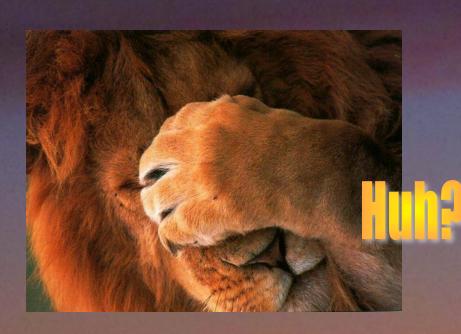


# TeleAudiology: A Key to Early Identification of Hearing Loss

**TeleAudiology Learning Community Salt Lake** 

Cindy See, AuD Marshfield Clinic Nina Antoniotti, RN, MBA, PhD, Marshfield Clinic

## TeleAudiology?



Help meet EHDI 1-3-6
goals?
Improve loss to followup rates in the EHDI
process?

Is TeleAudiology

possible in a clinical

setting?

## Solution? Marshfield Clinic TeleHealth!

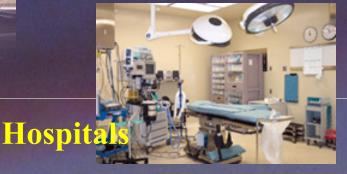
#### **Dedicated TeleHealth Department with Supporting Infrastructure**

- Established in 1997
- Based in operational clinical approaches
- Not Technology oriented
- Providing over 40 different specialty services
- Experienced TeleHealth Nurse Clinicians

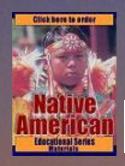




#### Marshfield Clinic TeleHealth



Marshfield Clinic Centers



**Indian Health Centers** 

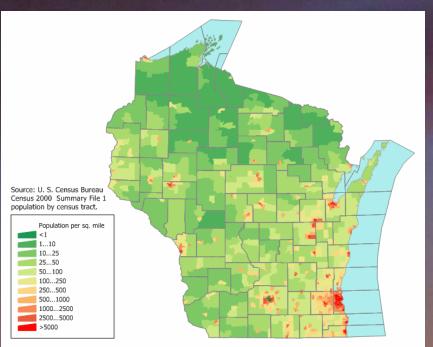
GREAT LAKES INTER-TRIBAL COUNCIL



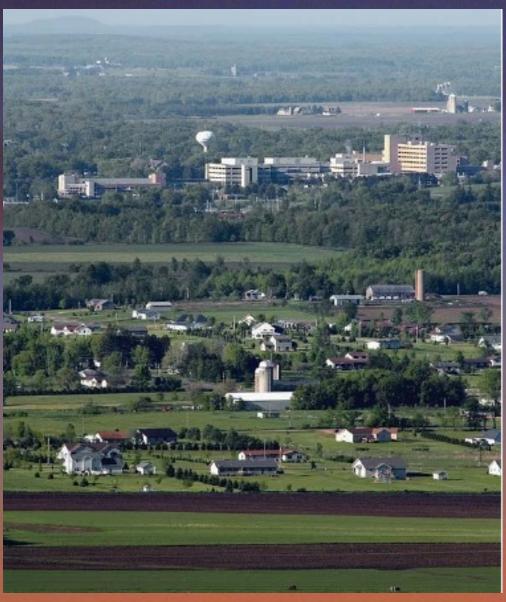
**Head Start Centers** 







Marshfield Clinic Rural Wisconsin



#### Geography: Marshfield Clinic

**Audiology Locations** 

- Chippewa Falls
- Eau Claire
- Marshfield
- Menomonie
- Merrill
- Minocqua
- Park Falls
- Rice Lake
- Spooner
- Stanley
- Wausau
- Weston
- Wisconsin Rapids



Audiology In-person Sites prior to Grant Funding

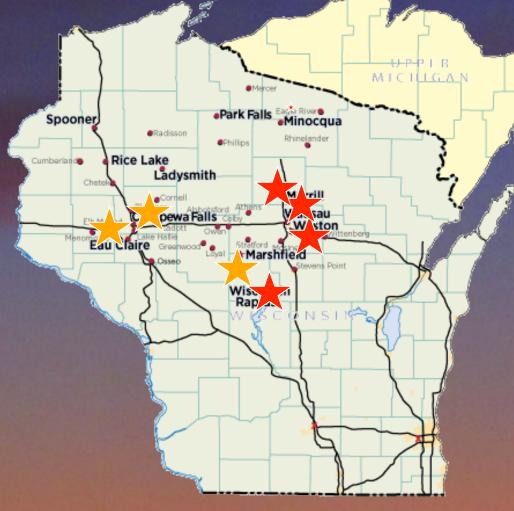
- Marshfield
- Chippewa Falls
- Eau Claire

Problem: Travel to these 3 locations may exceed 2-3 hours one way!



