meet or exceed basic expected professional standards.

The examination is practice-based, meaning that you will be expected to **understand** and apply, and analyze and evaluate experiences in your everyday professional work.

You will be required to:

- Transfer knowledge
- Show comprehension of material and processes
- Demonstrate standard processes
- Explain concepts or ideas
- Determine an answer based on your ability to implement a process or steps of a process, make something function, or change a working system
- Critically think and demonstrate reasoning ability
- Integrate new or given information with known information or processes
- Make decisions or provide judgments

Each examination question will provide a scenario or information to consider and apply knowledge of processes, relationships, etc., to solve a problem or devise a solution in the given situation. Examination questions are drawn from and referenced to the recommended reference materials in this study guide.

Description of a Successful Candidate

The successful candidate is knowledgeable of, and capable of, safely performing within the scope of practice permitted by the governing agency's license. Within the permitted scope of practice, they are independently capable of determining and understanding a patient's/client's hearing and listening needs; discovering a patient's/client's health history; determining, conducting, and interpreting appropriate audiometric tests; selecting and fitting appropriate instrumentation and other assistive devices; performing proper sanitation; recognizing when referrals to other health care professionals – including more experienced hearing aid specialists – are necessary, and working, when necessary, with associated healthcare professionals to help a patient/client fully understand their particular issues related to hearing and hearing loss.

The candidate must be supervised in accordance with the laws and rules of the governing agency where they intend to practice.

Examination Composition

This examination was developed by practicing professionals in the field of hearing instrument sciences. These individuals volunteered their time and expertise to this project under the guidance of a test development and psychometric services company.

During the development stages of this examination, a job-task analysis survey was distributed to hearing dispensing professionals. From the survey data, a competency model (exam blueprint) was developed.

The examination consists of one hundred and five (105) multiple-choice questions (also known as "items"). Questions from each competency area are included in the examination form. This requires candidates to answer questions from each of the competency areas. Please refer to the competency model (body of knowledge) included in this study guide.

Preparing for the Examination

It has been demonstrated that you can gain the necessary knowledge and experience to become a successful hearing aid specialist by participating in an active practice/clinic in conjunction with your studies.

Your local licensing board utilizes the International Licensing Examination for Hearing Healthcare Professionals from the International Hearing Society. Examination questions will change over time. All examination questions have been evaluated for appropriateness.

It is highly suggested that you purchase **IHS's Distance Learning for Professionals in Hearing Health Sciences course.**² It is a self-paced, independent, self-study course. It is specifically designed as an introduction to the profession. The *Distance Learning* course and other reference materials are an excellent source of information for candidates to study and prepare for this licensing examination. To order the course, visit **www.ihsinfo.org/dlcourse.**

IHS's **Trainer Manual** is designed to provide a step-by-step plan for trainers/sponsors to lead their apprentices through the *Distance Learning* course in preparation for the written licensing examination. This initiative was launched to standardize the training of apprentices. The Trainer Manual is a roadmap for teaching and learning the knowledge and skills necessary for safe and successful entry-level practice. To order, visit www.ihsinfo.org/trainermanual.

Use this Study Guide, recommended reading materials, and hands-on experience you've gained, with an eye toward **career focus** rather than **exam focus**. Hearing

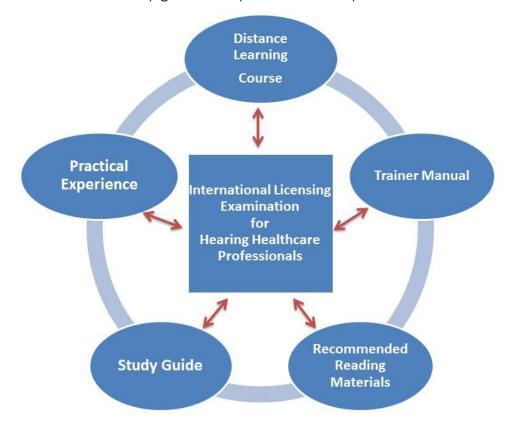
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² Please note: Use of this guide and/or the IHS *Distance Learning for Professionals in Hearing Health Sciences* course does not assure you a passing score on the examination.

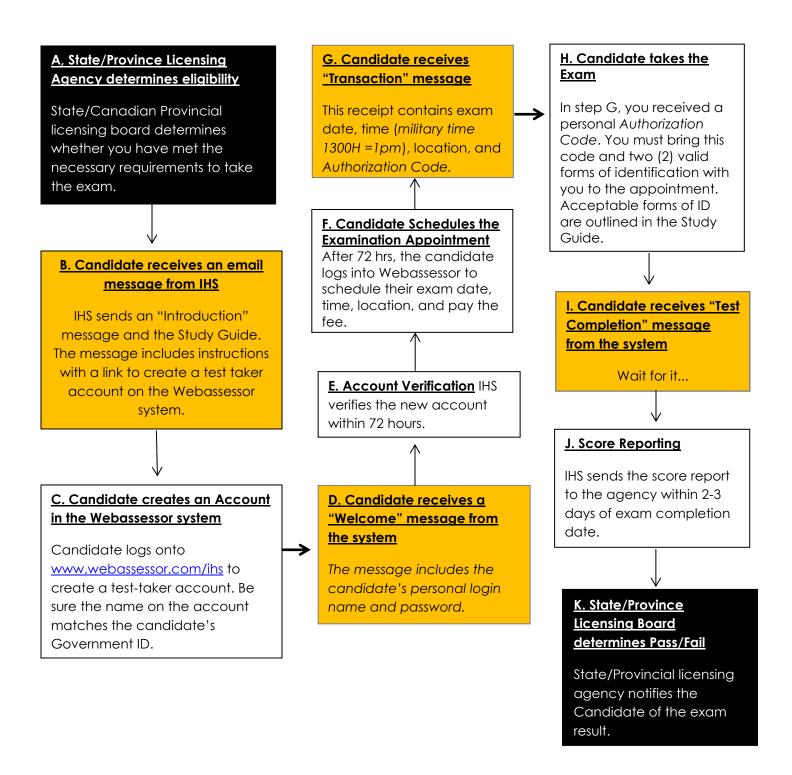
instrument dispensing is a wonderful profession in which you can enhance the lives of many people, as well as your own.

Finally, please share this study guide with your mentor or sponsor.



YOU WILL RECEIVE EXAM RESULTS FROM YOUR LOCAL LICENSING AGENCY, NOT FROM THE INTERNATIONAL HEARING SOCIETY

Exam Process – How does it work?



The International Hearing Society cannot provide exam results to the candidate.

Reference Material

These textbooks and practical experience are essential to your training. Be aware that no single publication or resource contains all the information you will need to learn. The vocabulary and concepts that are presented in these materials are important to your ongoing success in the profession. The hands-on experience you will get by actively working in a practice/clinical setting will help you to understand and apply the material presented. It is important to regularly discuss these concepts with your sponsor or mentor, especially any material you find difficult. This examination is "practice-based", meaning that you will be expected to understand and apply the information from these textbooks in your everyday professional work.

Recommended References

- Bankaitis, A. U., & Kemp, R. J. (2005). *Infection control in the audiology clinic*. (2nd edition or later). Oaktree Products. www.oaktreeproducts.com
- International Hearing Society. (2016). *Professional training textbook in hearing health sciences*. Hayden-McNeil. www.ihsinfo.org/dlcourse
- International Hearing Society. (2016). *Professional training workbook in hearing health sciences*. Hayden-McNeil. www.ihsinfo.org/dlcourse
- International Hearing Society. (2016). *Trainer manual* (2nd edition or later). Hayden-McNeil. www.ihsinfo.org/trainermanual
- Martin, F. N., & Clark, J. G. (2012). *Introduction to audiology*. (11th edition or later). Pearson. www.pearsonhighered.com
- Taylor, B., & Mueller, H. G. (2011). Fitting and dispensing hearing aids. (1st edition or later). Plural Publishing. www.pluralpublishing.com

Supplemental References (not required)

- Metz, M. J. (Ed.). (2014). Sandlin's textbook of hearing aid amplification: Technical and clinical considerations. (3rd Edition). Plural Publishing.
- Wayner, D. S., & Abrahamson, J. E. (2000). Learning to hear again: An audiologic rehabilitation curriculum guide. (2nd edition). Hear Again.
- World Health Organization. (n.d.) Deafness and hearing loss. https://www.who.int/health-topics/hearing-loss

Note: Only IHS textbooks are available for purchase at www.ihsinfo.org

ILE Test Prep

ILE Test Prep is the first and only official preparation tool for the *International Licensing Examination for Hearing Healthcare Professionals* (ILE)³. This subscription-based service provides access to 200+ previously-used exam questions, categorized by topic. There are also flashcards relevant to the ILE and a practice exam with instant results.

Individuals will gain familiarity with the types of questions present on the ILE, knowledge of their strengths and weaknesses that will help focus study efforts, and have unlimited access throughout the subscription period.

To subscribe, visit <u>www.ihsinfo.org/testprep</u>.

What is the difference between the IHS Distance Learning for Professionals in Hearing Health Sciences course and ILE Test Prep?

Distance Learning for Professionals in Hearing Health Sciences provides foundational knowledge for individuals beginning their career as a hearing aid specialist. In tandem with hands-on training, the course provides the knowledge and training necessary to prepare for independent practice.

ILE Test Prep is an exam preparation tool. It is not a substitute for the course. It alone will not prepare someone for licensed practice. IHS recommends a trainee complete Distance Learning for Professionals in Hearing Health Sciences while engaging in handson training. Then, use ILE Test Prep to prepare for the written licensing examination.

