**Reviewer Rubric**

The green text is instructions for reviewers. It has been overlaid on the submission template.

Gentle reminder – please keep criticism constructive.

Reviewers will generally receive the direct comments made, which, because of the way the “Teams” system works, includes your name with the comments.

**Counseling**

# **Descriptive Title of Case. Replace this heading with your title.**

**Suggest an alternative title if the title is not sufficiently descriptive.**

# **Authors**

# **Check that appropriate format has been used.**

Jane Doe, Ph.D., University of Where Ever

John Smith, B.S., Doctoral Student of Audiology, University of Where Ever

ACKNOWLEDGEMENT: Mary Jane, Au.D., Cool Medical Externship Site, City, State

# **User Agreement**

The user agreement is within the Submission Guidelines ([www.AudCases.com](http://www.AudCases.com)) Type the initials of the authors below to electronically sign the user agreement, most importantly, that you have thoroughly checked that the case is completely de-identified:

Return without reviewing if the initials of ALL authors were not included.

# **Table of Content Items**

List the items for your table of content here. Do not indent. Use a separate line per item.

Content items should be listed in the order they appear in the case to facilitate your review. Add or recommend deleting items as you think appropriate.

# **Educational Level**

Choose one educational level that most adequately describes your case and delete the others.

Introductory

Intermediate

Advanced

Recommend a different educational level if needed.

# **Learning / Assessment Objectives**

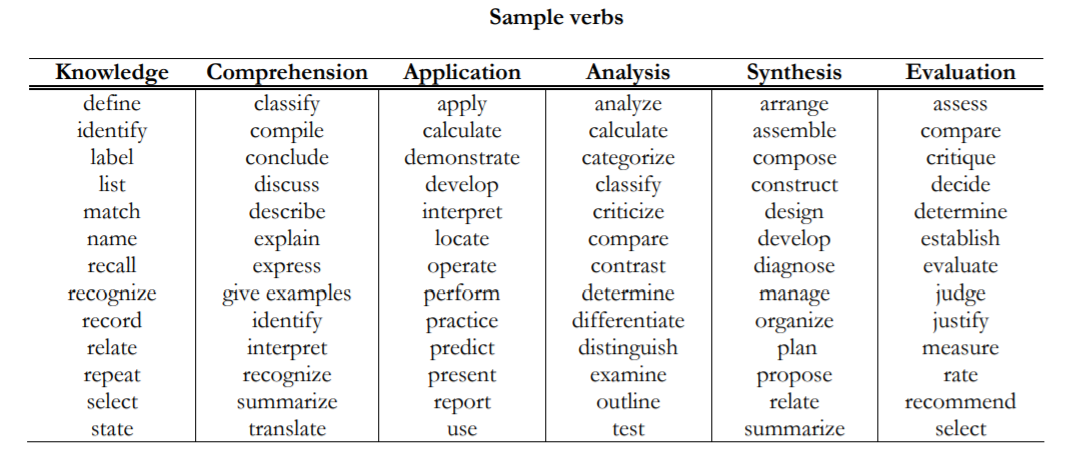
Replace the list below with your own objectives. Use the format provided.

By completing this case, the student will be able to:

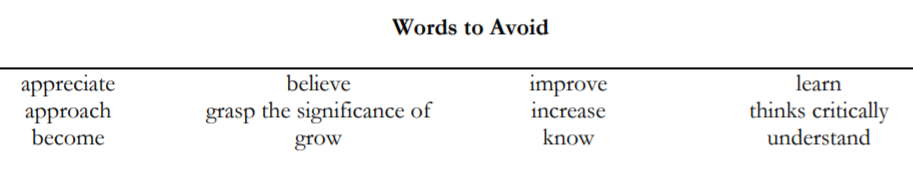
1. Identify counseling strategies used to understand patient/family priorities, concerns, and desired outcomes
2. Identify counseling strategies used to assess for and address patient treatment barriers
3. Identify counseling strategies used to engage the patient in a shared process for planning, decision-making, and problem-solving

Omit headings that are not appropriate. If your case requires a different type of heading system, please justify that in the accompanying note to reviewers.

