Submission Guidelines

Thank you for considering submitting a case to the Audiology Case-based Educational Scenarios (ACES). Please follow these guidelines so that the cases will be easy to review and the published collection of cases will have a professional appearance. The cases will be peer-reviewed prior to acceptance and publication. This document and a companion submission template AudCases.com are to be used to create the case submission. The reviewer instructions can also be found at AudCases.com.

* To submit a case, attach the Word document to an email sent to [AudiologyACES@gmail.com](mailto:AudiologyACES@gmail.com). The subject line should list the case category and the first author’s last name.
* The file name of the Word .docx document for the case study should be in this format: FirstauthorLastName\_Category\_Level\_1. If you have submitted another case in this category/level, then append an updated number to the file name. Example: Hamill\_AudioInterp\_Intermed\_2.

# Submission Categories

Choose a submission category from this list. We prefer that a case be used only in one category. We expect diagnostic information to accompany amplification cases. We understand that advanced-level cases will (by definition, below) contain different types of diagnostic information. Choose the category that seems to be the most relevant to the case.

Each Case Category has a template that must be followed for all submissions. Download the appropriate template to assist you while writing your case. Please note, advanced cases with content across several categories may be reviewed by multiple teams prior to acceptance and publication.

* If varying from the template, justification will be required. Please provide that justification in a separate document that accompanies the submission. Use the file name format FirstauthorLastName\_Category\_Level\_CaseNumber\_Justification, for example, Hamill\_AudioInterp\_Intermed\_2\_Justification.

Case Categories:

Amplification

Auditory Electrophysiology

Audiogram Interpretation

Auditory Processing

Audiologic Rehabilitation

Counseling

Educational Audiology

Ethics

Hearing Conservation

Immittance and OAE

Implantables (CI and other)

Medical Audiology

Pediatric Audiology

Tinnitus and Sound Sensitivity

Vestibular Evaluation and Management

# Descriptive Title

The title will only appear in the instructor guide. A clear, descriptive title will help professors select appropriate cases. Since the title will not be seen by the students, you do not need to worry about “spoilers.”

Example descriptive case titles:

10-year-old with Non-Organic Loss and History of Child Abuse

Acoustic Neuroma Patient with Presentation Mimicking Meniere’s Disease

8-year-old with Temporal Processing Deficit

Cochlear Implantation for an Adult with Single-Sided Deafness

# Authors, Submitter Qualifications, and Listing Format

As with other forms of scholarship, the authors should be listed in order, with the person who has made the greatest professional contribution listed as first author and with subsequent authors listed in order of effort. Only those who have made a professional contribution to the case presentation and/or instructor guide should be listed as authors. The preceptor of the case may or may not be listed as an author if a case is submitted by a student. Contribution to the writing of the case presentation is one indication that the preceptor should be considered an author. Substantial guidance to the student in the case analysis would also be an indication that authorship is appropriate. If the preceptor contributed only minimally to the student’s analysis, then it is more appropriate to list the preceptor in the Acknowledgement section. Submitters who have not yet earned their professional degree must have a degreed professional as coauthor. Sponsoring professionals should ensure that only the highest-quality cases are submitted.

Please use the format of Firstname Lastname, Degree designation. (Do not preface with Dr.) Provide the work affiliation information.

# Acknowledgment(s)

If the patient was tested by someone other than one (or more) of the authors or was completed under the preceptorship of a non-author professional, the professional should be acknowledged.

# User agreement

In submitting a case to the Audiology Case-Based Educational Scenarios (ACES), you agree to the following:

* You have de-identified the case. Even the most diligent PHI lawyer would not find fault. (Check images, such as CT/MRI, to ensure there is no personal identifying information.)

You’ve checked that your institution allows submission of the de-identified case. Once accepted, it cannot be withdrawn. You understand that submitting a case doesn’t mean the case will be accepted. All submissions will be peer-reviewed to verify all required case information is provided and appropriate academic rigor.

# Audstudent.com pledge

* The ACES website is hosted by Audstudent.com
* The case(s) you volunteer will never be behind a “pay wall” – there will always be free access to everyone who wants to see the case.

To be clear

* There are costs to hosting the cases.
* As of August 2020, we think we can use low-tech, low-cost options, minimize costs, and not need financial backing.
* Discrete advertising that complies with the ethical advertising guidelines (<http://www.aaf.org/_pdf/aaf%20website%20content/513_ethics/iae_principles_practices.pdf>) may be used to offset costs.
* If Audstudent.com becomes unable or unwilling to host the cases, Audstudent.com reserves the right to give permission to another entity (e.g. individual, group, university, corporation) to host/take over the cases, and potentially, to advertise their beneficence. The entity assuming care of the cases would be required to adhere to the agreement that the cases be free to view.

# Submission format

## Use a Template

Submit the case using the Submission Template AudCases.com that is appropriate for your case category.

## Graphics

Insert graphics directly into your case submission. This will be approximately how it will look on the website. Check that the graphics are of good quality.

* + The preferred format for graphics is a .SVG file (vector file)
  + The preferred format for simple animations is .GIF
  + A .PNG file (raster file) is perfectly acceptable.
  + GIF and PNG files should ideally be approximately 1500 pixels
  + Videos should be .MP4 files, and 800 pixel resolution would be preferred to keep file sizes manageable.
  + If your only available file is a .JPEG, if it is of good quality, that can be accepted.

Your submission, if accepted, will essentially become the Instructor Guide version. After acceptance, you may be asked to create a separate Word document version for the ACES website for the students to view. (If so, you will receive specific instructions. The “Commodore of Audiology” for audstudent.com may just do the formatting for the authors, depending on workload.)