Locations with In-person Pediatric Diagnostic ABR Audiology In-person Sites
After
Grant Funding

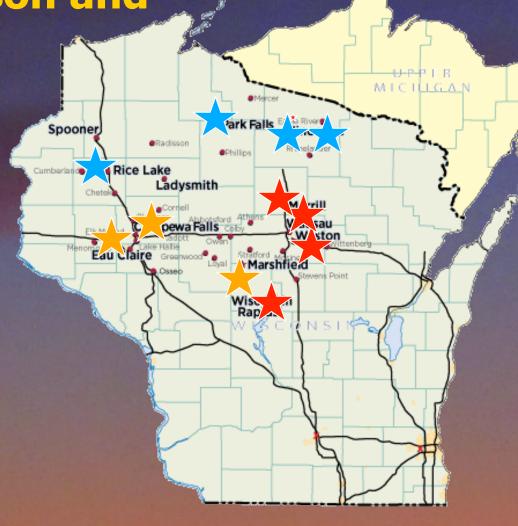
- Marshfield
- Chippewa Falls
- Eau Claire
- Wausau
- Weston
- Merrill
- Wisconsin Rapids



Locations with
In-person
Pediatric Diagnostic ABR

**Audiology In-person and TeleHealth Sites** 

- Marshfield
- Chippewa Falls
- Eau Claire
- Wausau
- Weston
- Merrill
- Wisconsin Rapids
- Minocqua
- Rice Lake
- Rhinelander
- Park Falls



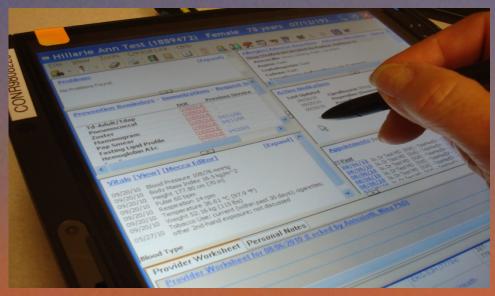
Locations with In-person & TeleHealth Pediatric Diagnostic ABR



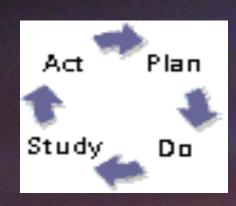
#### Electronic Health Record

**CattailsMD** 

Wireless Tablets for Patient Care







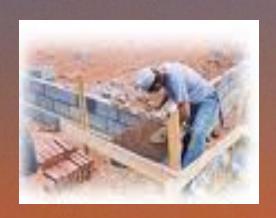
#### Think big, start small

#### With Wisconsin Sound Beginnings:

- Data Analysis
- Key locations to develop onsite and TeleAudiology services.
  - Loss to follow-up rates
  - Geographic access to services

#### **Hire a Care Coordinator**

- Track babies at high risk for loss to follow-up
- Promote WSB EHDI Quality Improvement Bundles
- Support and promote TeleAudiology
- Coordinate Pediatric Hearing Loss Clinic



