

Renewal Form for Advanced Competency Certificates



College of
Speech and Hearing
Health Professionals of BC

Regulator of Audiologists, Hearing Instrument
Practitioners and Speech-Language Pathologists

SECTION I

PERSONAL INFORMATION

Name:
Salutation Surname First Initial

Reserved Title: Registration # :
(AUD /HIP / SLP)

SECTION II

ADVANCED COMPETENCY CERTIFICATES:

Check and complete all the Advanced Competency Certificates that you are reapplying for and list all the Continuing Competencies Credits earned in the last three years under Section III.

- A) VESTIBULAR ASSESSMENT AND MANAGEMENT
- B) COCHLEAR IMPLANT MANAGEMENT
- C) CERUMEN MANAGEMENT
- D) HEARING INSTRUMENT DISPENSING SERVICES FOR CHILDREN (AGES 12-16 YEARS) (
- E) FIBEROPTIC ENDOSCOPIC EVALUATION AND MANAGEMENT OF VOICE DISORDERS
- F) FIBEROPTIC ENDOSCOPIC EVALUATION AND MANAGEMENT OF SWALLOWING DISORDERS
- G) VOICE RESTORATION (VOICE PROSTHESES)
- H) COMMUNICATION AND SWALLOWING ASSESSMENT AND MANAGEMENT FOR TRACHEOSTOMY
- I) VIDEOFUOROSCOPIC ASSESSMENT OF ADULT SWALLOWING DISORDERS
- J) VIDEOFUOROSCOPIC ASSESSMENT OF PAEDIATRIC SWALLOWING DISORDERS
- K) AIRWAY SECRETION MANAGEMENT (OROPHARYNGEAL AND TRACHEAL SUCTIONING)

