

SRI RAMACHANDRA FACULTY OF ALLIED HEALTH SCIENCES

REGULATIONS AND SYLLABUS FOR M.Sc. AUDIOLOGY [A32] PROGRAM (Under Credit Based Semester System)

(Effective from 2021-22)

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MASTER OF SCIENCE (AUDIOLOGY) [A32] DEGREE PROGRAM

Introduction

The Master of Science (Audiology) is a two-year postgraduate program in Audiology. This post graduate program covers relevant theory, clinical and research project courses in the area of Audiology. The aim of the theory courses is to provide thorough knowledge in different subject areas through formal lectures and / or seminars. The clinical courses aim to develop skills necessary for professional practice in the area of Audiology. The courses related to research project provide graded training to conduct research in a particular area culminating in the preparation of the dissertation. This program will impart advanced theoretical knowledge and skills related to professional practice in the area of Audiology than previously studied at the undergraduate level.

The objectives of the M.Sc. (Audiology) program are to equip the students with knowledge and skills to

- function as teachers and researchers in institutions of higher learning,
- diagnose and manage hearing, vestibular and auditory processing disorders across life span,
- counsel and guide persons with hearing and balance issues
- implement rehabilitation programs for persons with hearing impairment, auditory processing issues vestibular disorders
- function as the disability certification authority in the field,
- liaise with professionals in allied fields and other stake holders,
- implement prevention and public education programs,
- undertake advocacy measures on behalf of and for persons with hearing impairment
- advise government and other institutions on legal and policy issues related to persons with hearing impairment, and
- establish and administer institutions of higher learning.

INTAKE

Annual sanctioned intake: 12 students

Credits : 100

SEMESTER	Core Theory (CT) (14)	Allied Theory (AT) (2)	Clinical Rotations (CR) (4)	Research Projects (RP) (4)	Total Credits
	CT-1	AT-1	CR-1	RP-1	
I	CT-2	AT2			
	CT-3				
	12	8	5	2	27
	CT-4		CR-2	RP-2	
II	CT-5				
	CT-6				
	CT-7				
	CT-8				
	20		5	2	27
	CT-9		CR-3	RP-3	
111	CT-10				
	CT-11				
	CT-12				
	16		5	4	25
	CT-13		CR-4	RP-4	
IV	CT-14				
	8		5	8	21
Total	56	8	20	16	100

SUMMARY SCHEME FOR CREDIT BASED SEMESTER SYSTEM Category of Course – Master of Science (Audiology), 2018

REGULATIONS FOR MASTER OF SCIENCE (AUDIOLOGY) [A32] (Under Credit Based Semester System)

In exercise of the powers conferred by Clause 19 of the Memorandum of Association & Rules and Clause 2(cc) of Bye-Laws Sri Ramachandra Institute of Higher Education and Research (Deemed to be University), Porur, Chennai-116, the Academic Council of the Deemed University hereby makes the following Regulations:

1. SHORT TITLE AND COMMENCEMENT

These regulations may be called as "THE REGULATIONS AND SYLLABUS FOR MASTER OF SCIENCE (AUDIOLOGY) DEGREE PROGRAM OF SRI RAMACHANDRA INSTITUTE OF HIGHER EDUCATION AND RESEARCH (DEEMED TO BE UNIVERSITY), PORUR, CHENNAI-116".

These regulations shall come into force from the academic year 2018-19. These regulations are subject to such modifications as may be approved by the Academic Council from time to time.

2. NOMENCLATURE

As per Rehabilitation Council of India (RCI), the nomenclature of the program shall be Master of Science (Audiology) - Abbreviated as M.Sc. (Aud) Degree Program.

3. ELIGIBILITY FOR ADMISSION

Candidates with a B. ASLP or B. Sc (Speech & Hearing) degree of any University recognized by the RCI or any other degree considered as equivalent thereto with an average of not less than 55% of marks are eligible for admission to M.Sc. (Audiology). "Average" refers to average of the aggregate marks obtained in all the years/semesters of the qualifying examination.

4. AGE LIMIT FOR ADMISSION

There is no age bar for admission to M.Sc. Audiology Degree Program

5. MEDICAL FITNESS CERTIFICATE

A candidate shall, at the time of admission, submit to the Head of the Institution, a certificate of medical fitness from an authorized Medical Officer certifying that the candidate is physically fit to undergo the academic program.

6. ELIGIBILITY CERTIFICATE

Candidates who have passed B.ASLP or B. Sc (Speech & Hearing) from any university other than Sri Ramachandra Medical College & Research Institute (Deemed to be University), shall obtain eligibility certificate from this Deemed University at the time of admission and remit recognition fee as prescribed.

7. REGISTRATION

A candidate admitted to the program shall register his/her name with the Deemed University by submitting application form for registration duly filled in, along with the prescribed fee, through the Head of the Institution within the stipulated date.

8. DURATION OF THE PROGRAM

a) The program shall be of 4 semesters (2 academic years) and should be completed within 4 years from the date of admission.

b) An academic year consists of two semesters, and each semester shall extend over a minimum period of sixteen weeks excluding examination days. The semesters shall be spread out as follows:

Odd semesters – 1 & 3 July – December Even semesters – 2 & 4 January – June

9. COMMENCEMENT OF THE PROGRAM

The program shall commence ordinarily from 1st July of the academic year.

10. COMMENCEMENT OF THE EXAMINATIONS

There shall be two sessions of University examinations in an academic year, viz., June (end of even semesters) and December (End of odd semesters).

11. MEDIUM OF INSTRUCTION

English shall be the medium of instruction and examinations.

12. CURRICULUM

The curriculum and the syllabus for the program shall be as prescribed by the Rehabilitation Council of India, New Delhi and approved by the Academic Council of this Deemed University, on the recommendations of Board of Studies. The program will be conducted on a credit based semester pattern as described below:

12.1 Program / Course Credit Structure

As per the philosophy of Credit Based Semester System, certain quantum of academic work viz. theory classes, clinics, seminars, assignments, etc are measured in terms of credits. On satisfactory completion of the courses, a candidate earns the credits. The amount of credit associated with a course is dependent upon the number of hours of instruction per week in that course. Similarly, the credit associated with any of the other academic, co/extra- curricular activities is dependent upon the quantum of work expected to be put in for each of these activities per week/per activity.

Credits

The term credit is used to describe the quantum of syllabus for various courses in terms and hours of study. It indicates differential weightage given according to the contents and duration of the course in the curriculum design. The amount of credit associated with a course/program is dependent upon the number of hours of instruction per week in that course/program. Similarly, the credit associated with any of the other academic, co/extra-curricular activities is dependent upon the quantum of work expected to be put in for each of these activities per week. Courses are broadly classified as Theory, Dissertation/Research Project and Clinical. Theory programs consist of lecture (L) and /or tutorial (T) hours; Clinical Rotation (CR) program consist of hours of instruction per week in that program, and is obtained by using a multiplier of one (1) for lecture, and a multiplier of half (1/2) for tutorial and dissertation hours, multiplying by 1/3rd for clinicals. Thus, for example, a course/program carrying one credit for lectures will have instruction of one period per week during the semester, if three hours of lecture is necessary in each week for that program, then 3 credits will be the weightage.

The credit weightage is computed as shown below: Lecture: 1 credit = 1 hour/week; 15 hours/Semester Clinical: 1 credit = 3 hours/week; 45 hours/Semester Research Project: 1 credit = 2 hours/week; 30 hours/Semester

Table 1 Credit value per course and structure of the syllabus/course/plan

For PG Programs each course will be provided a structured syllabus in the following style:

Category	Credits	Syllabus units
Core Theory (CT) /Allied Theory (AT)	4	5
Clinical Rotation (CR)	5	240 hours
Core Projects: Research Projects (RP)	8	240 hours
Dissertation (RP)	8	240 hours

The minimum credit allocation for a course is as per the curriculum designed by the department.

The program will be conducted on a credit based semester pattern as described below:

Minimum credit requirements

The minimum credit points required for the award of **M.Sc. (Audiology) Degree is 100.** These credits are divided into theory courses, clinics, seminars, assignments, dissertation with the supervisor, and journal club over the duration of four semesters. The credits are distributed semester-wise as shown

in Table 2. Courses generally progress in sequence, building competencies and their positioning indicates certain academic maturity on the part of the learners. Learners are expected to follow the semester-wise schedule of courses given in the syllabus.

13. LETTER GRADES AND GRADE POINTS:

i. The MSc (Audiology) program shall be following the absolute grading system, where the marks are compounded to grades based on pre-determined class intervals.

ii. The recommended 5-point grading system with the **Marks equivalence** are given below:

Letter Grade	Performance	Grade Point	Marks Range
0	Outstanding	10	75-100
A+	Excellent	9	65-74.99
А	Good	8	60-64.99
B+	Above Average	7	55-59.99
В	Average	6	50-54.99
RA	Reappear	0	0-49
AB	Reappear	0	
NC	Detained	0	

Table : Grading System and Marks equivalence table

iii. A student obtaining Grade RA/ AB in a course(s) shall be considered failed and will be required to reappear in the end semester examination of the said course(s).

iv. Candidate with NC grading in a course (s) indicates detained and the student is not fulfilling the minimum criteria for academic progress and attendance [i.e., lack of attendance- $\leq 80\%$ and internal assessments - $\leq 50\%$ (CIA)]. Registration for examinations of such students for those courses shall be treated as cancelled. Candidate shall repeat the course(s) by attending remedial classes. Scheduling and conduct of the courses for such candidates is the responsibility of the HoD and student advisor in the department.

v. Computation of SGPA and CGPA – illustration will be retained as in the earlier version of syllabus –table is inserted for clarity

Letter Grade	Grade Point	CGPA					
O (Outstanding)	10	9.01 - 10.00					
A+ (Excellent)	9	8.01 – 9.00					
A (Good)	8	7.01 – 8.00					
B+ (Above Average)	7	6.01 - 7.00					
B (Average)	6	5.01 - 6.00					

14. EXAMINATIONS AND ASSESSMENT:

- i. For all category of core theory courses offered, the assessment will comprise of Internal Assessments (IA) and the End Semester University examination (ES). For each core theory course the IA evaluation weighted at 20% and the ES weighted at 80%.
- ii. Continuous internal assessment weighted at 100% shall be conducted internally by the subject experts at the college level for those courses (Only theory & Dissertation) that have no end semester exam component.
- iii. A candidate failed in any course in the University examination will be provided an opportunity to improve his/her internal marks (theory only) which will be called "Improvement I.A. Examinations".
- iv. If a failed candidate does not appear for such "Improvement I.A. Examinations" for internal marks in the failed course(s), the internal marks (in theory) already secured by him/her shall be carried over for his/her subsequent appearance(s) in the University examinations.
- v. IA Marks shall be submitted to the University for each Course separately by the Head of the department/ program co-ordinator 15 days prior to the commencement of the University examinations, through the Principal.

