

Teacher of the Hearing Impaired Services Log 2021 - 2022

| | | | |
|--------------------------|--|------------------|---|
| Student's name: | | Provider's Name: | |
| Student's date of birth: | | PA Secure ID | |
| School: | | Date: | |
| Diagnosis/symptom(s): | | | <input type="checkbox"/> Early Intervention <input type="checkbox"/> School Age |

| Service | Treatment | | | Refer to the keys below for an explanation of the treatment codes and progress indicators | | | |
|---------|------------|----------|--------------------------|---|--|------------------------|---|
| Date | Start Time | End Time | Treatment Key (see Pg 2) | Service Type | | Progress Indicator Key | Description of Service (daily notes on activity, location, and outcome) |
| | | | | <input type="checkbox"/> Indiv. | | | |
| | | | | <input type="checkbox"/> Group | | | |
| | | | | <input type="checkbox"/> Indiv. | | | |
| | | | | <input type="checkbox"/> Group | | | |
| | | | | <input type="checkbox"/> Indiv. | | | |
| | | | | <input type="checkbox"/> Group | | | |
| | | | | <input type="checkbox"/> Indiv. | | | |
| | | | | <input type="checkbox"/> Group | | | |
| | | | | <input type="checkbox"/> Indiv. | | | |
| | | | | <input type="checkbox"/> Group | | | |
| | | | | <input type="checkbox"/> Indiv. | | | |
| | | | | <input type="checkbox"/> Group | | | |
| | | | | <input type="checkbox"/> Indiv. | | | |
| | | | | <input type="checkbox"/> Group | | | |

| Service Type: | |
|----------------------------------|---|
| D = Direct | DM = Direct Session: Make-up Session |
| DT = Direct: Telemedicine | DTM = Direct: Make Up Telemedicine |
| PA = Provider Absent | PNA = Provider Not Available |
| SA = Student Absent | SNA = Student Not Available |

| Progress Indicator Type | | |
|-------------------------|-------------------------|--------------------------|
| Mn = Maintaining | Pr = Progressing | In = Inconsistent |
| Rg = Regressing | Ms = Mastering | |

Treatment Key:

| | | |
|----|--------|---|
| 1 | Direct | Articulation for Hearing Support |
| 2 | Direct | Assistive Technology |
| 3 | Direct | Auditory Comprehension |
| 4 | Direct | Auditory Discrimination |
| 5 | Direct | Auditory Memory |
| 6 | Direct | Auditory Training |
| 7 | Direct | Auditory Training and Language Skills |
| 8 | Direct | Augment Oral Communication |
| 9 | Direct | Augment Written Communication |
| 10 | Direct | Aural Rehabilitation |
| 11 | Direct | Expressive Language |
| 12 | Direct | Figure-Ground Discrimination |
| 13 | Direct | FM Training Auditory Memory |
| 14 | Direct | Hearing Aid Maintenance |
| 15 | Direct | Hearing/FM Aid Instruction to Student |
| 16 | Direct | Language Enhancement |
| 17 | Direct | Receptive and Expressive Communication Feedback through Listening Technology in the Hearing Impaired Services |
| 18 | Direct | Receptive Language |
| 19 | Direct | Speech Reading |
| 20 | Direct | Other Direct Service |

Notes:

- All Direct Services should be provided face-to-face with the student whenever possible.
- When face-to-face delivery of service is not possible, services may be billed when provided via telemedicine when technical and program requirements are met, and the service can be rendered to its full extent in a clinically appropriate manner.
- The Treatment Key should not be considered an all-inclusive list. Providers may use “Other Direct Service” but must provide a clear description of the service in their comments.
- Use the “Service Provider Evaluation Log” for evaluations and/or assessments.