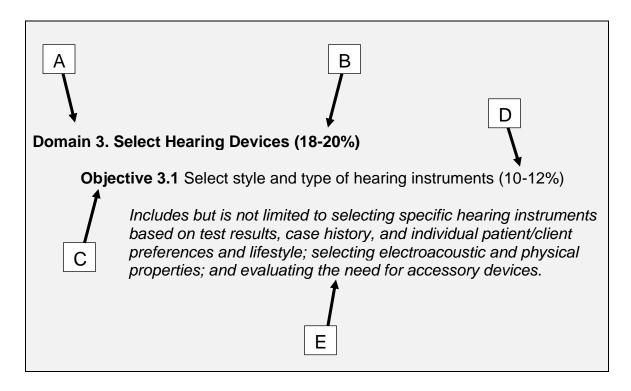


³ Note: Use of ILE Test Prep does not guarantee a passing score on the International Licensing Examination for Hearing Healthcare Professionals.

Competency Model

The examination content is determined by the following competency model. The content and weighting of the competency model was based on input by professionals in the field who completed a survey identifying the most important knowledge, skills and abilities necessary for safe and effective practice by an entry-level hearing aid specialist.

STRUCTURE AND TERMINOLOGY



- A. **Domain:** Broad areas of practice assessed on the exam.
- B. **Domain Weight:** The percent of items on the exam that fall within the Domain.
- C. **Objective:** Specific elements of the Domain that are assessed on the exam. Each exam item is written to target a specific Objective.
- D. **Objective Weight:** The percent of items on the exam that fall within the Objective.
- E. Additional Objective Information: Illustrative examples of the types of knowledge, skills, and abilities assessed by items within the Objective.

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Domain 1. Conduct Patient/Client Assessment (18-24%)

Objective 1.1 Apply infection control protocols (4-6%)

Includes but is not limited to choosing appropriate infection control processes for tools and equipment; observing universal precautions for infection control; distinguishing between single- and multiple-use items; differentiating among sanitization, disinfection and sterilization processes; and identifying personal protective equipment.

Objective 1.2 Apply otoscopic inspection protocols (5-7%)

Includes but is not limited to observing safety protocols during otoscopy; identifying anatomical structures; identifying abnormalities through otoscopic inspection; and recognizing the presence of referral criteria. This objective helps provide evidence of the candidate's ability to perform otoscopy.

Objective 1.3 Utilize audiometric testing protocols (9-11%)

Includes but is not limited to performing air and bone conduction threshold and suprathreshold testing; performing speech audiometry; performing effective masking; and applying principles to include interpreting results of tympanometry/immittance audiometry. This objective helps provide evidence of the candidate's ability to perform audiometric testing and application of tympanometry.

Domain 2. Interpret and Apply Assessment Results (25-31%)

Objective 2.1 Interpret and explain audiometric results (10-12%)

Includes but is not limited to demonstrating an understanding of referral criteria; interpreting pure tone and speech testing results; identifying the need for additional testing; identifying the degree and configuration of hearing loss; and identifying the type of hearing loss.

Objective 2.2 Determine candidacy for amplification (7-9%)

Includes but is not limited to interpreting the case history and outlining contraindications to hearing instrument use.

Objective 2.3 Determine recommendation for amplification (8-10%)

Includes but is not limited to analyzing test results, case history and observations; establishing fitting objectives and goals; and determining devices to be utilized in action plan.

Domain 3. Select Hearing Devices (18-20%)

Objective 3.1 Select style and type of hearing instruments (10-12%)

Includes but is not limited to selecting specific hearing instruments based on test results, case history, and individual patient/client preferences and lifestyle; selecting electroacoustic and physical properties; and evaluating the need for accessory devices.

Objective 3.2 Select earmold or other acoustic coupler (6-8%)

Includes but is not limited to assessing physical properties of the outer ear, taking ear impressions, critiquing ear impressions, and selecting coupler based on patient/client needs.

Domain 4. Fit and Dispense Hearing Devices (16-22%)

Objective 4.1 Utilize protocols to fit hearing instruments and other devices (10-12%)

Includes but is not limited to confirming physical and acoustic integrity of hearing devices; programming and adjusting hearing devices; verifying physical fit and acoustic comfort; orienting patient/client to hearing instruments; and orienting patient/client to assistive devices. This objective helps provide evidence of the candidate's ability to program and dispense hearing instruments and other devices.

Objective 4.2 Verify fitting (3-5%)

Includes but is not limited to selecting verification method based on patient/client; assessing physical and acoustic integrity of hearing devices; interpreting and explaining verification results; and modifying physical and acoustic parameters of device. This objective helps provide evidence of the candidate's ability to perform fitting verification (e.g., speech mapping, REM).

Objective 4.3 Validate fitting (3-5%)

Includes but is not limited to selecting validation method based on patient/client; interpreting and explaining validation results; and modifying physical and acoustic parameters of device. This objective helps provide evidence of the candidate's ability to perform fitting validation (e.g., questionnaire, self-assessment).

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Domain 5. Provide Continuing Care (11-17%)

Objective 5.1 Implement aural rehabilitation and counseling (5-7%)

Includes but is not limited to demonstrating an understanding of the psychology of the hearing impaired; defining and managing patient/client expectations for improved communication; defining and managing family/caregiver expectations for improved communication; and identifying communication strategies.

Objective 5.2 Apply instrument maintenance and troubleshooting protocols (5-7%)

Includes but is not limited to employing hearing instrument cleaning procedures; performing listening checks on hearing instruments; troubleshooting acoustic properties of hearing instruments; and adjusting based upon changes in patient/client hearing loss and/or listening needs. This objective helps provide evidence of the candidate's ability to maintain and troubleshoot instrument performance.

Objective 5.3 Interpret electroacoustic analysis results (1-3%)

Includes but is not limited to identifying need for electroacoustic analysis and comparing electroacoustic analysis of patient's/client's hearing instruments to fitting specifications.

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Acronym/Abbreviation List

Please be familiar with these acronyms and abbreviations which may be used on the examination.

A/D - Analog-to-Digital D/A - Digital-to-Analog AC - Air Conduction DAI - Direct Audio Input ACA - American Conference of daPa - Decapascals Audioprosthology dB - Decibel AD – Right Ear (auris dextra) dB HL - Decibel Hearing Level AGC - Automatic Gain Control dB SPL - Decibel Sound Pressure Level AKS – Anti-Kickback Statute DR - Dynamic Range ALD – Assistive Listening Device DSL I/O - Desired Sensation Level ANSI – American National Standards Input/Output Institute DSP - Digital Signal Processing APHAB - Abbreviated Profile of Hearing ECV - External Ear Canal Volume Aid Benefit ARRA – American Reinvestment and EIN – Equivalent Input Noise Recovery Act ENT - Ear-Nose-Throat AS – Left Ear (auris sinistra) EPA – Environmental Protection Agency AU – Both Ears (aures unitas) FCA - False Claims Act BAHA – Bone-Anchored Hearing Aid FM – Frequency Modulation BC - Bone Conduction FOG – Full-on Gain BiCROS - Bilateral Contralateral Routing of Signal HEAR – History, Evaluation, Assessment, and Recommendations BTE - Behind-the-Ear HF - High Frequency cc - Cubic Centimeters HFA - High Frequency Average CIC - Completely-in-the-Canal HHI – Hearing Handicap Inventory COSI - Client-Oriented Scale of HHIA – Hearing Handicap Inventory for Improvement

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CROS – Contralateral Routing of Signal

Adults

HHIE – Hearing Handicap Inventory for the Elderly	MPO – Maximum Power Output	
HINT – Hearing in Noise Test	MVP – Mini Vent Plugs	
HIPAA – Health Insurance Portability and	NAL – National Acoustic Laboratories (Australia)	
Accountability Act HITECH – Health Information Technology	NAL-L – National Acoustic Laboratories- Linear	
for Economic and Clinical Health	NAL-NL – National Acoustic Laboratories –	
HL – Hearing Level	Non-Linear	
HS – Half Shell	NAL-NL1 – See above	
HTL – Hearing Threshold Level	NAL-NL2 – See above	
Hz – Hertz	NAL-R – National Acoustic Laboratories- Revised	
IA – Interaural Attenuation	NOAH – Software interface	
IHAFF – Independent Hearing Aid Fitting		
Forum	NTE – Non-Test Ear	
IIC – Invisible-in-Canal	NU-6 – Northwestern Auditory Test No. 6	
IOI-HA – International Outcome Inventory for Hearing Aids	OAE – Otoacoustic Emissions	
IROS – Ipsilateral Routing of Signal	OE – Occlusion Effect	
ITC - In-the-Canal	OSPL90 – Output Sound Pressure Level with 90 dB input	
ITE – In-the-Ear	OTC – Over-the-counter	
KHz - Kilohertz	PB – Phonetically Balanced	
LACE – Listening and Communication Enhancement	PB Max – Patient Maximum Performance with Phonetically Balanced Word List	
LDL – Loudness Discomfort Level		
LTASS – Long-Term Average Speech Spectrum	PE – Pressure Equalization PHI – Protected Health Information	
mA – Milliampere	PI - Performance Intensity	
mAH – Milliampere Hours	PMC – Point of Maximum Compliance	
MCL – Most Comfortable Loudness Level	POGO – Prescription of Gain and Output	

PPE - Personal Protective Equipment	SOAP - Subjective, Objective, Assessment, and Plan
PSAP - Personal Sound Amplification Product	SPIN - Speech Perception in Noise
PTA – Pure-Tone Average	SPLITS - Sound Pressure Level in an Inductive Telephone Simulator
REAR – Real Ear Aided Response	SPL – Sound Pressure Level
RECD – Real Ear to Coupler Difference	SRT – Speech Reception Threshold
REIG – Real Ear Insertion Gain	SSPL90 – Replaced by OSPL90
REIR – Real Ear Insertion Response	TD - Threshold of Discomfort
REM – Real Ear Measurements	TDH - Telephonic Dynamic Headphone
REOG – Real Ear Occluded Gain	(Such as TDH-39 OR TDH-49)
REOR – Real Ear Occluded Response	TE - Test Ear
RESR – Real Ear Saturation Response	TM – Tympanic Membrane
REUR – Real Ear Unaided Response	TPP - Tympanometric Peak Pressure
RIC – Receiver-in-Canal	TTS - Temporary Threshold Shift
RITE - Receiver-in-the-Ear	UCL – Uncomfortable Loudness Level
RTG - Reference Test Gain	VC – Volume Control
SADL – Satisfaction with Amplification in Daily Life	VU -Volume Units
SAT – Speech Awareness Threshold	WNL - Within Normal Limits
SAV – Select-a-Vent	WR – Word Recognition
SC – Static Compliance	WRS – Word Recognition Score
SDT – Speech Detection Threshold	
SII - Speech Intelligibility Index	
SIN – Speech in Noise	
SL – Sensation Level	
SNHL – Sensory/Neural Hearing Loss	

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SNR - Signal-to-Noise Ratio

Before the Examination

Non-Discrimination

No candidate shall be denied the ability to sit for the licensing examination because of age, sex/gender, sexual preferences, marital status, religious preference, nationality, race or physical disability.