14. 1. Internal assessment

- a) Evaluation for a course shall be done on a continuous basis. The uniform procedures to be adopted under the Credit based semester system (CBSS) are to conduct at least two internal assessments followed by University examination for each course.
- b) A regular record of attendance in theory, clinical, seminar, assignment, journal club, discussion with the supervisor, research work presentation and dissertation, etc shall be maintained by the department / teaching staff of respective courses.

14.2. Eligibility in Internal Examination for end –semester (IA for all theory, clinical courses, and other courses)

- a) For theory, clinical and research courses, a candidate should obtain a minimum of 50% marks in IA to be eligible to appear for University examination of each course in a semester. IA marks shall be awarded on the basis of the candidates work throughout the particular semester.
- b) Improvement of Internal Assessment: A student shall have the opportunity to improve his/her performance only once in the sessional exam component of the internal assessment. The reconduct of the sessional exam shall be completed before the commencement of next end semester theory examinations.

14.3. Attendance Requirements

- a) No candidate shall be permitted to appear for the University examinations, unless he/she attends the program for the prescribed period and produces the necessary certificate of attendance and progress and a satisfactory conduct from the Head of the Institution.
- b) Every candidate is required to put in a minimum of 80% of attendance in theory and 90% in clinical course (s) in the semester concerned to become eligible to appear for admission to the University examination.
- c) A candidate lacking the prescribed attendance in any course(s) shall not be allowed to appear for University examination **in that course only**.

14.4. Assessments in End Semester Examinations:

a) The process of assessment in examinations for all the theory and clinical courses offered in Semesters I to IV, dissertation examinations at the end of Semester IV shall be undertaken by internal and external who will be appointed by the Controller of Examinations based on the panel of examiners provided by the respective department heads / BoS.

b)Clinical examinations (for PSL18CR101 and PSLP18CR301 shall be conducted by two University appointed faculty of the department at the end of 1st and 3rd semesters.

c)Clinical examinations for PSL18CR201 and PSL18CR401 will be conducted by One external examiner and One internal examiner appointed by the University at the end of the 2nd and 4th semester, respectively. Clinical examination shall be with patients, equipment, simulators and/or patient records. The examiners shall also evaluate records of clinical work of the students.

Theory	Duration: 3 hours
Essays (Answer 4 out of 5) (4 x 15) Short notes (Answer 4 out of 5) (4 x 5)	60 marks 20 marks
Total	80 marks

14.5. Pattern of Question Paper - End Semester Examination

15. DISSERTATION

15.1. Continuous and Summative assessments for DISSERTATION

a) All candidates registered to undergo the M.Sc. (Audiology) degree program shall have to submit a dissertation at the end of 4th semester (15 days prior to commencement of end semester theory exams).

- b) Each candidate will be assigned a recognized guide in the first semester.
- c) Candidate can obtain approval for their dissertation proposal through ethical committee (students) of the university (by the end of second semester).
- d) The topic assigned to the candidate will be intimated to the controller of examination of this University by the end of second semester.
- e) The dissertation work will be individual research / scoping review and will consist of data collection / appropriate methods carried out during third and fourth semester.
- f) The dissertation work shall be in a bound volume not exceeding 75 pages (one and half line spacing and on one side of A4 size paper) excluding references.
- g) Three bound copies and one soft copy of the dissertation work shall be submitted fifteen days prior to the commencement of the University examination and forwarded to the Controller of Examination of the University.
- h) The concerned guide may evaluate the performance of the candidate for the internal marks as per the guidelines given below. This evaluation would reflect the quality of work put into the dissertation by the student.

Semester	Activity to be completed	Hours/ Semester	Credits	Max. Marks (Internal)
I	Research Seminar 1: Submit a summary of	60	2	100
II	Research Seminar 2: Present research proposal in	60	2	100
	the department, and obtain clearance from IEC			
	Research Practicum: Demonstrate progress in	120	4	100
	dissertation as written report			
IV	Dissertation: Submit dissertation and present at the	240	8	20
	department			

Table 5: Guideline for awarding IA – Dissertation

- i) The internal marks awarded based on the above format has to be submitted to the COE through the Head of Department 15 days before the commencement of end semester exams.
- j) One external and one internal examiner appointed by the University shall evaluate the dissertation as per the guideline given below.

Table 6 Guidelines for Allotment of Marks for University Examination

Introduction, Review of literature	10 marks
Need for the study and Objectives	10 marks
Method	20 marks
Results and discussion	30 marks
Summary and Conclusion	10 marks
Total	80 marks

16. CRITERIA FOR PASSING

16.1. Marks qualifying for a Pass for M.Sc (Aud) Program

A candidate shall be declared to have passed the examination if he/she obtains the following minimum qualifying grade / marks:-

- a) Grade B (50% of marks) in the University End Semester Examination Theory, Clinical, and Dissertation (ESE)
- b) Grade B (50%) aggregate in each course which includes both Continuous Internal Assessment and End Semester Examinations.

16.2. Reappearance for arrear courses:

- a) In case a student fails to secure the minimum 50% in any theory or clinical course (s), then he/she shall reappear for the next end semester examination of that course only.
- b) However, his/her marks of the Internal Assessment shall be carried over and he/she will be entitled for grade obtained by him/her on passing, subject to provisions 13 (iii & iv).

16.3. CARRYOVER OF 'NC' (detained) or 'RA' (Reappearance) or AB (Absent) GRADE in COURSE(S) and BREAK IN SEMESTER:

Candidates **eligible** for appearing in the end semester examination and earning a "RA/AB" grade in a Course (s) shall be permitted to carry over the course (s) to the next semester subject to the stipulated conditions infra.

CARRY OVER OF 'RA' [Reappearance]/ 'AB' [Absent] COURSE(S):

- a) Students reappearing for a course (RA grade/ AB) shall do so along with the subsequent regular end of semester examinations.
- b) Students are permitted to carry-over the 'RA'/ 'AB' course(s) from 1st semester till the completion of the PG program. However, Student will be permitted to appear in the 4th semester exams only after passing all the clinical courses from I to III semesters of the program.
- c) Such a student is permitted to continue the course work of the 4th semester. During the end semester examinations the student can appear only for the arrears in clinical courses. The 4th semester course(s) can be attempted during the next End Semester exams if the student has no other arrears.
- d) The maximum period of study permissible to complete the program is four years.

NOTE: e) Students with '**NC**' grades (vide13.4) in a course (s) shall not be permitted to appear for the 4th semester examinations of the PG Program until they complete the requirements for eligibility to appear for the examinations for such courses.

END SEMESTER SUPPLEMENTARY EXAMINATIONS

End semester supplementary examinations shall be conducted as per the schedule given in table below. The exact dates of examinations shall be notified from time to time.

17. RETOTALING OF ANSWER PAPERS

The candidates can apply for retotaling by paying prescribed fee.

18. CLASSIFICATION OF SUCCESSFUL CANDIDATES

Overall Performance in a Program and Ranking of a candidate is in accordance with the University regulations.

Letter Grade	Grade Point	CGPA	REMARKS
O (Outstanding)	10	9.01 - 10.00	First Class with Distinction
A+ (Excellent)	9	8.01 – 9.00	First attempt only
A (Good)	8	7.01 – 8.00	
B+ (Above Average)	7	6.01 - 7.00	First Class Class will be awarded only when the course is completed within the stipulated period. All others would be declared as 'pass'
B (Average)	6	5.01 - 6.00	Second Class Class will be awarded only when the course is completed within the stipulated period. All others would be declared as 'pass'

19. AWARD OF RANKS

Ranks and medals shall be awarded based on final CGPA for candidates who pass in the first attempt and the candidates should have completed the M.Sc. (Audiology) program in minimum prescribed number of years, (two years) for the award of ranks. However, candidates who fail in one or more courses during the M.Sc. (Audiology) program shall not be eligible for award of ranks.

20. AWARD OF DEGREE

The University will award the degree after a candidate successfully completes the required University examinations (all semesters).

21. RE-ADMISSION AFTER BREAK OF STUDY

A candidate having a break of study shall be re-admitted after satisfactory fulfillment of the regulations of the University at the commencement of an academic year only and shall undergo the full duration of the Program. No exemption for the period of study already undergone or for the examination already passed shall be granted. The candidate will be required to appear for all the examinations as prescribed in the regulations and syllabus in vogue at the time of readmission.

A candidate having a break of study of four years and above from the date of admission and more than two spells of break will not be considered for re-admission. The four years' period of break of study shall be calculated from the date of first admission of the candidate to the course inclusive of all the subsequent spells of break of studies.

If a candidate has a break of study of more than 2 months during the semester, he/ she has to apply for continuation to the semester which has to be redone when it is being offered with specific recommendations by HoD.

22. DISCHARGE FROM THE PROGRAM

If a student admitted to a Program of study in this Deemed University is for any reason not able to complete the Program or qualify for the degree by passing the examinations prescribed within a period comprising twice the duration prescribed in the Regulations for the concerned Program, he/she will be discharged from the said Program, his/her name will be taken off the rolls of the Deemed University and he/she will not be permitted to attend classes or appear for any examination conducted by the Deemed University thereafter.