**Preparation** 







## Audiology Equipment

## **Equipment Cases**

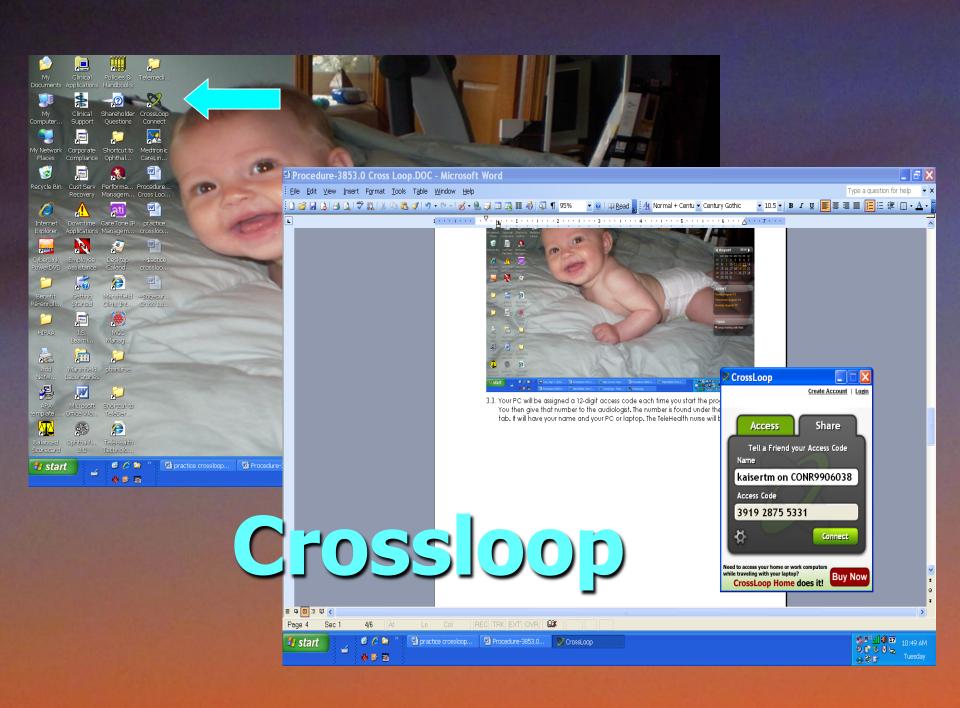




## Supplies





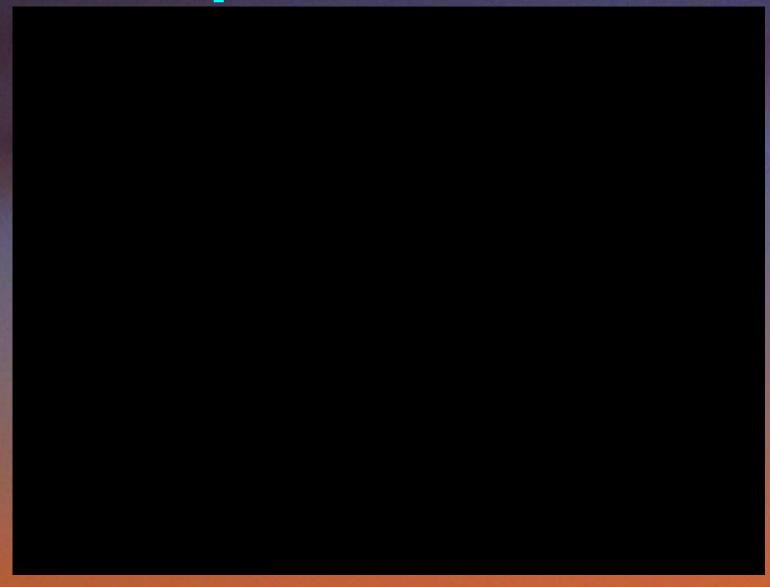




#### Crossloop

- Software that allows remote access of ABR computer
  - 128-bit encryption algorithm
- Randomly generated 12-digit access code for each session

## **Crossloop Video**





#### **VNC Remote Access**





#### Real VNC Access





#### **User Authentication**

Requires user name and password – set up to use network log in credentials

VNC Viewer: Authentication [128-bit AES Encryption]				
<u>V2</u>	Username:		OK	
	Password:		Cancel	



### Naming of Sites

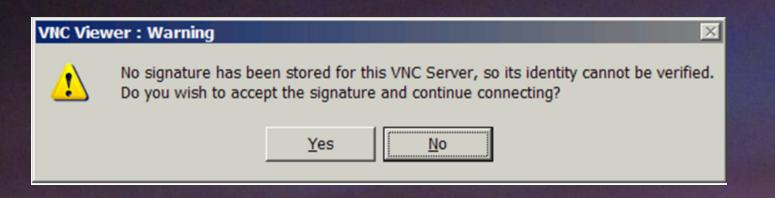
VNC Viewer Defaults ? ×				
Colour Encoding Inputs Misc Identities				
192.168.0.108::5900 192.168.1.35::5900	Remove All			
	Add Current			



#### After log-in...



- Audiologist clicks on VNC icon
- Audiologist selects name of site from drop down menu (showing ip address)
- Audiologist clicks on "connect"



Server security controls are in place to disallow connections to the computer destination if not authorized by server or authentication credentials.





#### VNC Remote Access

- VNC Enterprise System for Windows
- Runs as a stand-alone product
- Purchased License
- Local installation on computing device
- Server based application for connections
- Requires user name and password
- Complies with Security Rules (HIPAA)

# TeleHealth Video Conference Systems





The patient site is a designated clinical exam room enabled for TeleHealth

- Polycom© VSX7000s codec technologies
   Audiologist uses the pc-based H.323 video system provider workstation
- Polycom PVX Software only codec with Logitech 9000 camera and pc speakers
- Includes remote control access of the exam room camera.

#### **Technical Specifications**

- H.323 video equipment
  - Runs on 10-100 meg fiber network, using standards based video.
- Uses IP (Internet Protocol)
  - 512 kbps over proprietary fiber optic cable leased from two Local Exchange Carriers.