Evaluate the objectives and consider if they match the educational level. Introductory cases should use terms from the left-hand side of the list; advanced cases from the right-hand side. Considerable latitude can be permitted.



If any of the “avoid terms” are used, suggest an alternative verb.



Below is guidance from the “New” Bloom’s Taxonomy.

**New Bloom’s Taxonomy**

**I. Remembering**

Exhibit memory of previously learned material by recalling facts, terms, basic concepts, and answers.

Choose • Define • Find • How • Label • List • Match • Name • Omit • Recall • Relate • Select • Show • Spell • Tell • What • When • Where • Which • Who • Why •

**II. Understanding**

Demonstrate understanding of facts and ideas by organizing, comparing, translating, interpreting, giving descriptions, and stating main ideas.

Classify • Compare • Contrast • Demonstrate • Explain • Extend • Illustrate • Infer • Interpret • Outline • Relate • Rephrase • Show • Summarize • Translate •

**III. Applying**

Solve problems to new situations by applying acquired knowledge, facts, techniques and rules in a different way.

Apply • Build • Choose • Construct • Develop • Experiment with • Identify • Interview • Make use of • Model • Organize • Plan • Select • Solve • Utilize •

**IV. Analyzing**

Examine and break information into parts by identifying motives or causes. Make inferences and find evidence to support generalizations.

Analyze • Assume • Categorize • Classify • Compare • Conclusion • Contrast • Discover • Dissect • Distinguish • Divide • Examine • Function • Inference • Inspect • List • Motive • Relationships • Simplify • Survey • Take part in • Test for • Theme •

**V. Evaluating**

Present and defend opinions by making judgments about information, validity of ideas, or quality of work based on a set of criteria.

Agree • Appraise • Assess • Award • Choose • Compare • Conclude • Criteria • Criticize • Decide • Deduct • Defend • Determine • Disprove • Estimate • Evaluate • Explain • Importance • Influence • Interpret • Judge • Justify • Mark • Measure • Opinion • Perceive • Prioritize • Prove • Rate • Recommend • Rule on • Select • Support • Value •

**VI. Creating**

Compile information together in a different way by combining elements in a new pattern or proposing alternative solutions.

Adapt • Build • Change • Choose • Combine • Compile • Compose • Construct • Create • Delete • Design • Develop • Discuss • Elaborate • Estimate • Formulate • Happen • Imagine • Improve • Invent • Make up • Maximize • Minimize • Modify • Original • Originate • Plan • Predict • Propose • Solution • Solve • Suppose • Test • Theory • Maximize • Minimize

Anderson, L. W., & Krathwohl, D. R. (2001). A taxonomy for learning, teaching, and assessing, Abridged Edition. Boston, MA: Allyn and Bacon.

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

Please check each question throughout the sections.

If a question is not clearly written or contains grammar or spelling errors, please provide suggested improvements.

For multiple choice questions, if the student could deduce the correct answer because it is the longest one, either suggest a revision or point out the problem and return it to the author(s) to correct. Confirm that there is only one correct answer – and that it is completely correct.

* Questions should be bulleted in this style.
* Answers should appear immediately after the question asked

The standard headers are below. Encourage use of them if appropriate. Permit other headings if educationally relevant. The sections listed in the template are noted below.

Check the quality of images. They must be clear and neat. Do not accept images with poor scan quality, titled images or poor graphics (exceptions may occasionally need to be made.)

Be vigilant in looking for identifying patient information. Initials and common first names may be used. Last names, patient ID numbers and exact dates of birth should not appear.

The names of individual practitioners should not be used unless they are authors or donors of the case.

Review all sections for appropriateness / clarity.

# **Appointment Intake**

Provide information on the patient presentation and statement of the problem. Include prompts to consider counseling skills used to understand patient concerns, challenges, and priorities.

* What question do you want to insert here? Delete if no question is to be used.
* If a question is given, please provide the answer to the question as it would appear in the Instructor Guide. Delete this bullet if no question is to be used.