	M.Sc. Audiology, 2018-19 [A32]																	
					SEME	STER	• 1											
her	<u>a</u>					F	lours /	Week	Ĺ	(0	Hours/ Credits x	semeste 15 wee	er eks)	JCe	int (IA) – al (a)	Univ Ex	ersity am	Gran d Total
Course Num	Course co	Category	Course Title	Lecture (L)	Tutorial(T)/ Clinical Training(CT)	Research Project (RP)	Credits(C)	Lecture	Tutorial(T)/ Clinical Training(CT)	Research Project (RP)	Total hours	(%) Attendar	Internal assessme Theory/ Practic	Theory (b)	Viva-voce(c)	Theory: a+b = 100 Practical: a + c = 100		
														EST	ESP			
1	POA18CT101	CT1	Auditory Physiology	4			4	60			60	80	20	80	-	100		
2	POA18CT102	CT2	Neurophysiology of hearing	4			4	60			60	80	20	80	-	100		
3	POA18CT103	CT3	Hearing sciences	4			4	60			60	80	20	80	-	100		
4	POA18AT104	AT1	Technology and instrumentation in Audiology	4			4	60			60	80	20	80	-	100		
5	POA18AT105	AT2	Research Methods, Epidemiology and Statistics	4			4	60			60	80	20	80	-	100		
6	POA18CR106	CR1	Clinicals in Audiology – 1		5		5	-	225	-	225	90	50		50	100		
7	POA18RP107	RP1	Research Seminar - 1			2	2			60	60	80	100			100		
	Year 1 – Semester-I		Total	20	5	2	27	300	225	60	585		250	400	50	700		

SCHEME OF CURRICULUM AND EVALUATION OF THE PROGRAM

Faculty of Allied Health Sciences of SRIHER (DU)

	M.Sc. Audiology, 2018-19 [A32]															
					SE	MEST	ER- 2									
				ŀ	lours /	'Week		H (Cr	lours/ s edits x	semeste 15 wee	r ks)		– Theory/	Unive Ex	ersity am	Grand Total
Course Number	Course code	Category	Course Title	Lecture (L)	Tutorial(T)/ Clinical Training(CT)	Research Project (RP)	Credits(C)	Lecture	Tutorial(T)/ Clinical Training(CT)	Research Project (RP)	Total hours	(%) Attendance	Internal assessment (IA) - Practical (a)	Theory (b)	Viva-voce(c)	Theory: a+b = 100 Practical: a + c = 100
														EST	ESP	
8	POA18CT20 1	CT4	Auditory perception	4			4	60			60	80	20	80	-	100
9	POA18CT20 2	CT5	Auditory disorders	4			4	60			60	80	20	80	-	100
10	POA18CT20 3	CT6	Electrophysiological assessment	4			4	60			60	80	20	80	-	100
11	POA18CT20 4	CT7	Advances in management of hearing loss	4			4	60			60	80	20	80	-	100
12	POA18CT20 5	CT8	Genetics of hearing and Paediatric Audiology	4			4	60			60	80	20	80	-	100
13	POA18CR20 6	CR2	Clinicals in Audiology- 2		5		5	-	225	-	225	90	50		50	100
14	POA18RP20 7	RP2	Research Seminar - 2			2	2			60	60	80	100			100
	Year 1 – Semester-II		Total	20	5	2	27	300	225	60	585		250	400	50	700

	M.Sc. Audiology, 2018-19 [A32]															
	SEMESTER- 3															
					Hours	/ Wee	k	H (Ci	Hours/ s redits x	semester 15 week	s)		- Theory/	Univ Ex	versity kam	Grand Total
Course Number	Course code	Category	Course Title	Lecture (L)	Tutorial(T)/ Clinical Training(CT)	Research Project (RP)	Credits(C)	Lecture	Tutorial(T)/ Clinical Training(CT)	Research Project (RP)	Total hours	(%) Attendance	Internal assessment (IA) – Practical (a)	Theory (b)	Viva-voce(c)	Theory: a+b = 100 Practical: a + c = 100
														ES T	ESP	
15	POA18CT301	CT9	Implant Audiology	4			4	60			60	80	20	80	-	100
16	POA18CT302	CT10	Speech perception	4			4	60			60	80	20	80	-	100
17	POA18CT303	CT11	Auditory Processing Disorders	4			4	60			60	80	20	80	-	100
18	POA18CT304	CT12	Vestibular system and its disorders	4			4	60			60	80	20	80	-	100
19	POA18CR305	CR3	Clinicals in Audiology - 3		5		5	-	225	-	225	90	50		50	100
20	POA18RP306	RP3	Research Practicum			4	4			120	120	80	100			100
	Year 2 – Semes	Year 2 – Semester-III Total		16	5	4	25	240	225	120	585		230	320	50	600

			Ν	1.Sc.(A	udiolo	ogy) , 2	2018-1	9 [A32]	I							
					SEM	ESTEF	R- 4									
				ŀ	lours /	Week	Σ.	l (C	Hours/ s redits x	emeste 15 weel	r (S)		- Theory/	Univ E	versity kam	Grand Total
Course Number	Course code	Category	Course Title	Lecture (L)	Tutorial(T)/ Clinical Training(CT)	Research Project (RP)	Credits(C)	Lecture	Tutorial(T)/ Clinical Training(CT)	Research Project (RP)	Total hours	(%) Attendance	Internal assessment (IA) – Practical (a)	Theory (b)	Viva-voce(c)	Theory: a+b = 100 Practical: a + c = 100
														ES T	ESP	
21	POA18CT401	CT-13	Audiology in Practice	4			4	60			60	80	20	80	-	100
22	POA18CT402	CT-14	Seminars in Practices related to Medical Audiology*	4			4	60			60	80	100	-	-	100
23	POA18CR403	CR4*	Clinicals in Audiology - 4		5		5	-	225	-	225	90	50		50	100
24	POA18RP404	RP4	Dissertation			8	8			240	240	80	20		80	100
	Year 2 – Semes	ter-IV	Total	8	5	8	21	120	225	240	585		190	80	130	400

M.Sc. (Audiology) Syllabus content

Semester I

Course Title: Auditory Physiology

Marks – 100

Course Number	Course Code	Course category	Cours	altiti Lecture (L) Clinical Training (CT) Research Project (RP)/ Dissertation Total Hours/Marks						
1	POA18CT101	Core Theory CT1	Auditory Phy	siology	4	-	-	4	60/ 100	
	Learning (Objective	S	Learning Outcomes						
The knc ear b) mid c) for d) anc e) me	e objective of the cou wledge on: The development of and cochlea Anatomy & Physiolo Idle ear and cochlea Protocol for recordir research, Protocol for recordir I for research, and Research needs in p asurements of hearin	rse is to p the extern ogy of extern og OAEs in og ECoch(hysiologic	rovide nal, middle ernal ear, ration of OAE, n clinics and G in clinics al	After completir able to: a) Illustrat b) Descrit & phys c) Explain genera d) Use ap OAEs f researc e) Use ap ECoch researc	ng this be the iology the p propri or clin ch, propri G for c ch, and	develop micro a of the c hysiolog f OAE, ate prot nical purp ate prot clinical p d	, the stud ment of nd macr ochlea. gical bas ocol for n pose and ocol for n ourpose a	dent the e o and is for recor d for recor and f	will be ear atomy ding ding or	

Unit	Syllabus
UNIT	Auditory system
1:	
	a) External and middle ear
	Role of external ear and temporal bone in hearing,
	Middle ear transformer action and
	Eustachian tube physiology
	b) Micro & macro anatomy of cochlea
	c) Homeostatic mechanisms in cochlea
	d) Blood supply and Innervations of cochlea
	e) Cochlear regeneration

UNIT	Auditory Physiology
II:	
	a) Role of external ear and temporal bone in hearing
	 b) Middle ear transformer action and physiology of Eustachian tube
	 c) Techniques to study hair cell and basilar membrane physiology
	d) Basilar membrane mechanics
	e) Outer hair cell physiology – different mechanisms involved in hair cell motility
	f) Inner hair cell physiology
	g) Cochlear non-linearity
UNIT	Development of cochlea and top down control of sensory process
III:	
	a) Efferent control of cochlear hair cells
	b) Nutrients related to sensory cell physiology
	c) Ontogenetic development of cochlea
	d) Phylogenetic development of cochlea
	e) Developmental changes in the cochlea; effect of advancing age on cochlea
	t) Comparative physiology of auditory system in non-mammalian species
UNIT	Otoacoustic Emissions
UNIT IV:	Otoacoustic Emissions
UNIT IV:	Otoacoustic Emissions a) Classifications of OAEs; mechanism based taxonomy
UNIT IV:	Otoacoustic Emissions a) Classifications of OAEs; mechanism based taxonomy b) Characteristics of different types of OAEs
UNIT IV:	 Otoacoustic Emissions a) Classifications of OAEs; mechanism based taxonomy b) Characteristics of different types of OAEs c) Instrumentation and techniques for recording different types of OAEs
UNIT IV:	 Otoacoustic Emissions a) Classifications of OAEs; mechanism based taxonomy b) Characteristics of different types of OAEs c) Instrumentation and techniques for recording different types of OAEs d) Factors affecting different types of OAEs d) Factors affecting different types of OAEs
UNIT IV:	 Otoacoustic Emissions a) Classifications of OAEs; mechanism based taxonomy b) Characteristics of different types of OAEs c) Instrumentation and techniques for recording different types of OAEs d) Factors affecting different types of OAEs d) Fine structure DPOAEs e) Current of OAEs e) Current of OAEs
UNIT IV:	 Otoacoustic Emissions a) Classifications of OAEs; mechanism based taxonomy b) Characteristics of different types of OAEs c) Instrumentation and techniques for recording different types of OAEs d) Factors affecting different types of OAEs d) Fine structure DPOAEs e) Suppression of OAEs: ipsilateral, contralateral, and bilateral f) Clinical applications of OAEs
UNIT IV:	 Otoacoustic Emissions a) Classifications of OAEs; mechanism based taxonomy b) Characteristics of different types of OAEs c) Instrumentation and techniques for recording different types of OAEs d) Factors affecting different types of OAEs d) Fine structure DPOAEs e) Suppression of OAEs: ipsilateral, contralateral, and bilateral f) Clinical applications of OAEs
UNIT IV: UNIT	Otoacoustic Emissions a) Classifications of OAEs; mechanism based taxonomy b) Characteristics of different types of OAEs c) Instrumentation and techniques for recording different types of OAEs d) Factors affecting different types of OAEs d) Fine structure DPOAEs e) Suppression of OAEs: ipsilateral, contralateral, and bilateral f) Clinical applications of OAEs Cochlear Potentials
UNIT IV: UNIT V:	Otoacoustic Emissions a) Classifications of OAEs; mechanism based taxonomy b) Characteristics of different types of OAEs c) Instrumentation and techniques for recording different types of OAEs d) Factors affecting different types of OAEs d) Fine structure DPOAEs e) Suppression of OAEs: ipsilateral, contralateral, and bilateral f) Clinical applications of OAEs Cochlear Potentials
UNIT IV: UNIT V:	 Otoacoustic Emissions a) Classifications of OAEs; mechanism based taxonomy b) Characteristics of different types of OAEs c) Instrumentation and techniques for recording different types of OAEs d) Factors affecting different types of OAEs d) Fine structure DPOAEs e) Suppression of OAEs: ipsilateral, contralateral, and bilateral f) Clinical applications of OAEs a) Endocochlear potentials. b) Electrocochleograpy: Instrumentation and technique
UNIT IV: UNIT V:	Otoacoustic Emissions a) Classifications of OAEs; mechanism based taxonomy b) Characteristics of different types of OAEs c) Instrumentation and techniques for recording different types of OAEs d) Factors affecting different types of OAEs d) Factors affecting different types of OAEs e) Suppression of OAEs: ipsilateral, contralateral, and bilateral f) Clinical applications of OAEs Cochlear Potentials a) Endocochlear potentials. b) Electrocochleograhy: Instrumentation and technique b) Protocol for recording ECochG
UNIT IV: UNIT V:	Otoacoustic Emissions a) Classifications of OAEs; mechanism based taxonomy b) Characteristics of different types of OAEs c) Instrumentation and techniques for recording different types of OAEs d) Factors affecting different types of OAEs d) Factors affecting different types of OAEs e) Suppression of OAEs: ipsilateral, contralateral, and bilateral f) Clinical applications of OAEs Cochlear Potentials a) Endocochlear potentials. b) Electrocochleograhy: Instrumentation and technique b) Protocol for recording ECochG c) Interpretation of ECochG
UNIT IV: UNIT V:	Otoacoustic Emissions a) Classifications of OAEs; mechanism based taxonomy b) Characteristics of different types of OAEs c) Instrumentation and techniques for recording different types of OAEs d) Factors affecting different types of OAEs d) Factors affecting different types of OAEs e) Suppression of OAEs: ipsilateral, contralateral, and bilateral f) Clinical applications of OAEs Cochlear Potentials a) Endocochlear potentials. b) Electrocochleograhy: Instrumentation and technique b) Protocol for recording ECochG c) Interpretation of ECochG d) Clinical application of ECochG