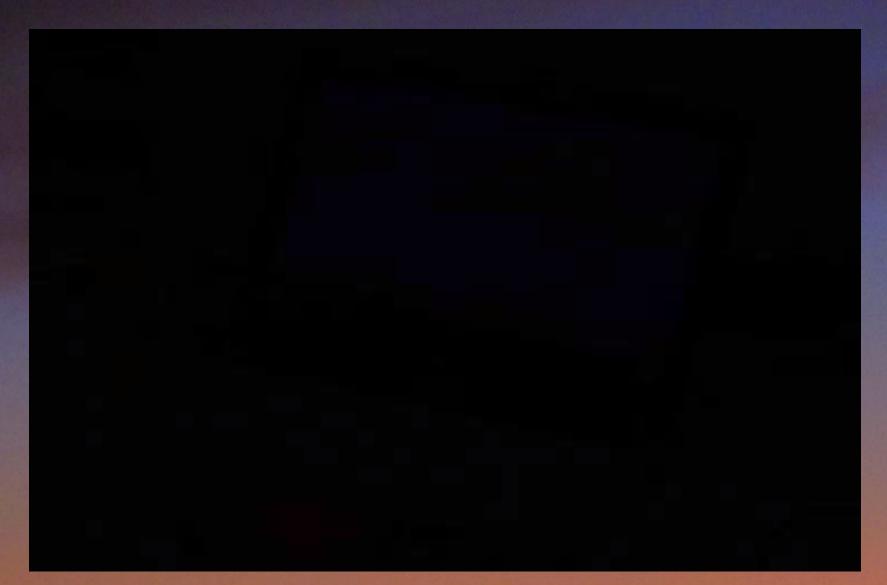
#### Video Conference Systems

# MC TeleHealth Approach to Care Delivery

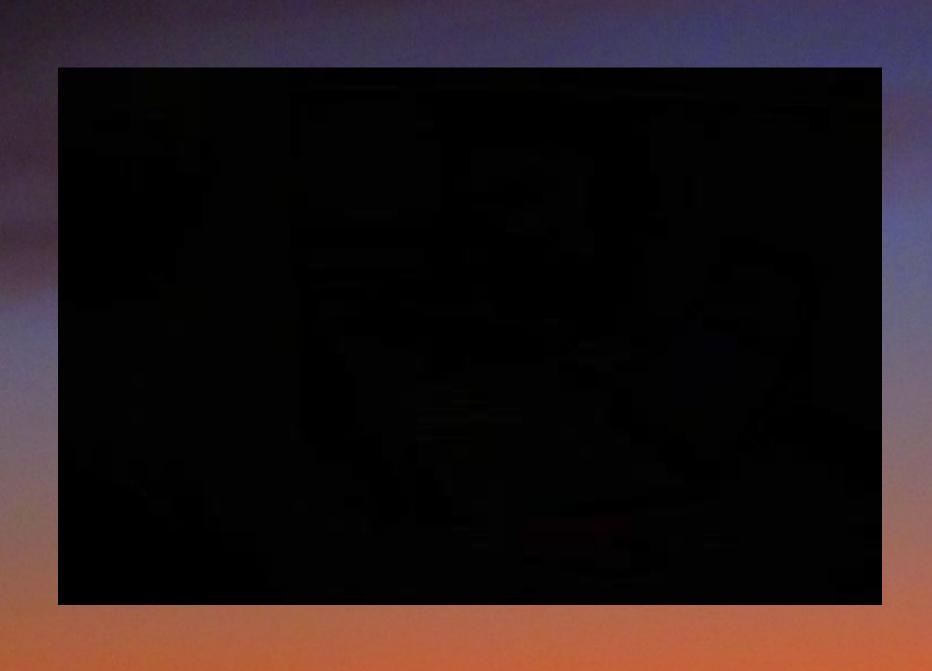
Sessions are real-time interactive

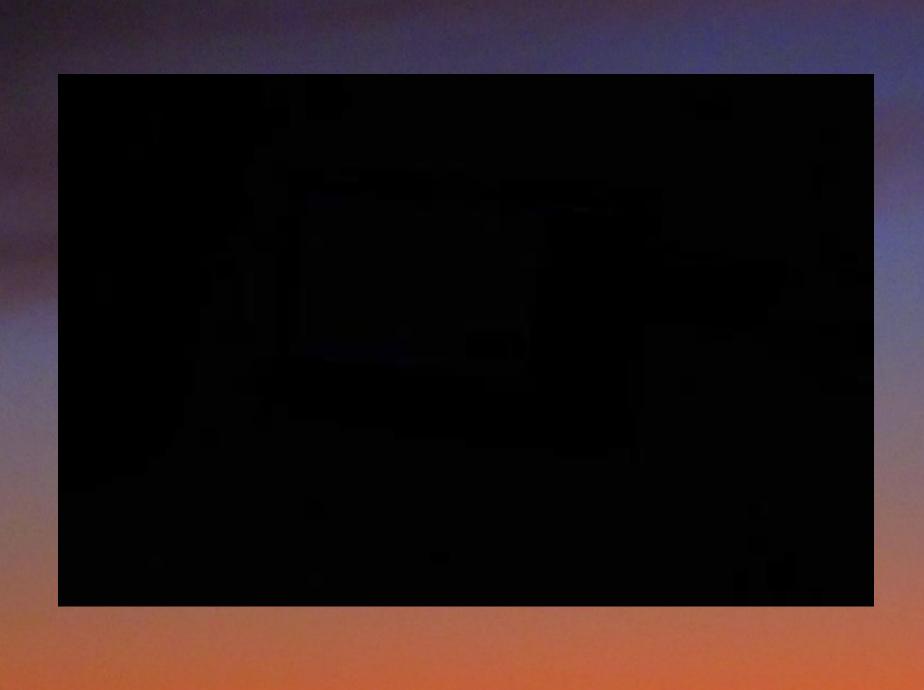


 All calls are considered patient consultations and are treated as such for HIPAA and HITECH requirements.