Accommodation Requests

IHS is committed to complying with the *Americans with Disabilities Act of 1990* ("ADA"). To request accommodations, a candidate may contact IHS to obtain a "Candidate Accommodation Request Form". A candidate must submit the complete request form along with the required supporting documentation prior to scheduling an examination appointment.

IHS will conduct an individualized assessment of each request for accommodations based upon the documentation submitted by the candidate in accordance with the Candidate Accommodation Request Form requirements. The accommodation assessment period is typically sixty (60) days. IHS will then notify the candidate whether their accommodation request has been approved or denied. The candidate then may schedule and pay for their examination appointment.

Under the ADA, IHS is not required to provide accommodations that would fundamentally alter what the examination is intended to test, jeopardize examination security, or result in an undue burden.

To download a Candidate Accommodation Request Form, please visit the "About the Exam" page at www.webassessor.com/ihs.

Creating a Test-Taker Account

The International Hearing Society (IHS) is the administrator of the written licensing examination. Kryterion is the delivery service provider. WebassessorTM is the online system that you will access to schedule your examination appointment.

The state/provincial licensing board determines candidate eligibility to take the examination. Following the licensing board's determination of the candidate's eligibility and notification to IHS, the candidate will receive an email message from IHS with instructions on creating a Webassessor™ test-taker account, which enables the candidate to schedule and pay for their examination appointment. Also attached to this introduction email message is this study guide.

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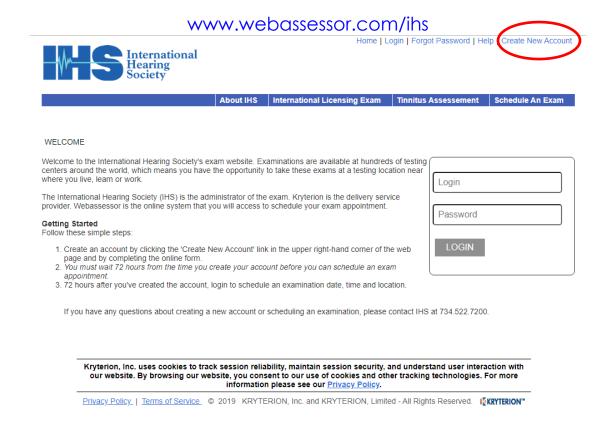
⁴ Please note that the submission of incomplete Accommodation Request Forms and/or incomplete supporting documentation may delay the assessment process.

Note: In most cases, **after** taking the examination, your Webassessor account will be deactivated. To schedule a **re-take**, your state/provincial licensing board will need to inform IHS that you are eligible to re-take the examination. For more information on your local process, contact your state/provincial licensing board.

AFTER becoming eligible by the licensing body and receiving instructions from IHS...

Follow these simple steps to create account:

1. Access the Webassessor™ system at www.webassessor.com/ihs



- 2. Create a test taker account by clicking the "Create New Account" link in the upper right-hand corner of the web page.
- 3. Completing the account form.
 - a. Be sure to select the jurisdiction that you would like the results of your exam to go to. This is the U.S. state or Canadian province that confirmed your eligibility to take the exam.
- 4. Click Save.

	Home Login Forgot Password Help Create New Account	ıt
Login:	Save Cancel	1
Password:	Must be an email address or alphanumeric characters. The password must be at least 8 characters long and contain at least one uppercase character, one lowercase character, one digit, and one special character: l@#\$5%^&*()[]() (e.g., "john \$mithe\$")	
Re-Enter Password		
Legal First Name:		
Legal Last Name:		
Email Address:		
Primary Phone:		
Address 1:		
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	academic degree you have	
Please select state licensure in:	or province you are seeking	
Please select state licensure in:	Save Cancel	

5. 3 business days after you've created the account, log in to schedule an examination date, time, and location. You will pay the exam fee at this time as well.

After the candidate creates their test-taker account, they will receive a "Welcome to Webassessor" email message containing their personal login and password.

IMPORTANT

It is important to note that the candidate's test-taker account must be verified by IHS before the candidate may schedule an examination appointment. The <u>verification</u> <u>period is approximately 3 business days</u> (72 hours) from the time the candidate creates their test-taker account in Webassessor. IHS will verify that the pre-requisites have been met in order to proceed. 72 hours (3 business days) after the account is created, the candidate can log in to schedule an examination appointment. The candidate chooses the date, time and location. Please note, the candidate will not receive another notification to do this.

Scheduling an Examination Appointment

Following the candidate's creation of their test-taker account, and the seventy-two (72) hour verification period, the candidate may log in to their Webassessor™ account to schedule an examination appointment. The candidate will select a testing center, and an examination date and time. Upon check-out, the candidate must pay the examination fee of \$225.00 (USD), plus applicable taxes.

The examination fee of \$225.00 (USD), plus applicable taxes, must be paid each time a candidate schedules an appointment to take the examination, including re-takes. The fee is paid at the time of scheduling by Visa®, MasterCard®, or American Express®. The charge will appear as "KRYTERION*TESTASSESMNT" on your credit card statement. The candidate will receive an individual "Authorization Code" in an email message following the WebassessorTM scheduling process.

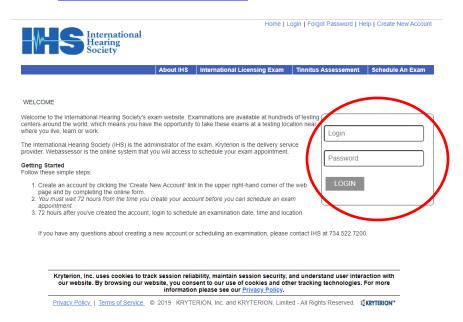
NOTE: Candidates may only register for one exam appointment at a time.

For Technical Assistance with Webassessor[™] or the Testing Centers Network, submit a ticket or live chat with Kryterion at:

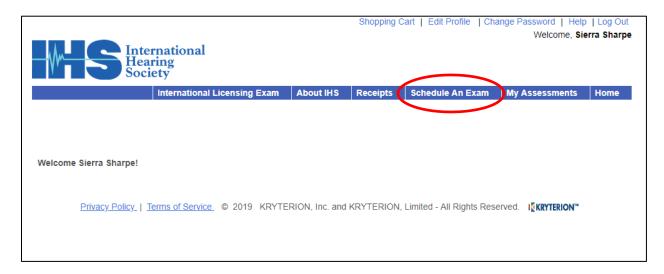
kryterion.force.com/support/s/contactsupport

Follow these Simple Steps to Schedule an Exam Appointment:

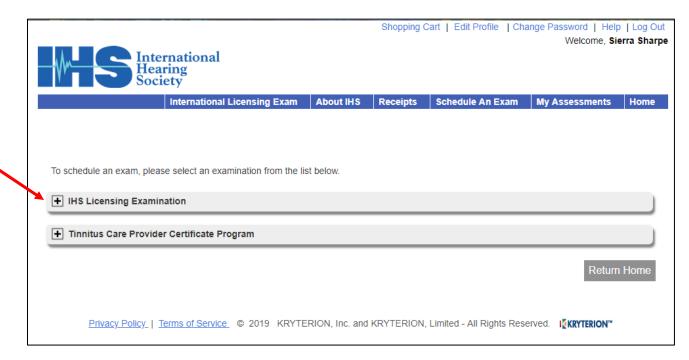
1. <u>LOG-IN:</u> After the seventy-two (72) hour verification period, candidate logs into their account at www.webassessor.com/ihs to schedule the examination.



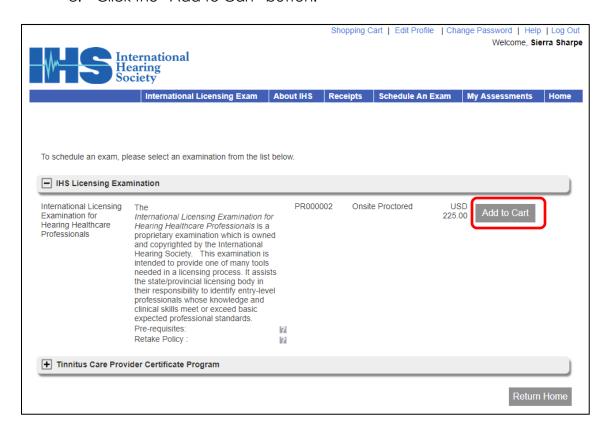
- 2. <u>SCHEDULE AN EXAM:</u> Candidate clicks on the "Schedule An Exam" tab at the top of the screen. Choose the *International Licensing Examination for Hearing Healthcare Professionals* by clicking on the "Add to Cart" button on the right-hand side.
 - a. Click on "Schedule an exam".