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Course title: Neurophysiology of hearing

Marks – 100

Course Number	Course Code	Course category	Course Title			Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks	
2	POA18CT102	Core Theory CT2	Neurophysio hearing	logy of	4	-	-	4	60/ 100	
	Learning C	Objectives	6	Learning outcomes						
The kno	objective of the cour wledge on:	rse is to p	rovide	After completin able to	ng this	course,	the stuc		will be	
a) a effe	anatomy and physiol rent system	ogy of affe	erent and	neurophysiology of the afferent and efferent system,						
b) t stim	he role of auditory ne nulus coding	erve and b	orainstem in	the disorders affecting the auditory nervous system						
c) t	he tonotopic organiz	ation in au	ditory cortex	c) apply t electrophysiolo	ne ne baical	urologic assessn	al basis	of		
d) r affe	neurophysiological ba cting the auditory ne	asis of the rvous syst	disorders tem		<u> </u>					

Unit	Syllabus
UNIT	Ascending Auditory Pathway: Anatomy
l:	
	a) Auditory nerve
	b) Cochlear nucleus
	c) Superior olivary complex
	d) Lateral leminiscus
	e) Inferior colliculus
	f) Medial geniculate body

UNIT	Functioning of the Auditory Nerve
п.	
	a) Stimulus coding
	i. Frequency, intensity and temporal coding
	ii. Coding of complex signals
	b) Non linearity
	c) Action potentials
	d) Neurotransmitters and neuromodulators
UNIT	Physiology of Auditory Brainstem
III:	
	a) Tonotopic organization of auditory brainstem
	i. Cochlear nucleus
	ii. Superior olivary complex
	iii. Lateral lemniscus
	iv. Inferior colliculus
	v. Medial Geniculate body
	b) Coding of simple and complex acoustic signals at auditory brainstem
	i. Cochlear nucleus
	ii. Superior olivary complex
	iii. Lateral lemniscus
	iv. Inferior colliculus
	v. Medial Geniculate body
	c) Role of subcortical structures in sound localization
UNIT	Anatomy and Physiology of Auditory Cortex
IV:	
	 a) Anatomy of primary and secondary auditory contex b) Topotopic organization in auditory cortex
	c) Coding of signals in the at auditory cortex
	i. Simple and complex signals
	ii. Speech
	 Association of auditory cortex with other structures
	e) Role of auditory cortex in sound localization
	f) Plasticity of auditory cortex
	Efferent Auditory System
v:	a) Efferent auditory pathway madial and lateral alive eachlast hundle
	a) Enerent auditory pathway. mediai and lateral olivo cochiear bundle
	a) Polo of auditory offerent system in bearing
	d) Protective function of auditory effectent system

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- Pickels, J.O. (2012). An introduction to the physiology of hearing. United Kingdom: Emerald Group Publishing Inc.
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- Tony, L. S., Richard, H. N., & Musiek, F.E. (1997). Efferent auditory system: structure and function. USA: Singular Publishing Group.
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Course title: Hearing sciences

Marks - 100

Course Number	Course Code	Course category	Cours	Altical Training (CT) Clinical Training (CT) Research Project (RP)/ Dissertation Total Credits						
3	POA18CT103	POA18CT103 Core Theory CT3 Hearing scien				-	-	4	60/ 100	
	Learning C	Objectives	6	Learning outcomes						
The kno	e objectives of the wledge on	course	is to provide	At the end of the course the student will be able to						
a) p b) tl c) v d) r	by chophysical comp their measurement, he different methods thresholds, frequence application of maskin arious psychophysica estimate thresholds elationship between components of soun clinical practice	onents of of estimat y analysis ng al procedu and meas the psycho ds and its	sound and tion of and ures to ure pitch ophysical relevance to	a) demonstrate components of their relationsh b) critically eva estimation of th c) discuss the procedures to pitch d) design expe absolute sensit	e know soun ip with luate nresho variou estima tivity, o	vledge o d, their r n each c the diffe olds us psych ate thres ts using different	f psycho measure other orent met nophysic sholds ar principle ial sensi	ophys ment hods al nd me es lea tivity,	sical t, and s of easure arnt in	

Unit	Syllabus
UNIT	Introduction to Psychoacoustics
l:	
	 a) Physical description and parameters for generation of sounds: Sine wave and complex signals; Analysis of sound: Spectrum and spectrogram, LTASS; Filters and their properties
	b) Theory of signal detection: Basic concepts and applications of signal detection
	c) Psychophysical methods - Classical and adaptive methods
UNIT	Thresholds and Loudness
	a) Overview of absolute and relative measures: Methods of measuring absolute and
II:	relative thresholds; thresholds of audibility (MAP & MAF); Models of loudness.
	b) Loudness perception in normal nearing persons
	d) Dynamic range of hearing, equal loudness contours and loudness scaling
	 e) Recruitment and softness imperceptions
	f) Consequences of altered loudness perception
	 g) Factors affecting loudness: Bandwidth, duration, adaptation and masking. h) DLI

UNIT	Pitch
III:	 a) Theories/models of pitch perception - simple and complex signals b) Pitch scales c) Factors affecting pitch perception d) Perception of pure-tones by persons with normal hearing and those with hearing impairment e) Perception of complex signals by persons with normal hearing and those with hearing impairment
	Peripheral Masking
IV:	 a) Critical band concept and power spectrum model b) Estimating the shape of auditory filter: Psycho-physical tuning curve; Notched noise; Non-simultaneous masking c) Auditory filter shapes in normal hearing and hearing impaired d) Masking patterns and excitation patterns in normal hearing and hearing impairment
UNIT	Non-Peripheral Masking
V:	 a) Central masking b) Informational masking c) Overshoot phenomena d) Co-modulation masking release e) Effect of hearing loss on non-peripheral masking

- Brian C.J. Moore (2007). Cochlear Hearing Loss: Physiological, Psychological and Technical Issues. England: John Wiley and Sons Ltd.
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Course title:	Technology and instrumentation in Audiology	Marks – 100
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Course Number	Course Code	Course category	Cours	e Title	Lecture (L)	Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks				
4	POA18AT104	Core Theory AT1	Technology a instrumentati Audiology	4	-	-	4	60/ 100					
	Learning C	Objectives	6		Learni	ing outo	omes						
The	objective of the cou	rse is to p	rovide	After completing this course, the student will be									
kno	wledge on												
	line age en			able to				 a) discuss advanced aspects of signal acquisition and processing b) Demonstrate application of software based tools for analysis of sounds c) Demonstrate application of teletechnology d) demonstrate the technology used in 					
a) b) c)	advanced aspects o processing, development and ap based tools, development and ap technology, and	f signal ac oplication o	equisition and of software of tele-	able to a) discu acqu b) Dem base c) Dem techr d) demo	iss ad isition a onstrat d tools onstrate ology	vanced and proc e applic for analy e app e the te	aspects essing cation c vsis of so lication echnolog	s of of sc ounds of gy us	signal oftware s tele- sed in				

Unit	Syllabus
UNIT	Fundamentals of Digital Signal Processing & Communication Systems
1:	
	a) Digitization of data and digital systems; Principles and methods of digital signal processing
	 b) Fundamentals of communication systems – (i) AM & FM transmission & reception (ii) Digital modulation techniques, (iii) Satellite communication
	c) Transducers and signal generation
	c) Biomedical signals & signal processing: Principles of generation of acoustic stimulid) Signal acquisition and processing techniques
	e) Working principles of EEG / Magnetoencepholography, event related potentials/ evoked potential.
	f) High-fidelity sound reproducing systems: Auditorium acoustics
UNIT	Techniques of Speech Processing and Analysis
II:	a) Artificial neural networks
	 b) Speech processing and synthesis models and techniques (linear predictive coding, linear prediction model, LPC-based synthesis) and applications, review of signal processing, Fourier transform and short-time speech analysis(energy, zero-crossing rate, autocorrelation function).
	 c) Voice response system, speaker recognition system and speech recognition system: Speech synthesis methods, speech recognition, speaker recognition, speech coding, and speech enhancement.
	d) Basic principles of cepstral analysis, filtering low-time filtering for formant estimation, high-time filtering for pitch estimation, complex cepstrum