TeleAudiology

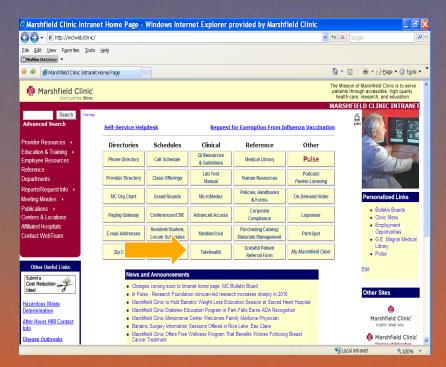






- Authored by TeleHealth Director and TeleHealth Nurse Project Coordinator in consultation with Audiology
- Available on the Marshfield Clinic Intranet for easy access

Procedure Development



#### **Procedure Information Includes:**

Pre-consult preparation of infant



- Equipment set-up
- Skin & ear preparation
  - Electrode placement
    - Infant positioning
- Post-consultation considerations

#### 3 PROCEDURE BODY

All clinical staff responsible for the presenting of patients to Audiology Services or any provider who may need a component of audiology services shall be proficient in providing audiology data via TeleHealth technologies.

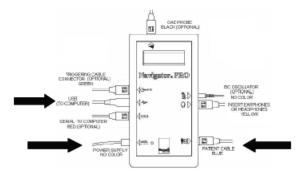
All clinical staff responsible for the presenting of patients to Audiology Services or any provider who may need a component of audiology history or physical exam shall be appropriately trained.

#### 3.1. Pre-Consult Preparation:

- Prepare technology to include the Navigator Pro box, Biologic software, bone oscillator, otoscope and connection to CrossLoop.
- Frame patient so Audiologist can see the infant while testing is taking place.
- A quiet infant is imperative for proper testing.
- All electronics should be turned off including cell phones.
- Assist parent(s) as needed to keep the infant settled.

#### 3.2. Biologic/ Navigator Pro equipment set-up:

- The Navigator Pro box is colored coded to assure proper connections.
- Plug USB cable into the laptop with the Biologic Software.
- Assure the earphones are plugged into the Navigator Pro box.
- There is no ON/OFF button. The Navigator Pro automatically turns on when plugged into the computer.
- The diagram below shows placement only. Please disregard the color scheme.
   The Navigator Pro is color coded as follows: Power cord is orange, USB is yellow, and insert earphones are pink.



3933.0 TeleHealth Auditory Evoked Potential-Bio-logic Page 3 of 7

#### **Procedures**

 Position the infant so the left ear is exposed. Complete testing on the left ear (blue transducer). Settle infant as needed.

#### 3.9. Bone Conduction ABR: Test only done at provider's discretion:

- Plug oscillator into the Navigator Pro.
- Firmly hold the oscillator to the infant's mastoid with 1 index finger. Push the oscillator on the mastoid until you could almost push the child's head away from you.
- Make sure the oscillator is not touching the pinna.
- Never use 2 fingers to hold the oscillator as this can dampen the output.
- The provider will adjust settings and complete the testing.



#### 3.10. Testing complete:

- Remove electrodes.
- Remove and discard foam tip. Careful not to discard black tube socket.
- Disconnect the Navigator Pro box from infant and computer.
- Audiologist will discuss results with family.

#### 3.11. Post-consultation Considerations:

- Reframe infant and parent(s) so the provider has good eye contact with family for follow up discussion.
- When testing is complete, the Audiologist will verbalize when to shut down the computer.
  - OGo to the start menu.
  - O Select turn off computer.

ROCEDUR

3933.0 Teletlealth Auditory Evoked Potential- Bio-logic Page 5 of 7

# Training of TeleHealth Nurse Clinicians

- Prepared In House Video
- Video Conference Presentation
- Individual one on one consultation before "go live" date
- + From:





Newborn Hearing Screening Training Curriculum

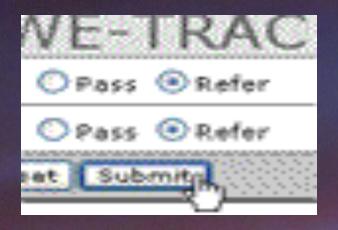
> Competency-based Training for New Hearing Screeners

# **Training of TeleHealth Nurses**

# Audiology participation in TeleHealth Skills Day







- For babies who refer on the hearing screen, the goal is to schedule two appointments prior to hospital discharge
- 2 weeks and 4 weeks of age