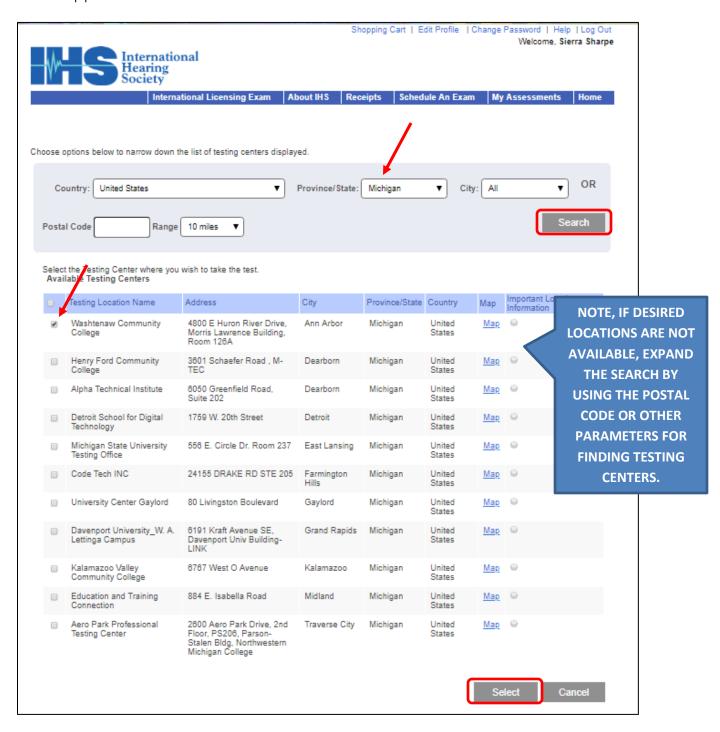
b. To choose the "IHS Licensing Examination", click on the "+" box.



c. Click the "Add to Cart" button.

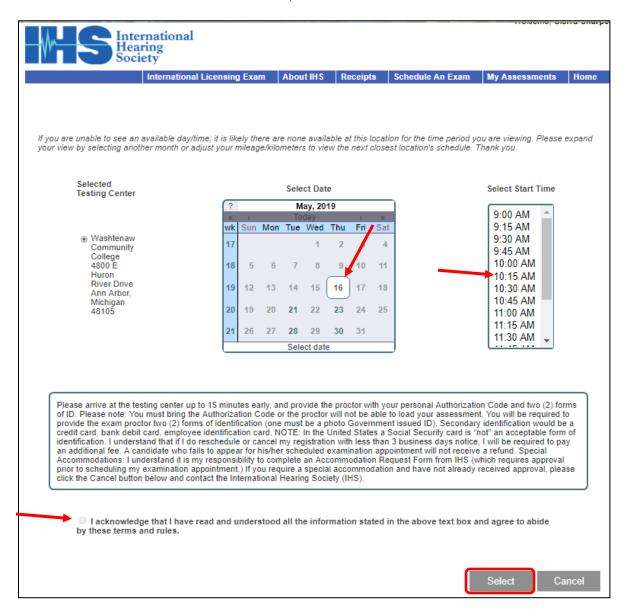


3. <u>SELECT A TESTING CENTER:</u> Candidate chooses the Province/State from the dropdown menu, then clicks on the "Search" button. A list of testing centers will appear.



Please note: You may choose to take the exam at a testing center in a neighboring state or province, which may be more convenient for you. Refine the search using the Postal Code or Range. You may also select multiple testing centers to compare their availability.

4. <u>CHOOSE A DATE AND TIME:</u> Based on the chosen testing center, a calendar of availability will display. This is the <u>real-time</u> availability of that particular testing center. Only the days and times that the chosen testing center is open/available are shown. Click on the day and time desired. Agree to the acknowledgement at the bottom of the screen. Then, click "Select".

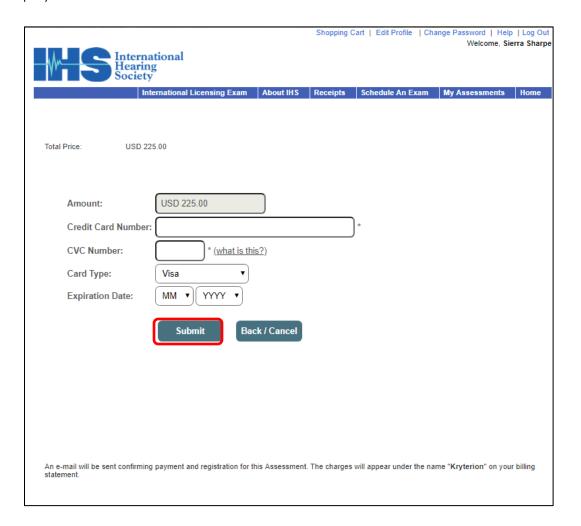


Please note: If the displayed dates and times are not convenient for you, you may search the availability of a different testing center. Click the back arrow to return to the previous screen. You may also select multiple testing centers initially to compare their availability.

5. <u>CONFIRM EXAM DETAILS</u>: Next, the selected exam details will be displayed onscreen. The candidate should confirm the information is correct and click "Check Out."

		Shopping C	art Edit Profile	e Change Pa	assword Help	
International Hearing Society						-
International L	icensing Exam About IHS	Receipts	Schedule An I	Exam My A	Assessments	Home
Exam	Details			Price		Actions
Exam: International Licensing Examination for Hearing Healthcare Professionals	Schedule: Thursday, 16 May 2 Start Time: 10:00 (UTC-04:00)			225.00		Remove
Length: 120 minutes	Location: [Change] Washtenaw Community College 4800 E Huron River Drive Morris Lawrence Building, Roon Ann Arbor, Michigan 48105					
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Privacy Policy Terms of Service	© 2019 KRYTERION, Inc. and I	KRYTERION,	Limited - All Righ	nts Reserved.	I€KRYTERION™	

6. <u>PAY FOR THE EXAM:</u> At check-out, the candidate will pay for the examination. The fee for the exam is \$225.00 per examination, plus applicable taxes. A candidate is not scheduled to take the examination until they check out and pay.



The examination fee of \$225.00, plus applicable taxes, must be paid each time a candidate schedules an appointment to take the examination, including retakes. The fee is paid at the time of scheduling by Visa®, MasterCard®, or American Express®. The charge will appear as "KRYTERION*TESTASSESMNT" on the credit card statement.

For Technical Assistance with WebassessorTM or the Testing Centers Network, submit a ticket or live chat with Kryterion at:

kryterion.force.com/support/s/contactsupport

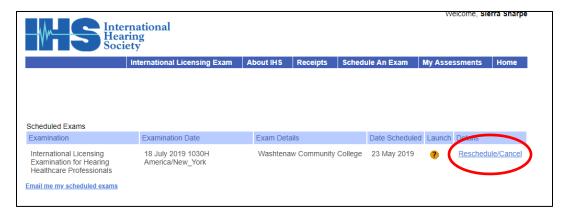
Rescheduling an Exam Appointment

Please note the following parameters regarding rescheduling an exam:

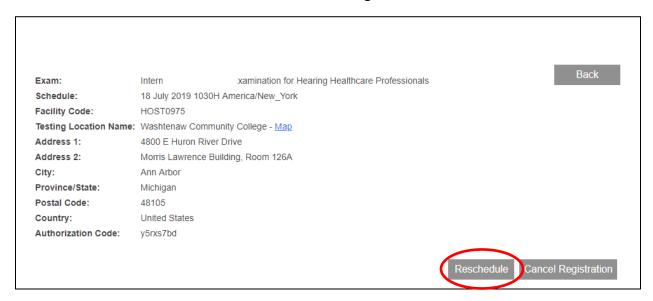
- A candidate may reschedule their examination appointment **more than 72 hours** (exactly) before the appointment time at no charge.
- A candidate may reschedule their examination appointment 3 to 1 business days (24-72 hours) before the appointment time by submitting an additional \$75.00 rescheduling fee.
- A candidate may not reschedule their examination appointment on the examination date (Less than 24 hours). This is considered a no-show, and the candidate forfeits their examination fee.

Follow these steps to reschedule an exam appointment:

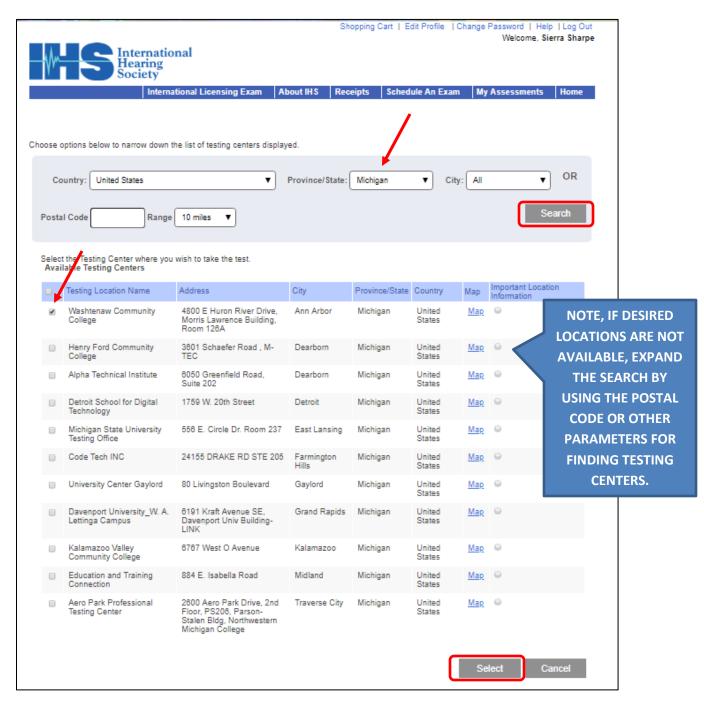
- 1. **Log in** to WebassessorTM.
- 2. Click "My Assessments."
- 3. Click "Reschedule/Cancel."