UNIT	Neuro Imaging
III:	 Principles of neuro imaging techniques - MRI, fMRI, NIRS, CT, PET, SPECT, TMS and MEG and their technology (working principles, interpretation and implications).
	 b) Synching various speech stimuli and events for fMRI acquisition and speech perception in fMRI
	c) Technology available for intra-operative monitoring of sensory and motor functions
UNIT	Tele-technology
IV:	
	a) Tele-technology: Definition, applications, technology, resources
	b) Transmission of information: transmission of patient images, reports, etc.
	c) Remote consultations and databases
	d) Distance learning- multimedia meeting room / videoconferencing
UNIT	Software for Analysis
V:	 Software packages and applications in hearing diagnostics and research - MATLAB, Adobe audition, Audacity, PRAAT
	b) Basics features, vectors and matrices, built-in functions and plotting
	 c) Editing audio files, applying effects in waveform editor, amplitude compression and modulation effects, filter and equalizer effects, noise reduction/ restoration effects, basic multitrack controls, saving and exporting
	 d) Computer based assessment and intervention programs relating to hearing e) Calibration and maintenance of equipment

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- Boulston, F. R. & Dvorak, J.D (2015). Matlab Primer for Speech Language Pathology and Audiology. San Diego: Plural Publishing Inc
- Schaub, A. (2008). Digital hearing aids. New York: Thieme Medical publishers.
- Boulston.FR and Dvorak.J.D. (2015) . Matlab Primar for speech Language pathology and Audiology. Plural publishing Inc

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Course title: Research Methods, Statistics & Epidemiology

Marks:100

Course Number	Course Code	Course category	Course Title			Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks
5	POA18AT105	Core Theory AT2	Research Methods, Epidemiology and Statistics			-	-	4	60/ 100
	Learning	j Objecti	ves	L	.earni	ng outo	omes		
The knc	e objectives of the o wledge on:	ourse ar	e to provide	At the end of th able to:	ne cou	urse, the	student	will k	be
 a) clinical research designs and statistical methods b) ethical considerations in conduct of research with human participants c) epidemiological issues and its relevance in speech-language research d) methods used in evidence-based practice in speech and language pathology 				 a) evaluate fit terms of ty statistical fields b) discuss eprelation to disorders c) appraise e different fit hearing dis d) develop a project 	vpes o metho bidemi speed eviden elds o sorder resea	f resear ods used ological ch-langu ce-base f speech rs rch prop	d practic oosal for	ins ar is in aring ce in ge ar rese	nd

Unit	Syllabus
UNIT	Research designs, documentation and research ethics
l:	 Types of research- post facto research, normative research, standard group comparison
	 b) Experimental research, clinical and applied research, sample surveys, evaluation research
	c) Methods of observation and measurement, strategies and designs in research
	 d) Experimental designs - single subject designs and group designs
	e) Documentation and research writing
	 f) Ethical considerations in research with human participants – ICMR guidelines
UNIT	Epidemiology
II:	 Definition, basic concepts – scope and function of epidemiology
	 b) Study designs in epidemiology: Cohort studies, case-control studies, cross-sectional studies, clinical trials
	c) Measures in enidemiology – Ratios proportions rates relative risk odds ratio
	d) Identify biases and their consequences in published literature.
	e) Describe criteria for characterizing the causality of associations.
	f) Application of epidemiology in evaluation and screening procedures employed in
	Speech-language Pathology
	 Application and impact of epidemiology on national and local policy; influence of epidemiology on ethical and professional issues

UNIT	Sta	atistical measures and their features
III:	a)	Review of data description and exploratory data analysis (Numerical summaries and
		graphical summaries)
	b)	Statistical Inference – Estimation of Confidence Intervals
	C)	Statistical Interence – Basic concepts related to hypothesis testing –hull hypothesis,
		accentance / rejection region p_{r} value power types of errors: Type I (a) Type II (B)
		one-sided (one-tailed) test. Two-sided (two-tailed) test
	d)	Parametric tests of hypothesis testing: testing the significance between two means
	,	(Independent samples t-test, Paired sample t-test)
	e)	Non-parametric tests of hypothesis testing: Need for transformations and non-
		parametric tests; independent samples (Median test, Mann-Whitney U test, Kruskal-
		Wallis test) and for related samples (Sign test, Wilcoxon's signed-rank test,
	f١	Friedman's test) Analysis of qualitative data - Contingency tables: Chi-square test for independence of
	"	attributes: Measures of Association - contingency coefficient and Cramer's:
		Measures of agreement - Kappa coefficient
UNIT	Re	gression, univariate and multivariate analysis
IV:	a)	Correlation; simple and multiple linear regression; logistic regression; path analysis
	b)	Analysis of Variance (ANOVA)- Basic models, assumptions, one way and two-way
		additivity bomogeneity transformation: Post – boc tests: Analysis of Covariance
		(ANOCO)/A). Repeated measure ANO/A
	c)	Multivariate data analysis (concept only) - Need for multivariate data analysis:
	- /	Introduction to various methods including Principal component analysis, Cluster
		analysis, Discriminant analysis, MANOVA
	d)	Evaluation of application of statistics to different research designs used in different
	- >	publications
	e)	different areas of Speech-language Pathology
	_	
UNIT	Ev	idence based practice
V:	a)	Introduction to Evidence Based Practice (EBP) and Steps to EBP from formulating
		evidence, summarizing evidence, integrating evidence and tracking progress
	b)	Concepts related to practical significance (effect size) vs. statistical significance,
	,	precision of measurement (confidence intervals)
	c)	Levels of evidence for experimental and non-experimental designs; treatment
		efficacy- randomized control study, quasi experimental study, correlation and case
	4)	study, single subject designs, expert committee report, consensus conference
	u)	predictive value, pegative predictive value, diagnostic odds ratio
	e)	Concepts related to randomized control trials: Comparative groups- allocation
	•,	concealment / random allocation; importance of participation and follow up in
		understanding, evaluating and applying randomized controlled trial results
	f)	Methods of carrying out therapy trials; execution, indexing and reporting of therapy
		trials – efficacy studies; Conventions to study outcomes - i) Absolute risk reduction, ii)
		Absolute benefit increase, iii) Absolute risk increase, and iv) Absolute benefit
	~	reduction
	9)	of systematic review meta-analysis, clinical practice quidelines, health technology
		assessments.
	h)	Challenges in implementation of EBP in Speech-language Pathology in India and
	Ĺ	future directions

- Hegde, M. (2017). A coursebook on scientific and professional writing for speech-language pathology (5th Ed). San Diego: Plural Publishing
- Irwin, D. L., Pannbacker, M., & Lass, N. J. (2013). *Clinical research methods in speech-language pathology and audiology*. (2nd Ed). San Diego: Plural Publishing
- Silverman, F. H. (1998). Research design and evaluation in speech-language pathology and audiology. Allyn & Bacon.
- Goyal, R. C. (2010). Research methodology for health professionals. Jaypee brothers' publishers.
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- Gurumani, N. (2011). Research methodology: for biological sciences. Mjp Publishers.
- National Ethical Guidelines for Biomedical and Health Research Involving Human Participants (2017) by Indian Council of Medical Research, New Delhi
- National Ethical Guidelines for Bio-Medical Research Involving Children by Indian Council of Medical Research, New Delhi
- Orlikoff, R.F., Schiavetti, N., & Metz, D. E. (2014). *Evaluating research in communication disorders*. USA: Pearson Education.
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Co	urse Title: Clinica	als in Audiol	ogy - 1			Mar	ks: 100	0
Course Number	Course Code	Course category	Course Title	Lecture (L)	Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks
6	POA18CR106	Clinical Rotation CR1	Clinicals in Audiology - 1	-	5		5	225/ 100

Option - 1 Note: Clinical practicum for CR-1 is listed with that for CR-2 at the end of syllabus

Course title: Research Seminar - 1

Marks:100

Course Number	Course Code	Course category	Course Title		Lecture (L)	Clinical Training (CT)	Research Proiect	Total Credits	Total Hours/Marks
7	POA18RP107	Research	Research Se	eminar -1	-	-	2	2	60/
		Project							100
		RP1							100
	Learnin	g objectives		Learning outcomes					
				_					
The	objectives of the	course in conj	unction with	At the end of the course the student will be able					
the	course on resear	ch methods, e	pidemiology						
and	statistics are to:			a) to identify a research question within a broad					
a)	learn to perform a	literature rese	earch in a	research the	eme				
broad area of research						6 11.			
b) learn to critically evaluate a research article				b) submit a sur	mmar	y of litera	ature re	elated to	broad
c) appraise on issues related to ethics in				area of rese	arch				
	research on huma								
d)	learn about function								
	committee and re								

COURSE PLAN:

- 1. Identify a Research Theme
- 2. Identify an Advisor and get approval
- 3. Perform a review of literature in the area of the research theme and write an annotated bibliography
- 4. Formulate hypotheses or research question

- 5. Complete online learning related to ethics in research on human subjects covering topics included but not restricted to:
 - History and ethics of human subject research
 - Social and behavioral research
 - Basic Institutional Review Board (IRB) Regulations and Review process
 - Informed consent
 - Populations in research requiring additional considerations and/or protection
 - Vulnerable subjects Research involving children
 - · Conflict of Interest in research involving human subjects
 - Records-based research

The above course plan will be transacted by students individually with their research advisors. The internal assessment for the course will be based on brief review of literature/annotated bibliography submitted by the student.