Program Components

# If opportunity doesn't knock, build a door.

**Milton Berle** 



### Audiology

### Follow-up Appointment Request

It is recommended that follow-up ap final hearing screening. <i>Schedule a</i>			
Baby's name		DOB	
Final hearing screening results – Rig Guide By Your Side information off	ered to parent: 🗆 Yes 🗆	No Unknown	
Primary care provider (required)			
Parent's phone number: Home		Cell	
Contact the following with the 2-we	ek and 4-week follow-up	appointment information:	
Parents	☐ Birth unit	☐ Midwife	
Phone	Phone	Phone	
Check (✓) parent's preferred locati	on for follow-up appointm	ents:	
Marshfield Center Minocqua Center (telehealth) Rice Lake Center (telehealth) Wisconsin Rapids Center	Merrill Center Wausau Center Weston Center	Chippewa Falls Center	Eau Claire Center
Fax 715-389-7622 Or call directly at 1-800-273-5245	Fax 715-847-3257 Or call directly at 715-847-3232	Fax 715-726-4234 Or call directly at 1-888-206-9112, ext. 3-4160	Fax 715-858-4505 Or call directly at 715-858-4747
Any questions or concerns about Ed 1-800-782-8581, ext. 1-7128.	arly Hearing Detection & I	ntervention (EHDI), call EHDI Care	e Coordinator at
Comments			
Additional ABR testing sites:			
ENT Professional Associates Ashland 715-682-9311	Ministry Medical ( Stevens Point 715-342-7949	Group-Rice Clinic	

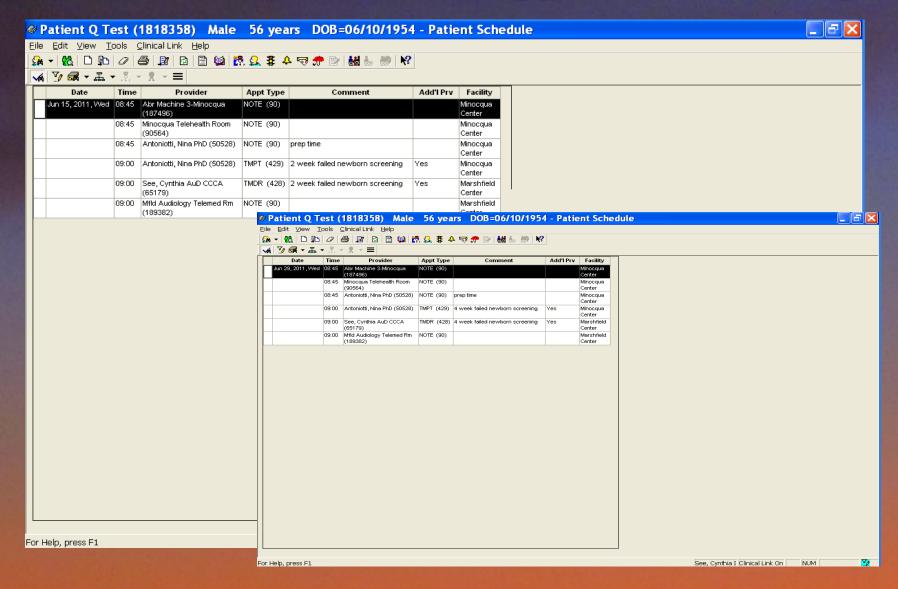


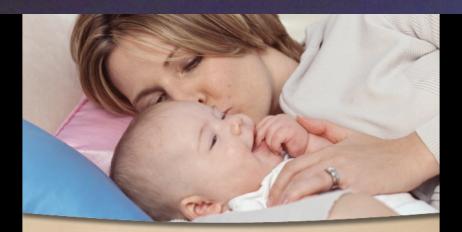
**Audiology Appointment** Request Fax:

- Contact Info
- Screening Results
- **Guide By Your Side** Checkbox
- GUIDE BY YOUR SIDE™
- PCP required
- **Insurance Info**

Program Components

### TeleAudiology Scheduling





### Preparing your baby for a hearing test

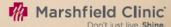
Your baby is scheduled for hearing test as a follow-up to initial screening at the hospital. This comprehensive evaluation will help diagnose any hearing loss. If a loss is detected, it's important to begin intervention services early so your child can develop key social and communication skills.

These suggestions will help you prepare your baby for the hearing test. This is an hour-long appointment.

- Testing is easiest when babies are full, sleepy and feeling well. We recommend feeding your baby about 20 minutes before the hearing test. A full tummy will help your baby feel calm and more likely to sleep.
- Testing may be done if your baby is awake. Bring along a blanket to decrease restlessness.

- · Dress both of you comfortably.
- Testing works best in a quiet environment.
  If siblings or small children accompany
  you to this appointment, please bring
  another caretaker to watch them in the
  waiting area. Your baby may need your full
  attention during the test.
- If your baby has a cold or is not well, reschedule the hearing test. To reschedule, call 1-800-273-5245 or 715-387-5371.