The preferred audiogram format is the digital audiogram that can be created using this link. <http://www.audsim.com/audgenJS/> If you need non-standard symbols, such as R or L, or S or A, use the “annotate” function. Using the same audiogram format across cases will give the site a nice look/feel. Also, this graphic is lightweight (low file size). If it is educationally relevant to use a different audiogram format, or you just prefer the Jerger split audiogram format, that is permissible if justification is provided for the alternative format and if the audiogram is clearly legible (unless legibility problems are an educational feature of the case). Please consider file size: students pay for bandwidth and large files download slowly.

Unsupported alternative formats will be returned to the author(s) to convert the audiogram to the preferred format.

## Use Tables from the Template

Whenever appropriate, use the data tables in the templates. Deviation from the standard format is permitted when it is educationally relevant and appropriately justified.

Unsupported alternative formats will be returned to the author(s) to convert the table to the approved template.

## Use Standardized Headings

The bold-faced headings / topic areas (such as History, Audiometric Data, Otoscopy, Summary and Discussion, and Recommendations for the Audiogram Interpretation content area) provide the viewer with the case organization. Avoid altering the headings if possible; however, if educationally appropriate and appropriately justified, you may add or rename headings. Please copy/paste an existing heading first so that the font size/style remains consistent throughout. Use the same heading style as in the template so that the site has a consistent “look and feel”.

Unsupported alternative headings will be returned to the author(s) to convert the headings to the standard format.

# Table of Content Items

The table of contents, to appear in the Instructor Guide restricted-view area, will (eventually) be a searchable list across all of the ACES cases. Create a list of features (key words) for the case.

For example,

Hearing loss, unilateral

ABR, abnormally prolonged I-V IPL

Acoustic neuroma

For more examples, see the Table of Contents for the original Case Studies project, which is in the Instructor Guide, last item on the drop-down menu in the NEW case studies left hand menu. Access the original case studies project via [www.audstudent.com](http://www.audstudent.com) then Case Studies.

The table of content items must be included in the submission. Please list them in the order that they appear in the case. For example, if the case *Acoustic Neuroma in a Patient with Unilateral Noise-Induced Hearing Loss,* “Hearing loss unilateral” would precede “ABR, abnormally prolonged I-V IPL” because the hearing loss is described before the ABR is presented. (Your listing in this order will make it easier for reviewers to add/modify items.)

# Educational Level

Select the educational level that you believe this case represents.

## Introductory

Appropriate case for use in a first course in the topic area

## Intermediate

Case that require considerable education in the topic area. These would be cases used later in courses or in the second course in a single topic area. They require integration of information within the topic area.

## Advanced

Designate a case as “advanced” when it requires substantial integration of material across content areas. For example, a Medical Audiology case that requires application of understanding of auditory and vestibular electrophysiology would be considered “advanced.”

# Learning/Assessment Objectives

To better facilitate student learning and appropriate case selection, a list of Learning/Assessment objectives must be included. These will appear within the Instructor Guide only and will not be visible to students.

Please ensure that the learning/assessment objectives are student-centered, actionable and consistent with the difficulty level of the case. Here are some examples of the desired learning/assessment objective format:

By completing this case, students will be able to:

Distinguish between conductive and mixed hearing loss.

Identify potentially vibrotactile thresholds.

Locate information about syndromic hearing loss.

Determine a probable pathology (Usher syndrome).

Identify three amplification options for a patient with Usher syndrome.

The following link may help those who are not familiar with writing objectives and/or need a review of Bloom’s taxonomy. <https://www.apu.edu/live_data/files/333/blooms_taxonomy_action_verbs.pdf>

Another useful link is to the new Bloom’s taxonomy.

<https://www.apu.edu/live_data/files/333/blooms_taxonomy_action_verbs.pdf>

Another helpful site is

<https://www.bu.edu/cme/forms/RSS_forms/tips_for_writing_objectives.pdf>

# Questions

Each template has a single question in each section to facilitate formatting. Use the same format if there is more than one question. Answer the question (for the Instructor Guide) immediately after the listed question. If there is no question for a section, delete the question and answer prompts.

(Also, please delete instructions to authors that are found in the submission templates.)

Questions may be open-ended, require a calculation, or be multiple choice. Multiple choice and calculation type questions are encouraged for introductory-level cases and are consistent with lower level Bloom’s taxology educational objectives, such as “recognize” and “identify”. (Consider that audiogram interpretation and introductory immittance cases may be assigned in large undergraduate classes. Grading multiple choice questions is less time consuming than grading short-answer questions.)

Review your question(s) carefully to ensure that it is clear. If multiple choice answers are required, follow these rules.

* Vary your placement of the correct answer / foils. The most common location for the correct answer is the second choice. Be sure that you are not falling into that trap. (But do sometimes make the second choice the correct one.)
* Make foil and correct answers similar length. Avoid cueing the right answer by making it typically be the longest one.
* Make the multiple-choice question have one correct answer only. Avoid the format of “select the best answer.”
* Avoid linguistically complex questions and answers. Consider that the site users include those for whom English is a second language. Avoid negatives, such as “The loss is not conductive.” If unable to adhere to this style request, then bold words such as not, only, mostly, generally.
* More guidance on writing test items can be found at
  1. <https://testing.byu.edu/handbooks/14%20Rules%20for%20Writing%20Multiple-Choice%20Questions.pdf>
  2. <https://cft.vanderbilt.edu/guides-sub-pages/writing-good-multiple-choice-test-questions/>

If you have general questions on submissions, please email AudiologyACES@gmail.com.