Semester II

Course content

Со	urse title: Auditory F			-	Mar	ks – 1	00		
Course Number	Course Code	Course category	Course T	itle	Lecture (L)	Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks
8	POA18CT201	Core Theory	Auditory Perc	eption	4	-	-	4	60/
		CT4						-	100
	Learning C	bjectives	5		Lea	arning o	outcomes		
The kno	objective of the cou wledge on:	rse is to p	rovide	After c able to	completing :	this cou	urse, the s	tudent	will be
a) sou	Psychophysical aspend	ects of par	rameters of	a)	Illustrate biological	the inter aspects	action of p s of sound	hysica	and
b)	perception of sound	l in space		b)	Apply the managing	concep	ts of locali s with hea	zation rina	in
c) Neurophysiological aspects of localization					impairme	nt		5	
 factors affecting binaural hearing and music perception 			c)	Apply the two ears hearing ir	phenon in mana npairme	nenon of ir ging the po nt	nteract ersons	ion of with	
				d)	Discuss t perceptio	he facto n	rs involved	d in mu	isic

Unit	Sy	labus
UNIT	Те	mporal processing
l:		
	a)	Overview of temporal processing: temporal resolution; temporal integration; models
	b)	Detection and discrimination of gaps in normals and individuals with hearing
	5)	impairment
	c)	Temporal modulation transfer function in normals and individuals with hearing
	,	impairment
	d)	Temporal integration in persons with normals hearing and those with hearing
		impairment
	e)	Models of temporal processing in persons with normal hearing and those with
	-,	hearing impairment
UNIT	Au	ditory object and pattern perception
II:	a)	Basic concepts in auditory object perception
	b)	Spectral cues for object perception
	c)	Temporal cues for object perception
	d)	Auditory pattern perception in individuals with normal hearing and those with hearing
	۵)	
	f)	Time invariant-pattern and time varving pattern perception
	,	
UNIT	Ad	aptation
III:	a)	Adaptation vs. fatigue
	b)	Methods of studying adaptation
	c)	Adaptation in in persons with normal hearing and those with hearing impairment
	d)	Neurophysiological basis of adaptation
	e)	Factors affecting adaptation
UNIT	Pe	rception in Space
IV:	a)	Perception of distance: localization vs. lateralization; localization of pure tones;
		localization of complex signals
	b)	Effect of hearing loss on localization
	C)	Monaural localization
	C)	Factors affecting localization
	d)	Neurophysiology of localization
UNIT	Bir	naural hearing and Perception of Music
V:	a)	Binaural hearing - overview
	b)	Models of binaural hearing
	c)	Masking level difference
	d)	Musical scales/Musical notes
	e)	Factors affecting perception of music

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- Diana Deutsch (2013). The Psychology of Music, Third Edition (Cognition and Perception) 3rd Edition. Academic Press
- M. Riess Jones, R.R. Fay, A.N. Popper (2010). Music Perception. Springer
- Oxenham, A., & Bacon, S. (2003). Cochlear Compression: Perceptual Measures and Implications for Normal and Impaired Hearing. Ear and Hearing, 24, 350-366.
- Plack, C.J., Oxenham, A.J., & Fay, R.R. (2005). Pitch: Neural Coding and Perception. New York: Springer.
- Stanley, A. Gelfand (1998). Hearing. New York: Marcel Dekker Inc.
- Warren, R. M. (2008). Auditory Perception: An Analysis and Synthesis. Cambridge: Cambridge University Press.
- Zwicker, E., & Fastl, H. (1999). Psychoacoustics-Facts and models. Springer: Verlag Berlin Heidelberg.

Course Number	Course Code	Course category	Course Title		Lecture (L)	Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks
9	POA18CT202	Core Theory	Auditory Disc	orders	4	-	-	4	60/
	CT5						100		
	Learning C	bjectives	5		Learni	ng ou	tcomes		
The kno	objective of the cou wledge on	rse is to p	rovide	After completing this course, the student will be able to					
a) pathophysiology and audiological profile of auditory disorders				a) develop insight in to histopathological changes in auditory disorders					
b) challenges in diagnosis of auditory disorders				b) perform differential diagnosis of auditory disorders			у		
c) Non audiological management of auditory disorders.				c) Apply knowledge to coordinate with medical professionals in treating auditory disorders.			edical rders.		

Unit	Sy	labus								
UNIT	Dis	Disorders of the External and Middle Ear								
l:	a)	Congenital malformations of external and middle ear								
	b)	Diseases of the external ear: otitis – externa, neoplasms of external ear, cerumen, keratosis obturans, injuries, sebaceous cysts, acquired atresia, stenosis of external auditory canal & malignant otitis externa								
	c)	Diseases of the middle ear cleft: otosclerosis otitis media, non suppurative otitis media, complications of middle ear diseases, neoplasms.								
	d)	Assessment of middle ear functioning: multicomponent tympanometry, multifrequency tympanometry, wide band reflectance/absorbance, reflexometry								
	d)	Reconstruction of external and middle ear hearing mechanisms: reconstructive and rehabilitation procedure								

UNIT	Disorders of the Cochlea
II:	
	a) Pathophysiology inner ear disorders: ototoxicity, Meniere's, age related hearing loss,
	Sudden hearing loss, auto immune conditions, hearing loss due to systemic diseases
	 b) Audiological profile in persons with above inner ear disorders
	c) Nonaudiolgical management options
UNIT	Disorders of the Cochlea – NIHL & Traumatic Injury
III:	
	a) Pathophysiology inner ear disorders due to NIHL, traumatic injuries
	 b) Audiological profile in persons with NIHL and other inner ear disorders
	c) Hearing Conservation: National and International guidelines
	d) Non-audiological management options
UNIT	Auditory Nerve and Brainstem
IV:	a) Pathophysiology of space occupying lesions of auditory nerve and brainstem
	b) Audiological profile in persons with space occupying lesions
	d) Radiological findings and its correlations with audiological findings
	d) Challenges in diagnosis of space occupying lesion
	e) Management options for space occupying lesion
	Auditory Neuropethy Spectrum Diserders
	Auditory Neuropathy Spectrum Disorders
V:	a) Pathonhysiology of ANSD
	b) Etiology of ANSD
	c) Audiological profile of persons with ANSD and its correlations with pathophysiology
	d) Speech perception in persons with ANSD
	e) Management of persons with ANSD. Aids and strategies

- Brain, C.J. Moore (1986). Frequency selectivity in Hearing. CA: Academic Press Inc.
- Gelfand, S, A. (2005). Introduction to psychological and physiological acoustics. New York: Marcel Dekker.
- Howard, D and Angus, J (2013). Acoustics and Psychoacoustics. Oxford: Taylor & Francis
- Moller, A.R (2000). Hearing: Its physiology and pathology. Academic press Inc

- Diana Deutsch (2013). The Psychology of Music, Third Edition (Cognition and Perception) 3rd Edition. Academic Press
- M. Riess Jones, R.R. Fay, A.N. Popper (2010). Music Perception. Springer
- Oxenham, A., & Bacon, S. (2003). Cochlear Compression: Perceptual Measures and Implications for Normal and Impaired Hearing. Ear and Hearing, 24, 350-366.
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- Stanley, A. Gelfand (1998). Hearing. New York: Marcel Dekker Inc.
- Warren, R. M. (2008). Auditory Perception: An Analysis and Synthesis. Cambridge: Cambridge University Press.
- Yost, W. A. (1994). Fundamentals of hearing: An introduction. San Diego: Academic Press.
- Zwicker, E., & Fastl, H. (1999). Psychoacoustics-Facts and models. Springer: Verlag Berlin Heidelberg.

Course title: Electrophysiological Assessment

Marks - 100

Course Number	Course Code	Course category	Course Title		Lecture (L)	Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks	
10	POA18CT203	Core Theory CT6	Electrophysiological Assessment			4	-	-	4	60/ 100
	Learning C)bjectives		Learning outcomes						
The knov	objective of the cour wledge on	se is to pr	ovide	After completing this course, the student will be able to						
	 a) classification and AEPs 	d characte	ristics of	a)	discuss a potentials	ind clas: 3,	sify au	ditory ev	voked	
	 technology for recording and analysis of different types of AEPs 				 b) use appropriate protocols for recording exogenous and endogenous potentials for clinical and research purposes 					g s for
	c) research needs i	research needs in AEPs			c) apply the technology for recording auditory evoked potentials,				ory	
				d)	interpret potentials	exogeno	ous an	d endog	enous	

Unit	Syllabus								
UNIT I:	Foundations of Auditory Evoked Potentials (AEPs)								
	 a) Introduction and Classification of AEPs b) Neuroanatomy and neurophysiological basis for generation of AEPs; dipole orientation and scalp distribution of AEPs c) Stimuli for recording AEPs- generation, characteristics and types d) Electrodes for recording AEPs e) General principles of recording AEPs f) Overview to advanced analyses techniques such as independent component and time frequency analyses g) Maintenance and Calibration of instrumentation 								
UNIT	Auditory Brainstem Responses								
II:	a) Acquisition and analysis responses for different stimuli -clicks, tone bursts, chirps, complex stimuli such as speech								
	 b) New trends in ABR such as Cochlear Hydrops Analysis Masker Procedure (CHAMP) and stacked ABRs, and ABR for chained stimuli, 								
	c) Factors influencing ABR: Stimuli related, acquisition related, subject relatedd) Clinical applications								

UNIT	Middle Latency Auditory Evoked Potentials and Auditory Steady State Responses									
III:	 Acquisition and analysis of middle latency responses, 									
	b) Factors influencing middle latency responses: Stimuli related, acquisition related									
	subject related									
	 Acquisition and analysis of auditory steady state responses (ASSR) 									
	d) Factors influencing ASSR: Stimuli related, acquisition related, subject related									
	e) Post auricular muscle responses									
	f) Clinical applications									
UNIT	Cortical Auditory Evoked Potentials									
IV:	a) Overview of exogenous and endogenous cortical evoked potentials									
	b) Acquisition and analysis of obligatory cortical auditory evoked potentials, acoustic									
	change complex, T-complex, mismatch negativity, P300, N400, P600, CNV and									
	other endogenous potentials									
	c) Factors affecting exogenous and endogenous evoked potentials Stimuli related,									
	acquisition related, subject related									
	d) Clinical applications									
LINIT	Intrognorative menitoring									
V:	a) Developerior tests useful in introgenerative menitoring of suditory function									
	a) Filysiological lesis useful in initiaoperative monitoring of auditory function									
	b) Energinal auditory available potentials during aurgory: requirements notions									
	preparation									
	d) Guidelines for intrapporative monitoring									
	a) Electronouronography									

- Hall, J.W. (2007). New Handbook of Auditory Evoked Responses. Boston: Pearson.
- Burkard, R.F., Don, M., & Eggermont, J.J. (Eds.) (2007). Auditory Evoked Potentials: Basic Principles & Applications. Baltimore: Lippincott Williams & Wilkins.
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- Hall, J.W., & Mueller, H.G. (1997) Audiologists' Desk Reference. Volume 1: Diagnostic Audiology Principles, Procedures and Protocols. San Diego: Singular Publishing Group.
- McPherson, L.D. (1995). Late potentials of the auditory system. London: Singular Publishing Group.
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- Katz, J. (Ed.). (1994). Handbook of Clinical Audiology. Baltimore: Williams and Wilkins.