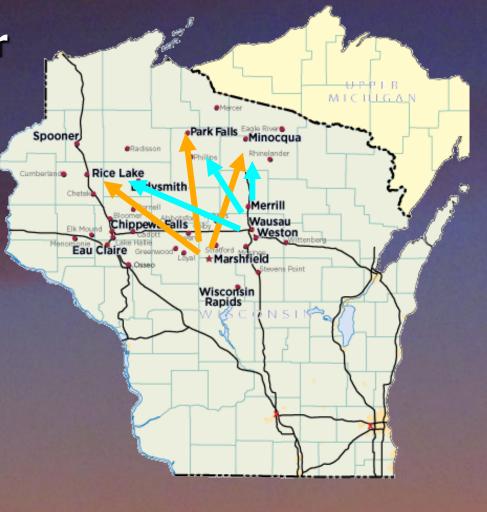
It is not always possible to finish a hearing test in one appointment. If a second appointment is required, we will schedule it as soon as possible.



99-0693-04

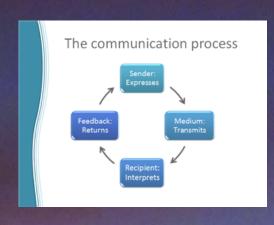
 Designed as a center to center program rather than a strict hub & spoke concept.

 Audiologist controls the laptop and software remotely and analyzes results in real time.

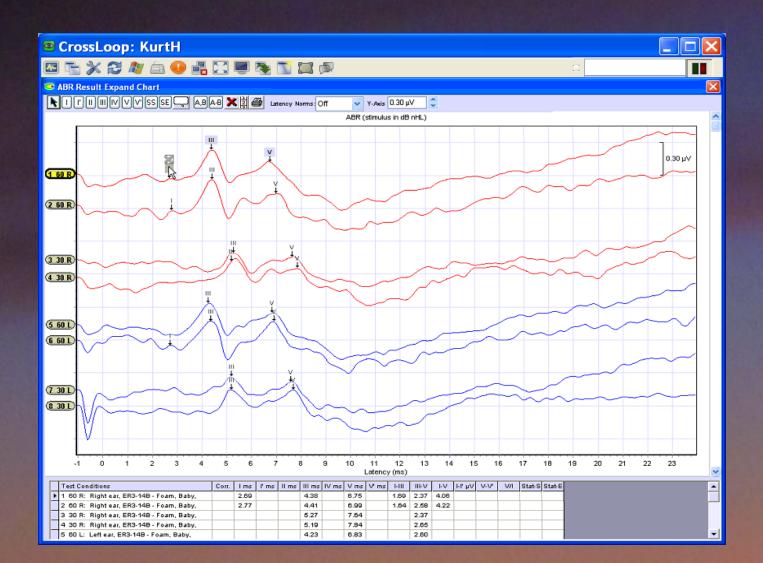


## TeleAudiology Program Components

## TeleAudiology Program Value-Steps



- Parents are provided results the same as if they were on site.
- The audiologist prints results prior to disconnection of equipment for formal report.
- Results are scanned into electronic medical record.





### Vivosonic ABR Screen Shot

### TeleAudiology Data: Sep 14, 2010 – Apr 30, 2012 (19 months)

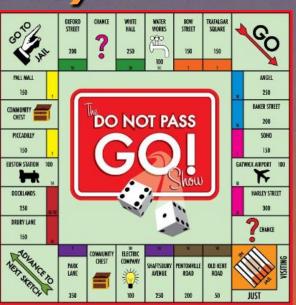
- 4 Locations: Minocqua, Rice Lake, Park Falls, Rhinelander
- Infants scheduled: 36
- Passed initial appointment: 28
   (78%)
- Average age: 32 days
- Age Range: 2 weeks 6 months

### TeleAudiology Data: Sep 14, 2010 - Nov 30, 2011

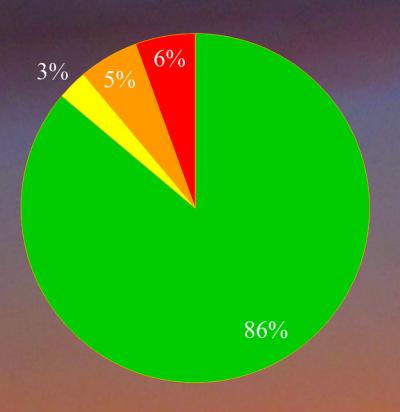
Required 2<sup>nd</sup> appointment: 8 (22%)

- Need further testing: 2 (9%)
- No Show: 3 (11%)

\*Equipriest issue: 3 (9%)



## **TeleAudiology Data Final Results (19 months, n=36)**



- Final Passed: 31
- Cond HL: 1
- Refused f/u: 2
- Lost to f/u: 2



### **Economic Impact:**

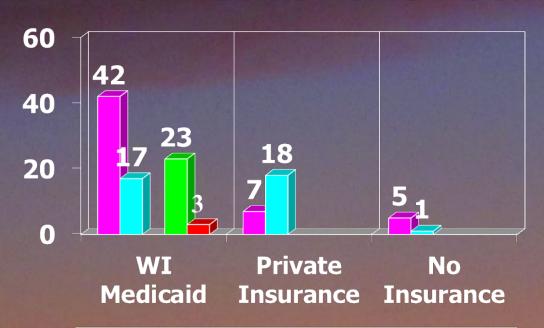


- Travel prior to grant: 105 miles average
- TeleHealth Site: 25 miles average
- Cost savings based on \$3/mile formula calculation
- Round trip distance saved= 160 miles
- \$480 average dollar savings



