

British Society of Audiology

Promoting excellence in hearing and balance



# Minimum Training Guidelines

## Otoscopy and Impression Taking

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## General foreword

This document is one of a family of BSA Minimum Training Guidelines, which also includes Aural Care, Ear Examination, Surveillance Audiometry, and Basic Audiometry and Tympanometry – all of which allow the award of BSA Certificates.

Although care has been taken in preparing this information, the BSA does not and cannot guarantee the interpretation and application of it. The BSA cannot be held responsible for any errors or omissions, and the BSA accepts no liability whatsoever for any loss or damage howsoever arising. This document supersedes any previous Minimum Training Guidelines for Otoscopy and Impression Taking by the BSA and stands until superseded or withdrawn by the BSA.

All practitioners who undertake these procedures after having a BSA accredited course are advised to have an awareness of their own scope of practice and understand their own limitations. The BSA highly recommends supervision and support as required by the individual.

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## Authorship

This document was produced by the BSA Practice Guidance Group; the review was co-ordinated by R. Rendell and P. White. The Group thanks all those who have contributed to this document and its previous versions.

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## Contents

1. Introduction and aims.....	3
2. Scope.....	4
3. Training.....	4
3.1 Knowledge and understanding.....	4
3.2 Learning outcomes.....	5
3.3 Assessment.....	5
3.4 Courses.....	5
4. Course accreditation and moderation.....	6
5. References.....	6

## 1 Introduction and aims

Most otoscopy and impression taking is undertaken by qualified audiological professionals. Circumstances exist however whereby quality of service provision, especially for children, may be greatly enhanced by careful involvement of other appropriately trained staff. These standards are for those with a background knowledge of audiology but who are not specialists themselves, e.g. teachers of the deaf who may be called upon to take impressions for replacement earmoulds. The aim of these standards is to ensure that such people are able to perform these tasks safely, correctly and in accordance with current BSA recommended procedures.





## 2 Scope

These guidelines apply where there are no contraindications to safe impression taking. Where there is any doubt about whether the procedure should continue, referral must be made to a suitably qualified audiological professional.

Otoscopy and impression taking should only be undertaken by those whose job description specifically includes it, and whose employer has identified who is liable in the event of any claim for accident or injury.

## 3 Training

The knowledge and skills may be acquired in a short course of at least 7 hours in the classroom (or at least 10 hours if the delegate is to work with babies and children under 5 years old), including practical sessions, plus a similar time spent studying relevant texts. It is anticipated that delegates will practise their practical skills on each other, under supervision and in the classroom. However in some cases, and certainly where impression taking on children is included, the supervised practical training will need to extend beyond the classroom, probably to the workplace. Course providers must ensure that there is appropriate supervision of workplace practise.

The BSA should approve and moderate the course, and certificates will be awarded to delegates reaching the required standard. Certificates will state whether or not otoscopy and impression taking on children was included. It is desirable that each delegate's knowledge and skills are reviewed at least annually by an experienced audiologist.

### 3.1 Knowledge and understanding

Delegates need to have knowledge and skills in the following areas:

- a. Communication needs of hearing impaired people
- b. Anatomy and physiology of the outer and middle ear
- c. Hygiene and disinfection
- d. Safe technique for otoscopy
- e. Identification of the structures of the outer ear and eardrum
- f. Contraindications to impression taking
- g. Impression materials and their characteristics
- h. Safe techniques for impression taking with syringe and gun





- i. *\*Understand particular problems and risks when working with young children and babies*
- j. Handling and packaging of impressions
- k. Types of earmoulds
- l. Life of earmoulds and the need for remakes
- m. The manufacturing process for earmoulds
- n. Equipment cleaning and maintenance
- o. Referral criteria and process
- p. Third party insurance

### 3.2 Learning outcomes

On successful completion of training, delegates will be able to:

- a. Give clear instructions to patients (including those with hearing loss)
- b. *\*Give clear and appropriate instructions to parents and guardians*
- c. Examine the external ear
- d. Perform thorough and safe otoscopy on adults and children aged 5 and over
- e. *\*Perform thorough and safe otoscopy on babies and children under 5*
- f. Recognise abnormal conditions and refer accordingly
- g. Perform correct and safe impression technique with both syringe and gun
- h. Arrange for manufacture of the correct earmould
- i. Maintain accurate records of tasks undertaken

*\*Those items marked with an asterix will be only covered by delegates who will work with children, extending the training from 7 hours to at least 10 hours.*

### 3.3 Assessment

Assessment will be through observation, oral, practical and written examination. Course providers will be required to submit their assessment methods and materials for moderation by the BSA Practice Guidance Group.

### 3.4 Courses

Those wishing to offer courses are invited to submit their detailed proposals to the BSA Practice Guidance Group for accreditation. Course providers must ensure that delegates have sufficient appropriate experience to undertake this training, especially where it extends to work with babies and





children under 5. Only those offering accredited courses will be entitled to award a BSA Certificate in Otoscopy and Impression Taking.

## 4 Course accreditation and moderation

Applications from course providers for accreditation should be sent to the BSA Practice Guidance Group, who are also able to advise on content, assessments etc. (see BSA guidance on applying for course accreditation).

The BSA will not bear the financial burden of setting up or running training schemes directly. A charge is payable to BSA to cover the cost of accreditation and moderation.

## 5 References

*Where references are undated, refer to the given website for the current versions*

BSA Recommended Procedure: Taking an aural impression. British Society of Audiology.  
[www.thebsa.org.uk](http://www.thebsa.org.uk)

BSA Recommended Procedure: Ear Examination. British Society of Audiology. [www.thebsa.org.uk](http://www.thebsa.org.uk)

BSA Guidelines: How to gain accreditation for a BSA Certificate course. British Society of Audiology.  
[www.thebsa.org.uk](http://www.thebsa.org.uk)

BSA Procedure for Processing Documents. British Society of Audiology. [www.thebsa.org.uk](http://www.thebsa.org.uk)