Course title: Advances in Management of Hearing Loss

Marks - 100

Course Number	Course Code	Course category	Cours	Lecture (L)	Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks	
11	POA18CT204	Core Theorv	Advances in Managemer	n nt of Hearing	4	_	-	4	60/
		CT7	Loss	J					100
	Learning (Objectives			Learning	oute	comes		
The o	bjective of the cou ledge on	rse is to pro	vide	At the able	e end of co to	urse	the stu	ident wi	ill be
a) d	lifferent amplifica	tion/assistiv	e devices	a) c	discuss the amplificatior	nee n/ass	d and o sistive o	andida levices	cy for
a b) d	nd their changing t	echnology ·based pro	grams and	b) e s	explain the selection an	st d op	rategie: otimizat	s of c ion	levice
intervention strategies for persons with different types of hearing impairment across age groups, and				c) select appropriate amplificat and habilitation procedures persons with different types			cation s for es of		
c) specific needs and know psychosocial			r	learing imp	airm	ent			
ar	nd communicative o	lemands		d) c	counsel and enhance co	d gu mmi	ide on unicatio	strateg n	ies to

Unit	Syllabus								
UNIT	Advances in Hearing Aid and Hearing Assistive Technology								
1:									
	 a) Application of recent advances in hearing aids and hearing assistive technology : Compression and expansion, directionality, advanced signal processing techniques including noise reduction algorithms, wireless technology, data logging, trainable hearing aids, occlusion reduction, application of nanotechnology in hearing aids, Personal amplification systems 								
	 b) Techniques to control acoustic feedback, distortion, circuit noise: Electromagnetic interference – measurement, solutions; techniques to improve compatibility of hearing aids with mobile phones 								
	c) Application of LASER technology in ear mold production, ear mold modifications for enhancing listening comfort – physical and acoustic modifications								
	d) Electroacoustic measurement of hearing aids : Variables affecting electroacoustic measurements and its implications								
	e) International and Indian standards/legislations for hearing aids and ALDs.								

UNIT	Selection and Fitting of Hearing Aid and Hearing Assistive Devices								
II:	a) Selection, verification and validation of hearing aids and hearing assistive devices:								
	Pre-selection, selection an assessment of listening needs								
	b) Objective procedures for hearing aid fitting (ABR, ALLR, ASSR and others):								
	c) Hearing aid programming, optimization, verification and validation								
	d) Hearing aid fitting for children : pre-selection, selection, verification and validation:								
	e) Hearing aid fitting for persons with different types of hearing loss (Sudden hearing loss unilateral hearing loss High frequency hearing loss Cochlear dead region)								
	 f) Future trends in hearing aids and HATs: Technology and fitting strategies 								
	Speech Percention through Hearing Aids								
	a) Easters offecting encode percention through bearing aids and bearing devices:								
	Auditer relaction to perception through healing alds and healing devices.								
	Auditory plasticity								
	b) Methods to improve speech perception through hearing aids and hearing devices:								
	Speech cue enhancement – spectral shape, duration, intensity, enhancement of								
	CVR, speech simplification, re-synthesis, enhancement of perception of telephone								
	speech								
	c) Emerging technology for better speech perception								
	d) Noise reduction algorithms and nanotechnology in hearing aids								
	Del el l'étation et le l'action estit. Le sele entre le mainte d'une et le sele								
UNIT	Renabilitation of Individuals with Hearing Impairment								
IV:	a) Counseling of users of hearing aid and hearing assistive devices: techniques:								
	Realistic expectations, adjusting to hearing device, other management options								
	b) Care and maintenance of hearing aid and hearing assistive devices								
	c) I rouble shooting and fine tuning/optimization of hearing aids and assistive devices								
	u) Management of children with heating impairment. Chieffa for selecting unerent								
	additory listening programs, chiena for transition from one method to the other as a shild grower. Adapting AV/T techniques for Indian languages and late identified								
	children and team approach								
	 Providing aroun listening training activities for children having different listening skills 								
	f) Rebabilitation of adults and older adults: auditory listening / speech reading training								
	for older adults variables that affect the communication and the role of the								
	communication partner: auditory plasticity: Planning training activities: assertiveness								
	training								
	g) Quality of life of hearing impaired and its enhancement: Outcomes of different								
	management strategies across age groups: Methods and measures								
UNIT	Management of the children/adult with Multiple Disabilities and other Hearing								
V :	Related Disorders								
	a) Management of children and adults with multiply disability: hearing aid fitting								
	considerations, strategies used and the outcome with different strategies for								
	individuals with hearing impairment with visual problems; cognitive problems; neuro-								
	motor problems: educational and vocational placement, role of caregivers and								
	outcome measures								
	b) Audiological management of tinnitus: characteristics, assessment of tinnitus, basis								
	and theories of tinnitus, models related to tinnitus management: patho-physiological								
	and neurophysiological model: overview to non-audiological management								
	techniques for tinnitus								
	c) Audiological management techniques for those with normal hearing and different								
	degrees of hearing loss (IRI, counselling, others) and their outcomes								
	a) Audiological management of persons with hyperacusis: Models related to								
	nyperacusis management; overview to non-audiological management techniques for								
	nyperacusis								
	Audiological management techniques for normal hearing and different degrees of								
	nearing loss and their outcomes								

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- Baguley, D. M., & Andersson, G. (2007). Hyperacusis: Mechanisms, Diagnosis and Therapies. San Diego: Plural Publishing Inc.
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- Jastreboff, P.J., & Hazell, J.W.P. (2004). Tinnitus retraining therapy-implementing the Neurophysiological model. United Kingdom: Cambridge University Press.
- Johnson, C. E. (2012). Introduction to auditory rehabilitation: A contemporary issues approach. New Jersy: Pearson Education, Inc.
- Wong, L., & Hickson, L. (2012). Evidence-based practice in audiology: Evalauting interventions for children and adults with hearing impairment. San Diego: Plural Publishing Inc.

Course title: Genetics of Hearing & Pediatric Audiology

Marks - 100

Course Number	Course Code	Course category	Course Title			Lecture (L)	Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks
12	POA18CT205	Core Theory CT8	Genetics of Hearing & Paediatric Audiology			4	-	-	4	60/ 100
	Learning C	Objectives	S			Learni	ng ou	tcomes		
The kno a) b) c)	objective of the cour wledge on genetic basis for he various tests/proced genes for hearing lo counseling strategie	rse is to p aring loss ures for ic ss s for gene	lentifying	 After completing this course, the student will be able to a) discuss the implication of identifying gene mutation for hearing loss c) counsel parents or caregivers of children on multiplication for hearing for an and statements of comparents of comparents						
d)	genetic hearing loss planning and execution of screening			d) carry out screening programs to do primary					rimary	
e)	appropriate protocols, and Evaluation and management of hearing loss in children using appropriate tests/protocols			e) Introd for di	duc	ce pediat nosis and	ric mo d man	dificatior	of pro	otocols

Unit	Syllabus
UNIT	Molecular Genetics for Audiologists
l:	a) Basic concepts of genetics
	b) Genes involved in hearing
	c) Gene localization methods, gene mapping
UNIT	Genetic hearing loss
II:	 a) Genetics of hearing impairment, gene database for hearing loss b) Genetic evaluation of persons/families with hearing loss, genetic screening c) Genotypes and phenotypes of non syndromic hearing loss d) Genotypes and phenotypes of syndromic hearing loss e) Genetic Counselling

UNIT	Hearing Screening
III:	a) Neonatal and infant hearing screening, international and national Protocols to identify
	middle ear disorders; sensory and neural hearing loss
	b) Screening for hearing loss in school children
	c) Screening for central auditory processing disorders in school children
	d) Issues related to hearing screening
UNIT	Pediatric Hearing Evaluation
IV:	a) Etiology of hearing loss in children
	b) Behavioral tests of hearing evaluation for children
	c) Physiological tests of hearing evaluation for children
	 Assessing hearing in children with associated problems
	e) Speech audiometry in children
	f) Development of tests for speech audiometry in children
	g) Issues related to assessment and diagnosis of hearing loss in children
UNIT	Team Approach in diagnosis of hearing loss in children
V:	a) Integration of results of behavioral and electrophysiological assessment of hearing
	b) Correlating results of audiological evaluation with those of otolaryngological,
	pediatric, psychological and speech-language evaluation
	c) Problems faced by children with different types and degrees of hearing loss including
	APD in preschool and school setup
	d) e) Counseling parents/caregivers regarding hearing impairment, sequel and
	management
	f) Counseling and management of children with unilateral hearing loss, ANSD and mild
	hearing loss

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- Tharpe, A.M. & Seewald, R. (2016). Comprehensive Handbook of Pediatric Audiology. San Diego: Plural Publishing Inc
- o Madell, Jane. R, Flexer, C. (2014). Pediatric audiology: Diagnosis, Technology and Management
- Fitzpatrick, E.M, Doucet, S.P. (2013). Pediatric Audiologic rehabilitation from infancy to adolescence

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- Martini, A, et al.(1996) Genetics and Hearing impairment, London: Whurr Publishers.
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- Willems P J. (2004). Genetic Hearing loss. USA: Marcel Deckeer Inc.
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Course Title: Clinicals in Audiology -2

Marks: 100

Course Number	Course Code	Course category	Course Title	Lecture (L)	Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks
13	POA18CR206	Clinical Rotation CR2	Clinicals in Audiology -2	-	5		5	225/ 100

Course Title: Research Seminar - 2

Marks:100

Course Number	Course Code	Course category	Course Title		Lecture (L)	Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks
14	POA18RP207	Research Project RP2	Research Seminar- 2		-	-	2	2	60/ 100
	Learnir	ng objectives		L	earni	ng ou	tcomes		
The objectives of the course in conjunction with the course on research methods, epidemiology			At the end of the course the student will be able						
 a) become familiar with components of a research proposal b) understand details of scientific writing 			 a) write a res format b) submit res approval 	earch	propo	osal in th	e preso e IEC	for	

Course Plan

- 1. Develop a hypothesis or a research question in an identified area of research
- 2. Write a research proposal and submit to your advisor
- 3. Make a presentation of the research proposal in the department
- 4. Submit the research proposal with necessary documentation to the Institutional Ethics Committee for approval; obtain approval from the IEC.