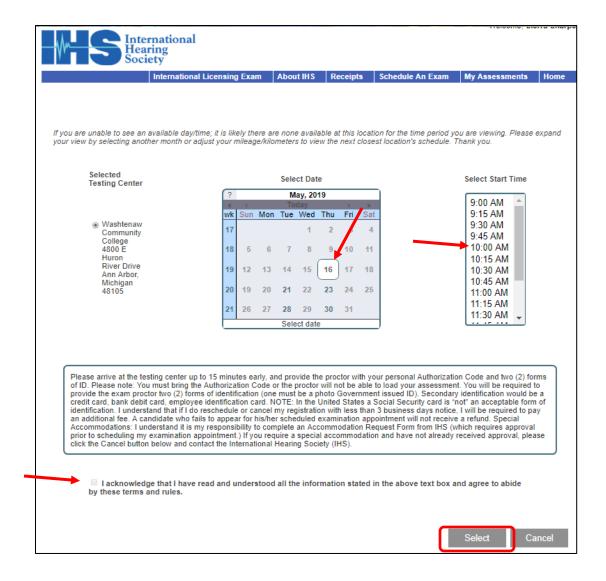
Click the Reschedule button in the lower right corner.



5. **Select a Testing Center:** Candidate chooses the Province/State from the dropdown menu. Then clicks on the "Search" button. A list of testing centers will appear. Multiple testing centers may be selected to compare availability.



6. Choose a Date and Time: Based on the chosen testing center, a calendar of availability will display. This is the <u>real-time</u> availability of that particular testing center. Only the days and times that the chosen testing center is open/available are shown. The candidate clicks on the day and time they desire. The candidate must agree to the acknowledgement at the bottom of the screen. Then, click "Select".



Rescheduling an Exam Appointment (within 72 hours)

Please note if you are rescheduling your exam and you are within 72 hours of your originally scheduled exam time, you will incur a \$75 fee. The following screen will appear and you will be required to enter your credit card information before continuing.

Shopping Cart Edit Profile Change Password Help Log C
Welcome, Sierra Sha
International Hearing Society
International Licensing Exam About IHS Receipts Schedule An Exam My Assessments Home
Total Price: USD 225.00
Amount: USD 225.00
Credit Card Number: *
CVC Number: * (what is this?)
Card Type: Visa ▼
Expiration Date: MM ▼ YYYYY ▼
Submit Back / Cancel
An e-mail will be sent confirming payment and registration for this Assessment. The charges will appear under the name "Kryterion" on your billing statement.

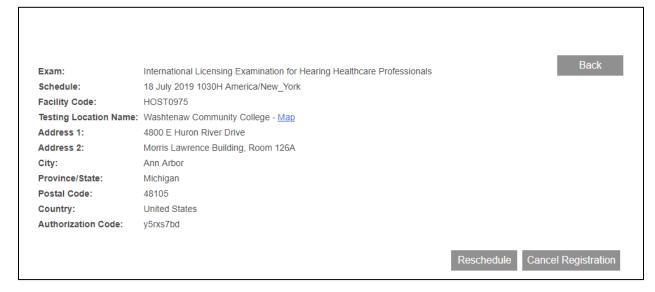
For Technical Assistance with WebassessorTM or the Testing Centers Network, submit a ticket or live chat with Kryterion at:

kryterion.force.com/support/s/contactsupport

Cancellations: Cancelling an Exam Appointment

- A candidate may cancel their examination appointment for a full refund of \$225.00 (USD), plus applicable taxes, if the candidate makes the cancellation through their user account on Webassessor™ more than 72 hours before the appointment time.
- 2. A candidate may cancel their examination appointment for a partial refund if the candidate makes the cancellation within 72 hours prior to the appointment time. They'll receive a partial refund less the \$75.00 cancellation fee.
- To cancel: Log in to Webassessor at www.webassessor.com/ihs and click "My Assessments." Click "Reschedule/Cancel," then "Cancel Registration."

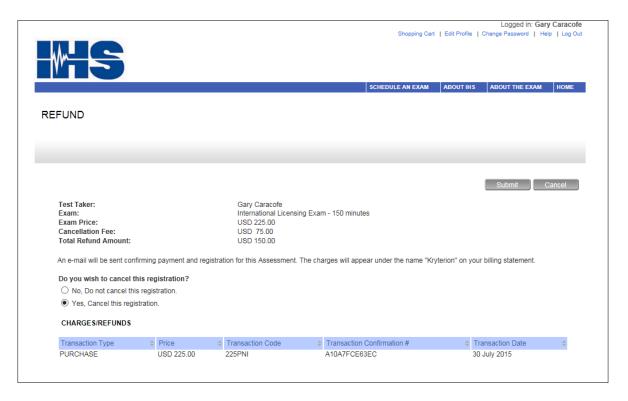




4. A candidate may not cancel their examination appointment on the examination date. This is considered a no-show and the candidate forfeits their examination fee.

Cancelling an Exam Appointment (within 72 hours)

Please note if you are cancelling your exam and you are within 72 hours of your originally scheduled exam time, you will incur a \$75 fee. The following screen will appear advising that your refund for the exam will be less the \$75 cancellation fee.



No-Shows

A candidate who fails to appear for their scheduled examination appointment will not receive a refund. A no-show candidate may access their Webassessor[™] account to reschedule an examination appointment and pay the \$225.00 (USD) examination fee again.

Taking the Examination

Identification & Authorization Code

In order to be admitted to the testing center, the candidate **must** bring the following three (3) items with them to the testing center for their examination appointment. **There will be no exceptions**.

1. Photo identification; and

• Acceptable photo identification: A government-issued identification card or driver's license, passport, or military identification.

2. Second form of identification; and

 Acceptable second form of identification: either a second form of government-issued identification, major credit card (i.e. Visa®, MasterCard®, or American Express®), check cashing card, or bank debit card.

3. Authorization Code.

 This is the Authorization Code that the candidate received in an email following the Webassessor™ scheduling process.

BOTH forms of identification MUST match the name listed on your Webassessor account.Please note that a Social Security Card is **not** an acceptable form of identification.

The candidate should arrive at the testing center up to 15 minutes early and provide the proctor at the testing center with their personal Authorization Code and their two (2) valid forms of identification. No testing aids are permitted – calculator, scratch paper, dictionary, etc. Personal possessions such as cellular phones, briefcases or backpacks may be collected by the proctor, stored in a secured area, and returned after the test session.

Taking the Examination

There are one hundred and five (105) multiple-choice questions on the examination. Candidates will be given two (2) hours to complete the examination.

The examination utilizes dichotomous scoring, meaning the answer selections are either right or wrong.

- The candidate will earn one (1) point for getting the question right (correct).
- The candidate will earn zero (0) points for getting the question wrong (incorrect).

A few questions on the examination require the candidate to select two (2) answers. For these questions, the candidate must select two (2) answer options out of the four (4) or five (5) options available. A few questions may require you to select three (3) answers out of five (5) options. In some cases, there are only (3) answer options.

Test Aids

The following document(s) are to be given to the Test Taker upon entrance to the testing room. At the end of the exam, the document(s) will be collected and shredded by the proctor at the testing center.

- 1. (2) Two pencils
- 2. (3) Three pieces of scratch paper numbered 1-3

Examination Security

IHS owns all proprietary rights and interests of the examination, including but not limited to copyright, trade secret, and/or patented information, as well as all Examination materials, including but not limited to, the Study Guide, the examination, and the answer key to the examination.

The examination is confidential. It will be made available to the candidate, solely for the purpose of assessing the candidate's proficiency level in the hearing healthcare professional skill areas. To protect the integrity of the examination, candidates are prohibited from disclosing the contents of this examination, including, but not limited to, questions, form of questions, or answers, in whole or in part, in any form or by any means (i.e. verbal, written, electronic) to any third party for any purpose. Copying or communicating examination content is prohibited and may result in the cancellation of examination results.

Candidates are at all times to maintain a professional attitude toward other candidates, proctors, and other examination personnel. In IHS's sole discretion, conduct that is, or results in, a violation of security or disrupts the administration of the examination may result in immediate disqualification and ejection from the examination. Such conduct includes, but is not limited to, cheating, failing to follow all rules and instructions governing the administration of the examination, or otherwise compromising the security or integrity of the examination. Children will not be allowed to accompany candidates into the testing center.

- Additionally, candidates may not bring:
 - Tobacco products, food, drinks, chewing gum, notes, scrap paper, books, purses, briefcases, backpacks, hats, calculators, or **cell phones** into the testing center.
- No smoking, eating, or drinking is allowed in the testing center.
- Any candidate that brings unauthorized materials will be asked to surrender all Examination materials and to leave the testing center without a refund.

Once candidates have been seated and the examination begins, candidates
may only leave the examination center to use the restroom, and only after
obtaining permission from the proctor. Candidates electing to use the restroom
during the examination will not receive extra time to complete the examination.

IHS will notify the licensing board of any known examination security violations and if IHS has the ability, will provide the licensing board with a recommended course of action.

No-Shows

A candidate who fails to appear for their scheduled examination appointment will not receive a refund. A no-show candidate may access their WebassessorTM account to reschedule an examination appointment and pay the \$225.00 (USD) examination fee again.

After the Examination

Upon completion of the examination, the candidate will receive a "Test Completion" email message from WebassessorTM. Candidates will not receive examination results immediately. All score reports are sent to the licensing agencies weekly.

PLEASE DO NOT CALL THE INTERNATIONAL HEARING SOCIETY FOR EXAM RESULTS.

Examination Scoring

The examination is comprised of one hundred and five (105) test questions (items). Test-takers will receive a score based upon their performance on eighty (80) scored items.

The examination is comprised of 80 scored and 25 non-scored (pilot) test questions. Administering pilot (non-scored) items allows the International Hearing Society to collect data on new items and assemble subsequent exams.

This examination utilizes dichotomous scoring, meaning the answer selections are either right or wrong. The candidate will earn one (1) point for getting the question right (correct). The candidate will earn zero (0) points for getting the question wrong (incorrect). In our research we found this scoring method to not only be the standard for healthcare examinations but for competency exams as a whole.