### **Financial Considerations**

### **TeleHealth & New Onsite Locations:**



- Onsite n=59
- TeleHealth n=36
- **Eval Onsite/TeleHealth Closer**
- Lost to F/U Onsite/TH Closer

- BG Normal pregnancy, C-section delivery
- Referred newborn hearing screen, bilaterally
- History of multiple no-show & cancelled TeleAudiology appointments
- Moved twice since birth
- Returned to original PCP



Case Study TeleAudiology

### TeleAudiology Results, 5 months old:

- Passed OAE screen left ear
- Referred OAE screen right ear
- Initial ABR recording hard to interpret secondary to awake state
- Mom fed & snuggled baby and was able to get baby to sleep



Case Study continued

# Case Study continued ABR results

- Normal ABR left ear
- ABR 40 dB right ear, with significantly delayed latencies noted, suspect conductive hearing loss
- Contacted local Audiologist & PCP
  - Scheduled for coordinated appointments at 6 months of age

### Quotes

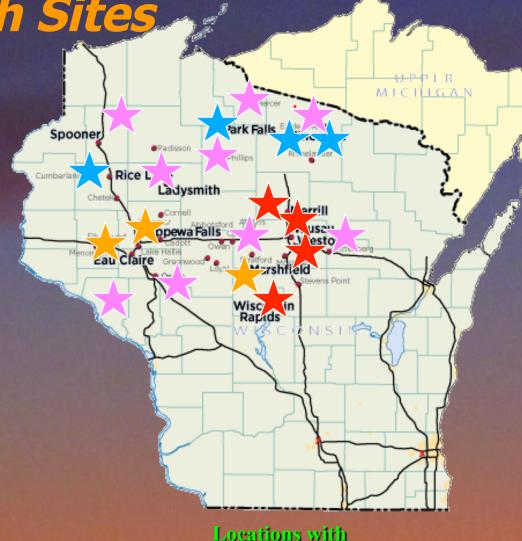
TeleHealth Nurse Clinicians

Parents

We're not done yet! Future TeleHealth Sites

- Arcadia
- Eagle River
- Hayward
- Ladysmith
- Mercer
- Mosinee
- Osseo
- Phillips
- Wittenberg

+ More to be considered as project moves forward



In-person & TeleHealth Pediatric
Diagnostic ABR

### So Can TeleAudiology?

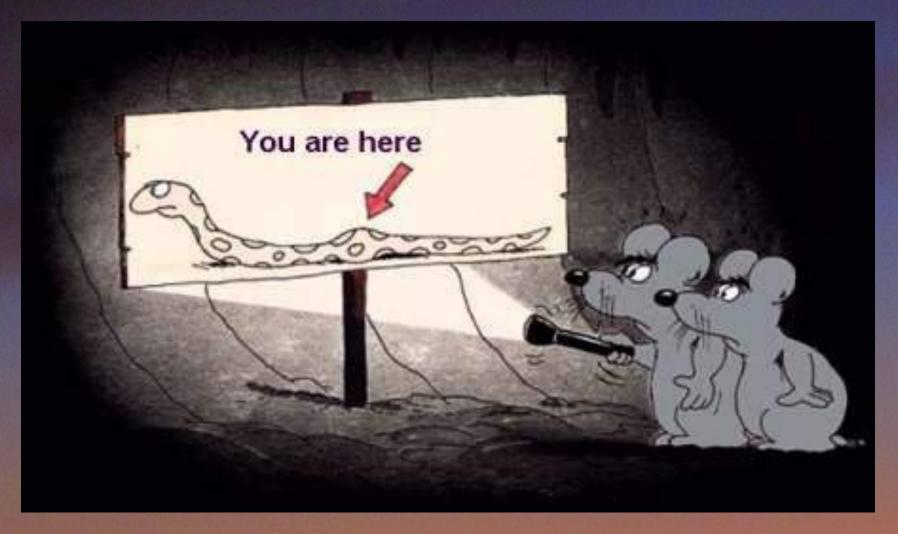
- Help meet EHDI 1-3-6 goals? Yes!
- Improve loss to follow-up rates in the EHDI process? Yes!
- Finally, is TeleAudiology possible in a clinical setting? Yes!

### Muchos Gradas-Merci-Merci

- Dr. Elizabeth Seeliger and Wisconsin Sound Beginnings for the vision behind this project.
- Dr. Nina Antoniotti TeleHealth Director for her insight and expertise in development of a TeleHealth program.
- Karen Wegerer RN EHDI Care
   Coordinator for going above and beyond
   to seek resources and overcome
   hurdles.

# No One Knows what Lies Ahead!





Thank you! Cindy See, AuD Nina Antoniotti, RN, MBA, PhD