# **Test Results Counseling**

Include prompt to consider counseling skills used to approach sharing news that may be difficult.

* What question do you want to insert here? Delete if no question is to be used.
* If a question is given, please provide the answer to the question as it would appear in the Instructor Guide. Delete this bullet if no question is to be used.

If an audiogram is used, please create it digitally using this link. <http://www.audsim.com/audgenJS/> . The submission guidelines document details when other formats can/should be used.

If the standard format audiogram is not used, is there an educationally relevant reason for the substitution?

* What question do you want to insert here? Delete if no question is to be used.
* If a question is given, please provide the answer to the question as it would appear in the Instructor Guide. Delete this bullet if no question is to be used.

Review all sections for appropriateness, clarity. The standard tables must be used unless the submitter has justified the use of an alternative format. Send submissions with poor quality graphics back to the submitter.

Use this table for speech testing results, inserting patient-specific results. If using alternative stimuli (e.g. QuickSIN) then use your preferred format.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **PTA (dB HL)** | **SRT (dB HL)** | **WRS** | **WRS Intensity (dB HL)** |
| **Right Ear** | 80 | 80 | 44 | 100 |
| **Left Ear** | 10 | 15 | 100 | 50 |
|  |  |  |  | |
| Spondee Technique | MLV | WRS Technique | Recorded | |
|  |  | List and Number | NU-6 Right: 1A Left: 1B | |
|  |  | Number of Items | Right: 50 Left: 10 MD | |

MLV = Monitored Live Voice NU-6 = Northwestern University List 6

CID W-22 = Central Institute of the Deaf, Word List 22.

PB-K = Phonetically Balanced – Kindergarten 10 MD = 10 Most Difficult

* What question do you want to insert here? Delete if no question is to be used.
* If a question is given, please provide the answer to the question as it would appear in the Instructor Guide. Delete this bullet if no question is to be used.

# **Problem Solving**

## **Shared Decision Making**

## **Patient/Family Involvement; Sharing Information**

Include prompt to consider counseling skills used to promote a shared process (e.g., sharing desired information, checking for understanding).

* What question do you want to insert here? Delete if no question is to be used.
* If a question is given, please provide the answer to the question as it would appear in the Instructor Guide. Delete this bullet if no question is to be used.

# **Action Planning / Future Follow-Up**

## **Shared Decision Making**

## **Patient/Family Involvement; Sharing Information**

Include prompt to consider counseling skills used to promote a shared process (e.g., sharing desired information, checking for understanding).

* What question do you want to insert here? Delete if no question is to be used.
* If a question is given, please provide the answer to the question as it would appear in the Instructor Guide. Delete this bullet if no question is to be used.

# **Summary and Discussion**

Omit this category if not appropriate to the case. You may reorder this heading vs recommendations as fits your case.

* What question do you want to insert here? Delete if no question is to be used.
* If a question is given, please provide the answer to the question as it would appear in the Instructor Guide. Delete this bullet if no question is to be used.

# **Recommendations**

Omit this category if it is not appropriate to your case.

* What question do you want to insert here? Delete if no question is to be used.
* If a question is given, please provide the answer to the question as it would appear in the Instructor Guide. Delete this bullet if no question is to be used.

# Decision –

# Does the case have educational merit?

* Reject cases that do not represent appropriate audiological assessment, unless the case has been designed to highlight the testing weakness.
* Use your discretion if the case is like other case(s). If similar cases are well represented within ACES, adding another may bloat the site.

# Is the case quality high enough to merit inclusion?

* The writing clarity, the graphics quality, and the nature of the questions and answers should all be good for a case to be accepted. A highly useful / highly educational case can be accepted if there is legitimate reason that revision and resubmission cannot overcome the deficit. For example, an unusual pathology case could be accepted with a poor-quality image.

# Case Category. This case has been submitted under Counseling. Would it be a better fit to one of the other categories? The categories are listed below for your convenience.

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 & Sound Sensitivity

Vestibular Evaluation and Management