Results

A score report will be provided to the state/provincial licensing board. IHS provides a recommended passing score, but the ultimate pass/fail decision is up to the licensing body. The licensing board will contact the candidate with the examination results, except Colorado and Utah candidates. All inquiries regarding the status or results of your examination should be directed to the state/provincial licensing board, not to the International Hearing Society. The International Hearing Society is not permitted to share performance information directly with candidates, except Colorado and Utah candidates. PLEASE DO NOT CALL THE INTERNATIONAL HEARING SOCIETY FOR EXAM RESULTS.

Please note: The states of Colorado and Utah have adopted the IHS recommended passing score. Colorado and Utah candidates will receive a score report directly from the International Hearing Society.

Re-Takes

If a candidate does not pass the examination, they may be eligible to schedule another examination appointment. **Note:** In most cases, **after** taking the examination, your Webassessor account will be deactivated. To schedule a **re-take**, your state/provincial licensing board will need to inform IHS that you are eligible to re-take the examination. For more information on your local process, contact your state/provincial licensing board. For re-takes, the candidate must pay the examination fee of \$225.00 (USD), plus applicable taxes, at the time of rescheduling.

Score Reporting

PLEASE DO NOT CALL THE INTERNATIONAL HEARING SOCIETY FOR EXAM RESULTS.

The International Hearing Society (IHS) provides the licensing boards with a recommended passing score, but ultimately, the licensing board is responsible for making the pass/fail decision of the candidate. The licensing agency is responsible for communicating the candidate's examination result to the candidate, except in Colorado and Utah. The International Hearing Society processes exam scores weekly.

Please note: The states of Colorado and Utah have adopted the IHS recommended passing score. Colorado and Utah candidates will receive a score report directly from the International Hearing Society.

IHS recommends that licensing boards report <u>only pass/fail</u> decisions based on overall exam performance.

The IHS recommended passing score is on a raw score (i.e., number correct) scale. As IHS creates new operational forms, they may not be of the exact same difficulty as the current test form. If the difficulty of the form changes, keeping the exact same passing score would not be appropriate. We use statistical methods (e.g., equating) to identify a passing score on the new form that conveys the same level of expectations as the passing score on the previous form. Therefore, the actual passing score may change, but the <u>meaning of the passing score</u> (i.e., the level of knowledge and skills required for a passing score) would remain the same. To prevent confusion regarding passing scores when candidates take the test multiple times (using different forms), IHS recommends that licensing boards only report pass/fail decisions to candidates (as opposed to raw scores or percent correct scores).

IHS does not provide section level results on the assessment.

The International Licensing Examination for Hearing Healthcare Professionals was developed to aid in licensure decisions for hearing healthcare professionals (e.g., competent or not competent as determined by pass/fail decision). The test was designed based on input from a formal job analysis study and survey of professionals in the field. The test content is organized into several sections (i.e., areas relevant for safe and effective practice). However, in order to balance accurate pass/fail decisions and reasonable test lengths, the test was not designed to provide diagnostic information at the section level as any performance measures reported at this level would be considered unreliable.

Score Verification⁵

There is no appeal process through IHS for challenging individual examination questions or results. However, in some jurisdictions, candidates may be able to request a score verification for a fee of \$150.00 (USD) per examination. Should candidates have any questions regarding their local licensing board's policies or procedures, as it relates to

⁵ Score Verification is not permitted in the states of Colorado and Utah.

score verifications or other matters, candidates are advised to contact their licensing board.

Sample Test Questions

How to Analyze and Correctly Answer Exam Questions

The International Licensing Examination for Hearing Healthcare Professionals emphasizes practice-based knowledge, rather than just simple memorization of facts. It assumes that the facts have been memorized and that the minimally qualified candidate understands and knows how to apply those facts.

Three sample test questions are dissected below to show the knowledge and logic that must be utilized to arrive at the correct answer. Please use this exercise to answer the sample questions and remember the process when you sit for the actual examination.

Example 1:

Immediately eliminate D. You should have ensured that the physician has removed any interfering cerumen (which would prevent your taking an impression in the first place).

Why should an otoblock be placed just beyond the second bend of the ear canal during preparation for taking an ear impression?

A: prevents the otoblock from moving during the impression process

B: results in an impression featuring the full canal diameter *

C: results in a complete impression of the outer ear

D: prevents cerumen from interfering with the impression

C is attractive because it sounds as if you are making a complete impression. But we do not capture the entire pinna in an impression, so the choice is too broad and is not correct.

Choice A is also attractive because we want to prevent otoblock movement as much as possible. But that deals with the selection of the correct size otoblock rather than its placement – you always want to place the otoblock just beyond the second bend.

This leaves B as the only correct answer.

Example 2:

Which validation method can be effectively performed in a sound field environment?

A: COSI

B: IHAFF

C: NU-6 *

D: REIR



To answer this question correctly, you must know what each acronym means. If you do, you will recognize that one of the choices is not a validation method and that two others do not involve a sound field environment.

Choice A is a questionnaire; choice B is a fitting formula, and choice D is a real ear measurement. Only choice C – a list of phonetically balanced words – is appropriately used in a sound field environment.

This is a perfect example of what is meant by a "practice-based" question.

Example 3:

The first step here is to eliminate the very nebulous choice A – ask yourself just what kind of clarifier are you adding, where do you get it and how do you install it? It's extremely unlikely that such a device exists.

Choice B, likewise, is a bad idea. It is likely to introduce distortion and/or acoustic feedback, not contribute to clarity. A patient/client has been using an ITC hearing instrument for approximately 16 months. The patient/client has a new job that requires the use of a telephone with a headset. The patient/client is having difficulty understanding customers over the phone. What should the hearing healthcare professional recommend to the patient/client?

A: add a clarifier circuit to the existing phone
B: adjust volume to maximum while on the phone
C: add an amplifier to the existing phone *

C: add an amplifier to the existing phone *
D: cover the other ear while on the phone

 Image: Control of the control of the

Choice D is likely not to help, either, and may in fact be totally impractical.

Adding a readily available amplifier to the phone, as stated in choice C, is the best way to help this person.

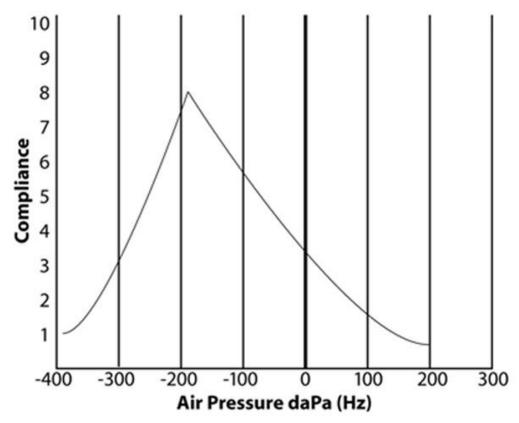
Please note: Use of this guide does not assure you a passing score on the examination.

Sample Test Questions

The sample test questions are for informational purposes only. The sample questions are designed to familiarize you with the exam format and cannot be considered a measure of competency. Actual examination items (test questions) have been selected from each of the competency areas.

- 1. Which two actions must a hearing healthcare professional perform before testing an existing patient's/client's hearing?
 - A: clean hands in view of patient/client
 - B: clean patient's/client's hearing instruments
 - C: clean patient's/client's canal of obstructive cerumen
 - D: clean or replace speculum from otoscope
- 2. How does an osteoma present?
 - A: dark, irregular demarcation of the pinna
 - B: bony growth in the external auditory canal
 - C: excessive inflammation of the external auditory canal
 - D: calcification of the tympanic membrane
- 3. What should a hearing healthcare professional do prior to administering a Speech Reception Threshold test?
 - A: discuss the pure tone results
 - B: familiarize the patient with the word list
 - C: introduce the carrier phrase
 - D: explain masking of the non-test ear

4. Refer to the exhibit.



What tympanogram type is represented in the graph displayed in the exhibit?

A: A

B: Ad

C: B

D: C

5. A 36-year old female restaurant worker with a family history of hearing loss reports that she is unable to hear as well as she did two years ago. Testing reveals a moderate conductive hearing loss.

What is the likely cause of the patient's/client's change in hearing?

A: presbycusis

B: otosclerosis

C: ototoxicity

D: Meniere's Disease

6. Which portion of the ear contains sebaceous glands?

A: inferior section of middle ear cavity

B: inner portion of external auditory canal

C: anterior portion of internal auditory canal

D: outer portion of external auditory canal

- 7. What general effect does natural ear canal resonance have on sounds entering the ear canal?
 - A: suppresses frequencies below 1000 Hz
 - B: boosts frequencies between 500 and 1500 Hz
 - C: boosts frequencies between 2000 and 3000 Hz
 - D: suppresses frequencies above 2500 Hz
- 8. Which factor will affect a patient's/client's acceptance and use of hearing instruments?
 - A: cause of the hearing loss
 - B: patient's/client's dominant hand
 - C: patient's/client's cosmetic preferences
 - D: frequency and duration of hearing instrument use
- 9. In a hearing instrument, what is the term for the entire frequency range within which unique, specific signal processing is performed?
 - A: band
 - B: channel
 - C: memory
 - D: program
- 10. Which two conditions are contraindications to taking an ear impression without prior medical clearance?
 - A: perforated tympanic membrane
 - B: lack of cerumen
 - C: otitis externa
 - D: epithelial migration
- 11. Why should an otoblock be placed just beyond the second bend of the ear canal during preparation for taking an ear impression?
 - A: prevents the otoblock from moving during the impression process
 - B: results in an impression featuring the full canal diameter
 - C: results in a complete impression of the outer ear
 - D: prevents cerumen from interfering with the impression
- 12. What should a hearing healthcare professional do immediately after placing an otoblock?
 - A: use an alcohol wipe to sanitize the top of the impression tool
 - B: pull tube or thread to test tightness of the otoblock
 - C: use an earlight to verify that the otoblock is deep enough
 - D: use the otoscope to check for gaps around the canal wall

- 13. Which step should a hearing healthcare professional complete immediately after removing an impression from a patient's/client's ear?
 - A: visually inspect ear impression for flaws
 - B: use otoscope to verify complete removal and condition of canal
 - C: use earlight to check for bleeding deep in the canal
 - D: use tissue to wipe oil from the concha and canal
- 14. Which step should a hearing healthcare professional take after performing a 2cc coupler hearing aid test on a repaired BTE hearing instrument?
 - A: print out the data for the patient/client
 - B: retube the BTE instrument with #13HW tubing
 - C: compare 2cc data to original specifications
 - D: recalibrate the test equipment
- 15. Which sound field test should be used to evaluate the benefit of directional microphones?
 - A: Speech Perception in Noise (SPIN)
 - B: Quick Speech in Noise (QuickSIN)
 - C: Connected Speech Test (CST)
 - D: Hearing in Noise Test (HINT)
- 16. Which validation method can be effectively performed in a sound field environment?
 - A: COSI
 - **B: IHAFF**
 - C: NU-6
 - D: REIR
- 17. A hearing healthcare professional is counseling a patient/client about expectations of amplification. Which information should the hearing healthcare professional include in this hearing therapy?
 - A: outside factors that can hinder understanding
 - B: electronic parameters of the hearing instruments
 - C: auditory practice and disability
 - D: hearing instrument care and modifications

- 18. A patient/client has been using an ITC hearing instrument for approximately 16 months. The patient/client has a new job that requires the use of a telephone with a headset. The patient/client is having difficulty understanding customers over the phone. What should the hearing healthcare professional recommend to the patient/client?
 - A: add a clarifier circuit to the existing phone
 - B: adjust volume to maximum while on the phone
 - C: add an amplifier to the existing phone
 - D: cover the other ear while on the phone
- 19. A patient/client complains that the hearing instrument works intermittently. After initial inspection, the hearing healthcare professional squeezes and taps on the case. Which problem does the hearing healthcare professional likely suspect?
 - A: a receiver problem
 - B: a battery problem
 - C: an amplifier problem
 - D: a wiring problem
- 20. What should be used to clean circumaural headphones?
 - A: hydrogen peroxide
 - B: disinfectant spray
 - C: ispropryl alcohol
 - D: disinfectant towelette

End of Sample Test Questions

Answer Key to the Sample Test Questions

Below are the correct answers to the Sample Test Questions. Also provided is a reference to the section of the competency model and each objective. For additional information you may look up the listed reference.

1. Correct Answer: "A" and "D"

Domain 1: Conduct Patient/Client Assessment Objective 1.1: Apply infection control protocols

Reference: Infection Control in the Audiology Clinic (2nd ed. or later) A.U.

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2. Correct Answer: "B"

Domain 1: Conduct Patient/Client Assessment

Objective 1.2: Apply otoscopic inspection protocols

Reference: Professional Training Textbook in Hearing Health Sciences, Chapter 9

3. Correct Answer: "B"

Domain 1: Conduct Patient/Client Assessment

Objective 1.3: Utilize audiometric testing protocols

Reference: Professional Training Workbook in Hearing Health Sciences, Lesson 20

and Professional Training Textbook in Hearing Health Sciences, Chapter 7

4. Correct Answer: "D"

Domain 1: Conduct Patient/Client Assessment

Objective 1.3: Utilize audiometric testing protocols

Reference: Professional Training Workbook in Hearing Health Sciences, Lesson 23

and Professional Training Textbook in Hearing Health Sciences, Chapter 8

5. Correct Answer: "B"

Domain 2: Interpret and Apply Assessment Results

Objective 2.1: Interpret and explain audiometric results

Reference: Professional Training Workbook in Hearing Health Sciences, Lesson 9

6. Correct Answer: "D"

Domain 1: Conduct Patient/Client Assessment

Objective 1.2: Apply otoscopic inspection protocols

Reference: Professional Training Workbook in Hearing Health Sciences, Lesson 6 and

Professional Training Textbook in Hearing Health Sciences, Chapter 4, Part 1

7. Correct Answer: "C"

Domain 1: Conduct Patient/Client Assessment

Objective 1.2: Apply otoscopic inspection protocols

Reference: Professional Training Workbook in Hearing Health Sciences, Lesson 6 and Professional Training Textbook in Hearing Health Sciences, Chapter 4, Part 1

8. Correct Answer: "C"

Domain 3: Select Hearing Devices

Objective 3.1: Select style and type of hearing instruments

Reference: Professional Training Workbook in Hearing Health Sciences, Lesson 28 and Professional Training Textbook in Hearing Health Sciences, Chapter 10

9. Correct Answer: "B"

Domain 3: Select Hearing Devices

Objective 3.1: Select style and type of hearing instruments

Reference: Professional Training Workbook in Hearing Health Sciences, Lesson 27 and Professional Training Textbook in Hearing Health Sciences, Chapter 10

10. Correct Answer: "A" and "C"

Domain 3: Select Hearing Devices

Objective 3.2: Select earmold or other acoustic coupler

Reference: Professional Training Textbook in Hearing Health Sciences, Chapter 11

11. Correct Answer: "B"

Domain 3: Select Hearing Devices

Objective 3.2: Select earmold or other acoustic coupler

Reference: Professional Training Workbook in Hearing Health Sciences, Lesson 32

12. Correct Answer: "D"

Domain 3: Select Hearing Devices

Objective 3.2: Select earmold or other acoustic coupler

Reference: Professional Training Workbook in Hearing Health Sciences, Lesson 32 and Professional Training Textbook in Hearing Health Sciences, Chapter 11

13. Correct Answer: "B"

Domain 3: Select Hearing Devices

Objective 3.2: Select earmold or other acoustic coupler

Reference: Professional Training Workbook in Hearing Health Sciences, Lesson 32 and Professional Training Textbook in Hearing Health Sciences, Chapter 11

14. Correct Answer: "C"

Domain 5: Provide Continuing Care

Objective 5.3: Interpret electroacoustic analysis results

Reference: Professional Training Textbook in Hearing Health Sciences, Chapter 15

15. Correct Answer: "B"

Domain 4: Fit and Dispense Hearing Devices

Objective 4.3: Validate fitting

References: Professional Training Workbook in Hearing Health Sciences, Lesson 37 and Fitting and Dispensing Hearing Aids (1st edition or later) Taylor, Brian and Mueller, H. Gustav

16. Correct Answer: "C"

Domain 4: Fit and Dispense Hearing Devices

Objective 4.3: Validate fitting

Reference: Fitting and Dispensing Hearing Aids (1st edition or later) Taylor, Brian and Mueller, H. Gustav and Professional Training Workbook in Hearing Health Sciences, Lesson 37 and Professional Training Textbook in Hearing Health Sciences, Chapter 13

17. Correct Answer: "A"

Domain 5: Provide Continuing Care

Objective 5.1: Implement aural rehabilitation and counseling

Reference: Introduction to Audiology (11th ed. or later) Martin, Frederick and Clark, John and Professional Training Workbook in Hearing Health Sciences,

Lesson 38

18. Correct Answer: "C"

Domain 3: Select Hearing Devices

Objective 3.1: Select style and type of hearing instruments

Reference: Professional Training Workbook in Hearing Health Sciences, Lesson 39 and Professional Training Textbook in Hearing Health Sciences, Chapter 14

19. Correct Answer: "D"

Domain 5: Provide Continuing Care

Objective 5.2: Apply instrument maintenance and troubleshooting protocols Reference: Professional Training Workbook in Hearing Health Sciences, Lesson 40

20. Correct Answer: "D"

Domain 1: Conduct Patient/Client Assessment Objective 1.1: Apply infection control protocols

Reference: Infection Control in the Audiology Clinic (2nd ed. or later) A.U.

Bankaitis and Robert Kemp

End of Answer Key

Webassessor Help

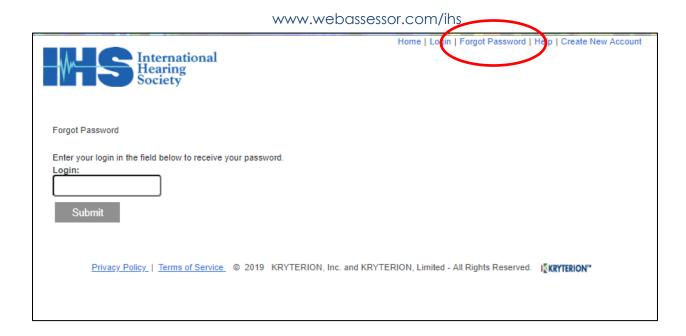
Webassessor is the online system that you will access to schedule your examination appointment. Kryterion Inc. is the owner of the system. The International Hearing Society (IHS) is the administrator of the written licensing examination. Because of our relationship with Kryterion Inc. this examination is available at hundreds of testing centers around the world, which means you have the opportunity to take the licensing examination at a testing location near where you live, learn or work. The exam is essentially available 24 hours a day, seven days a week. Bonus!

This information is to help you navigate the Webassessor[™] system. If you are having trouble, please contact Kryterion Inc. at <u>kryterion.force.com/support/s/contactsupport</u> for assistance.

IF THESE SOLUTIONS DO NOT WORK FOR YOU, CONTACT KRYTERION TECHNICAL SUPPORT AT kryterion.force.com/support/s/contactsupport

Common issues with your Webassessor Account:

<u>ISSUE:</u> You Forgot your Login name or your Password:
 Click on "Forgot Password" in the upper right-hand corner of the Webassessor™ screen.



NOTE: Most people use their <u>full email address</u> as their Login name.

ISSUE: Error says "Pre-requisites are not met"

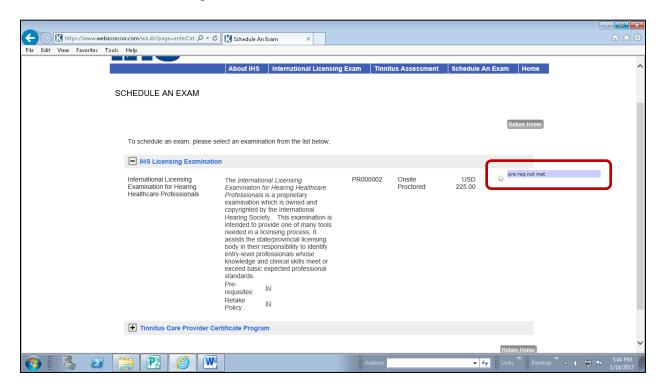
When you're trying to schedule an exam appointment and you get an error message that says, "pre-req not met" this means your account has not been verified yet by IHS.

What does this mean?

a.) You have not waited at least 3 business days from the time you created this account.

-OR-

b.) If 3 business days have passed, there may be another issue. Please send an email to exam@ihsinfo.org, including your full name and Webassessor login.



• ISSUE: What time is my exam appointment?

The time of the exam appointment is listed in Military Time/ 24 Hour Time. To see the exam time, date, location, and Authorization Code,

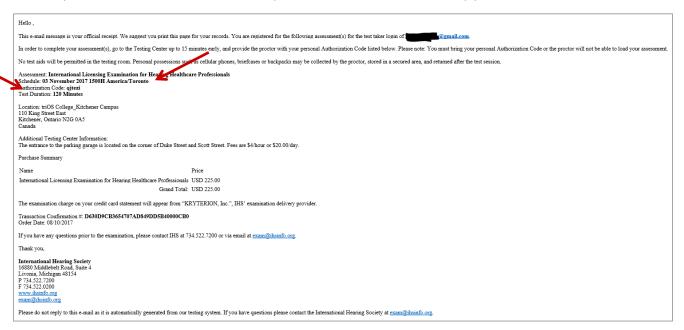
- Log in to Webassessor at <u>www.webassessor.com/ihs</u> and click "My Assessments."
- 2. The Registration Details will appear.

You will also find the exam appointment time on the Transaction/Receipt message you received via email in the Schedule field with the information listed as Date, Time, Time Zone. In the example below, it states, "Schedule: 03 November 2017 1500H America/Toronto", meaning November 3, 2017 at 3pm in the Eastern time zone used in Toronto.

• ISSUE: I don't have an Authorization Code!

To see the Authorization Code, log in to Webassessor at www.webassessor.com/ihs and click "My Assessments." The Registration Details will appear.

You will also find the Authorization Code on the Transaction/Receipt message you received via email when you scheduled the exam appointment.



• <u>ISSUE:</u> My account is "inactive" or unresponsive to my requests.
Your account may be "inactivated" for a reason. Call IHS at 734.522.7200 and ask for Webassessor help.

• <u>ISSUE:</u> The computer froze at the testing center.

Computer glitches do happen. Web-based systems get overloaded. Technical difficulties occur. In the event of a technical issue during the exam, please immediately contact the proctor. The proctor will follow standard procedures for re-setting your examination. Time will not be deducted from the time allowed. However, if you experienced a very unusual circumstance or issue during testing, please document the occurrence in writing to exam@ihsinfo.org.

For Technical Assistance with Webassessor[™] or the Testing Centers Network, submit a ticket or live chat with Kryterion at:

kryterion.force.com/support/s/contactsupport

Frequently Asked Questions (FAQs)

• How many questions are on the test?

The examination is comprised of one hundred and five (105) multiple-choice items.

• How much time is given for the Examination?

One hundred and twenty (120) minutes are allowed to complete the examination from the time it starts.

When do I get my results?

It varies. Each licensing agency is different in how they communicate exam results to you. IHS processes the exam scores weekly. The score report is sent to the licensing agency, except in Colorado and Utah.

How will the exam be scored?

The examination utilizes dichotomous scoring, meaning the answer selections are either right or wrong. The test-taker will earn one (1) point for getting the question correct. The test-taker will earn zero (0) points for getting the question wrong (incorrect). In our research we found this scoring method to not only be the standard for healthcare exams but for competency exams as a whole.

Who decides if a candidate passed the examination?

It is up to the state/provincial licensing board to determine if the test-taker passed or failed the examination. The International Hearing Society is not permitted to share performance information directly with candidates, except for Colorado and Utah candidates.

Please note: The states of Colorado and Utah have adopted the IHS recommended passing score. Colorado and Utah candidates will receive a score report directly from the International Hearing Society.

What is the passing score?

Candidates will receive a score based upon their performance on the overall examination. According to IHS, if the candidate score is at or above the passing score, the candidate passes the test. If the candidate score is below the cut score, the candidate fails the test, according to IHS.

IHS recommends that licensing bodies only report pass/fail decisions based on overall exam performance. The IHS recommended passing score is on a raw score (i.e., number correct) scale. As IHS creates new operational forms as part of ongoing test maintenance, the new forms may not be of the exact same difficulty as the previous test forms. If the difficulty of the form changes, keeping the exact same passing score would not be appropriate. Therefore, **the actual passing score may change**, but the meaning of the passing score (i.e., the level of knowledge and skills required for a passing score) would remain the same.

In order to prevent confusion regarding passing scores when candidates take the test multiple times (using different forms), IHS recommends that licensing boards only

report pass/fail decisions to candidates (as opposed to raw scores or percent correct scores).

IHS provides the licensing board with a recommended passing score, but ultimately, the licensing board is responsible for making the pass/fail decision of the candidate and for communicating the candidate's examination result, except for Colorado and Utah candidates.

Please note: The states of Colorado and Utah have adopted the IHS recommended passing score. Colorado and Utah candidates will receive a score report directly from the International Hearing Society.

What is a cut score?

The minimum score required to pass the examination. Cut score can be expressed as a raw score, a percent score, or a scaled score. IHS used a modified Angoff standard setting study to determine an appropriate cut score for this operational form. Cut scores for subsequent operational forms will be determined via a statistical equating process. Once again, it is important to note that IHS recommends a minimum score required to pass, but ultimately, the licensing boards decide.

As IHS creates new operational forms as part of ongoing test maintenance, the new forms may not be of the exact same difficulty as the previous test forms. If the difficulty of the form changes, keeping the exact same passing score would not be appropriate. Therefore, **the actual passing score may change**, but the meaning of the passing score (i.e., the level of knowledge and skills required for a passing score) would remain the same.

How was the passing score determined?

The IHS recommended passing score was obtained through a systematic standard setting study. Standard setting is the process of defining the performance expectations of the minimally qualified candidate and translating that performance expectation into a passing score. IHS chose to use the yes/no variation of the Angoff standard setting method for this study. This methodology is widely accepted and has been well documented and researched within the testing industry; it is commonly used for determining passing scores for licensure programs.

The standard setting study was conducted with the input of an independent panel consisting of experienced, licensed Hearing Aid Specialists. The study was facilitated by an independent third-party testing organization that has extensive experience with the methodology.

Ultimately, it is the responsibility of the licensing board to determine if a candidate has demonstrated sufficient competency to be eligible for a license.

• What is a candidate score?

The score achieved by a candidate. The candidate score is used to determine if the candidate passes or fails the examination. According to IHS, if the candidate score is at or above the cut score, the candidate passes the examination. If the candidate score is below the cut score, the candidate fails the examination according to IHS standards.

What is a score report?

A confidential report prepared by IHS containing information that documents the candidate's test result. IHS recommends that licensing bodies only report pass/fail decisions based on overall exam performance.

What topics will the examination cover?

This assessment is based on the most recent competency model (exam blueprint). The exam blueprint identifies the competencies against which the candidate will be measured. It also indicates the weight (%) of each competency or group of competencies. The competency model is in this study guide for your review.

What textbooks and reference materials are recommended for this examination?
 A list of reference material is provided in this study guide. The test question pool for the exam has been developed using these references. No single reference alone can be recommended to use for your studies.

What should I study?

You should be able to understand and apply all of the concepts in the competency model. This examination tests your ability to apply the theory taught in the textbooks to real-life patient/client scenarios. Every question on this examination is referenced to one of the books listed as "Recommended Reference Material" in the study auide.

• Can I appeal my examination result?

There is no appeal process through IHS for challenging individual examination questions, scoring or results.

Which U.S. states are currently using the IHS written licensing assessment?

- 1. Alabama
- 2. Arizona
- 3. Arkansas
- 4. Colorado
- 5. Connecticut
- 6. Delaware
- 7. Florida
- 8. Georgia
- 9. Hawaii
- 10. Idaho
- 11. Illinois
- 12. Indiana
- 13. lowa
- 14. Kansas
- 15. Kentucky
- 16. Louisiana
- 17. Maine
- 18. Maryland
- 19. Massachusetts
- 20. Minnesota
- 21. Mississippi
- 22. Missouri

- 23. Montana
- 24. Nebraska
- 25. Nevada
- 26. New Hampshire
- 27. New Jersey
- 28. New Mexico
- 29. North Carolina
- 30. North Dakota
- 31. Ohio
- 32. Oklahoma
- 33. Oregon
- 34. Rhode Island
- 35. South Carolina
- 36. South Dakota
- 37. Tennessee
- 38. Texas
- 39. Utah
- 40. Virginia
- 41. Washington
- 42. West Virginia
- 43. Wisconsin
- 44. Wyoming

- Which Canadian provinces are currently using the IHS written licensing assessment?
 - 1. Alberta
 - 2. British Columbia
 - 3. Manitoba
 - 4. Nova Scotia
 - 5. Ontario
- For Help with Webassessor TM , refer to the section at the front of this guide.
- Use of this guide does not assure you a passing score on the examination.
- Use of the International Hearing Society's Distance Learning for Professionals in Hearing Health Sciences course does not assure you a passing score on this examination.

For Technical Assistance with Webassessor[™] or the Testing Centers Network, submit a ticket or live chat with Kryterion at:

kryterion.force.com/support/s/contactsupport



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