The above course plan will be transacted by students individually with their research advisors. The internal assessment for the course will be conducted by the advisor based on the written research proposal, presentation of the research proposal and submission to the IEC.

Semester III

Content

Course title: Implant Audiology

Marks – 100

Course Number	Course Code	Course category	Course	Lecture (L)	Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks	
15	POA18CT301	Core Theory	Implant Audi	4	-	-	4	60/	
		CT9						100	
Learning Objectives					Learni	ng out	comes		
The	objective of the cour	se is to pr	ovide	At the end of the course, the student should be					
kno	wledge on	-		able to					
	 knowledge on a) Various types and components of implantable hearing devices b) Candidacy for implantable hearing devices c) Audiological Procedures for measuring benefits d) Relevant Government policies and schemes 				and able hear the nents of ne can devices, benefits and gui ute to fo and able hear	discus ing de purpo didacy from de the sche ing de	es the vices, ose o mplantal for implanta e clinica clinica clinica vices	type f dif ole h impla able h I popu Goveri relating	s of fferent earing ntable earing lation, nment g to

Unit	Syllabus
UNIT	Development of Technology, Criteria/ Candidacy and Program
l:	 a) Candidacy for bone conduction implantable devices (BCID), middle ear implants (MEI), cochlear implant (CI), auditory brainstem implant (ABI) and mid brain implant (MBI): evidence from research b) Comprehensive Candidacy Assessment for implantable hearing devices (IHD - Audiological and non-audiological). c) Safety standards and regulation for IHD. d) State and central Government schemes for cochlear implants and other implantable devices. e) Pre-requisite to start a IHD program f) Comprehensive policy issues relating to IHD
	 b) Completensive Candidacy Assessment for implantable hearing devices (in Audiological and non-audiological). c) Safety standards and regulation for IHD. d) State and central Government schemes for cochlear implants and other implant devices. e) Pre-requisite to start a IHD program f) Comprehensive policy issues relating to IHD

 II: a) Types of BCID and components (per-cutaneous, trans-cutaneous and intra-oral) b) Types of MEI and components c) Intra-operative and post-operative measurements/assessment for device function (troubleshooting) and performance outcomes d) Programming BCID and MEI e) Contra indications and management of device failures and poor performance. f) Limitations and future development/requirement UNIT III: a) Concepts and types of CI: external components (sound processor- body worn, BTE, off the ear); internal component (electrode type/design, MRI compatibility & reliability); totally implantable cochlear implants. b) Expanding criteria- audiological and non-audiological assessment: single sided deafness, ski sloping SN hearing loss, bilateral asymmetric HL; cochlea/nerve anomaly (classification), auditory neuropathy spectrum disorder (ANSD) and multiple disabilities. 	n
 b) Types of MEI and components c) Intra-operative and post-operative measurements/assessment for device function (troubleshooting) and performance outcomes d) Programming BCID and MEI e) Contra indications and management of device failures and poor performance. f) Limitations and future development/requirement UNIT III: a) Cochlear Implants a) Concepts and types of CI: external components (sound processor- body worn, BTE, off the ear); internal component (electrode type/design, MRI compatibility & reliability); totally implantable cochlear implants. b) Expanding criteria- audiological and non-audiological assessment: single sided deafness, ski sloping SN hearing loss, bilateral asymmetric HL; cochlea/nerve anomaly (classification), auditory neuropathy spectrum disorder (ANSD) and multiple disabilities. 	n
 c) Intra-operative and post-operative measurements/assessment for device function (troubleshooting) and performance outcomes d) Programming BCID and MEI e) Contra indications and management of device failures and poor performance. f) Limitations and future development/requirement UNIT Cochlear Implants a) Concepts and types of CI: external components (sound processor- body worn, BTE, off the ear); internal component (electrode type/design, MRI compatibility & reliability); totally implantable cochlear implants. b) Expanding criteria- audiological and non-audiological assessment: single sided deafness, ski sloping SN hearing loss, bilateral asymmetric HL; cochlea/nerve anomaly (classification), auditory neuropathy spectrum disorder (ANSD) and multiple disabilities. 	n l
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 d) Programming BCID and MEI e) Contra indications and management of device failures and poor performance. f) Limitations and future development/requirement UNIT III: a) Cochlear Implants a) Concepts and types of CI: external components (sound processor- body worn, BTE, off the ear); internal component (electrode type/design, MRI compatibility & reliability); totally implantable cochlear implants. b) Expanding criteria- audiological and non-audiological assessment: single sided deafness, ski sloping SN hearing loss, bilateral asymmetric HL; cochlea/nerve anomaly (classification), auditory neuropathy spectrum disorder (ANSD) and multiple disabilities. 	
 e) Contra indications and management of device failures and poor performance. f) Limitations and future development/requirement UNIT III: a) Concepts and types of CI: external components (sound processor- body worn, BTE, off the ear); internal component (electrode type/design, MRI compatibility & reliability); totally implantable cochlear implants. b) Expanding criteria- audiological and non-audiological assessment: single sided deafness, ski sloping SN hearing loss, bilateral asymmetric HL; cochlea/nerve anomaly (classification), auditory neuropathy spectrum disorder (ANSD) and multiple disabilities. 	
 f) Limitations and future development/requirement III: a) Concepts and types of CI: external components (sound processor- body worn, BTE, off the ear); internal component (electrode type/design, MRI compatibility & reliability); totally implantable cochlear implants. b) Expanding criteria- audiological and non-audiological assessment: single sided deafness, ski sloping SN hearing loss, bilateral asymmetric HL; cochlea/nerve anomaly (classification), auditory neuropathy spectrum disorder (ANSD) and multiple disabilities. 	
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anomaly (classification), auditory neuropathy spectrum disorder (ANSD) and multiple disabilities.	
disabilities.	2
	,
c) Speech/Sound Coding Strategies: Within and across devices: Evidences from	
c) Speech/Sound County Strategies. Within and across devices, Evidences from	
Music percention	
Music perception.	
d) Surgical procedures: posterior tympanotomy, varia technique, nearing preservation	
technique; surgical complications and management	
e) Intra-operative measurement: device function (Impedance/ voltage/ complaince	
telemetry); patient function (eCAP, eSR1, eABR and facial nerve monitoring);	
Special consideration in anomalous cochlear/nerve, ANSD and multiple disabilities.	
UNIT Programming Cochlear Implants	
IV: a) Psychophysics of programming a: parameters (pulse width, rate of stimulation	Ι,
frequency allocation/ re-allocation, map law);pre-requisites for mapping: pre-implai	nt
radiological report, post-implant radiological report; discharge report of surgeon; nor	1-
physiological objective measures (electrode impedance, compliance, electrod	э
voltage); special considerations in cochlea/nerve anomaly, ANSD, multipl	е
disabilities and SSD; Effect of map parameters on perception of loudness, pitc	h
perception, gap,	
 b) Programming technique: evidences from research: behavioral maps; objective map 	s
(eCAP, eSRT & eABR based programming); evidence and target base	d
programming (artificial intelligence); self-programming.	
c) Measuring performance and MAP optimization: assessment of benefit: speech an	d
non-speech; electrophysiological measures (EABR and other evoked potentials);
optimization of: hearing aid in the contralateral ear for bimodal implants; bilatera	al I
cochlear implants; electroacoustic stimulation and SSD.	
d) Complications: identifying and managing device failures; identifying and managin	g
infection, magnet migration, electrode extrusion; identifying and managing poor	r
performance; decision making in subjects with poor performance; specia	al
consideration in revision implantation; outcome audit.	
e) Limitations and future developments/requirements (device, techniques an	b
procedures)	
UNIT ABI and MBI	
V: a) Pre-op (ABI and MBI): candidacy for children and adult; audiological and nor	1-
audiological assessment; evidences from research for predicting outcome);
counseling and expectations; device type and components	
b) Intra-op (ABI and MBI): Surgical procedures – overview: eABR. eCAP: cranial nerv	e
monitoring: decision making.	
c) Post-op; programming ABI (subjective and objective methods) and technique for	r
pitch ranking, identifying auditory and non-auditory electrodes). MAP optimization	· 1
(pitch, loudness, auditory and non-auditory sensation): techniques to identify auditor	n I
and non-auditory sensation; assessment of benefit : speech and non-speech; role of	n v

eABR, aided cortical potentials, PET and fNIRS in programming and monitoring outcomes.

 d) Managing and monitoring subject with ABI: rehabilitation strategy; identifying and managing complications (device failure, infection, trauma, device migration, radio imaging); identify poor performance- auditing outcome; decision making in complications and poor performance

Recommended Reading

- Kompis, M., & Caversaccio, M.D. (Eds.). (2011). Implantable Bone Conduction Hearing Aids. (New Delhi) Switzerland: Karger.
- Lim, H. H., Lenarz, M., & Lenarz, T., (2009). Auditory midbrain implant: A review. Trends in Amplification, Sept. 13(3), 149–180.
- Niparko, J. K. (2009). Cochlear Implants: Principles and practices. 2nd Edn. Philadelphia: Lippincott: Williams & Wilkins

- Boheim, K. (2010). Active middle ear implants. Basel: Karger.
- Clark, G., (2003). Cochlear implants fundamentals & Applications. New York: Springer AIP Press.
- Cooper, H. (1995). Cochlear Implants A practical guide. Delhi: AITBS Publishers.
- Hughes, M. L. (2013). Objective measures in cochlear implants. San Diego: Plural Publishing Inc.
- Kirwin, S.H. (2014). Cochlear Implants: Technological advances, psychological/social impacts and long-term effectiveness. Ney York: Nova Biomedical.
- Manenkar, G. (2014). Implantable hearing devices other than cochlear implants. New D Suzuki, J.I, Tokyo (1988). Advances in audiology-Middle ear implant: Implantable hearing aids. Switzerland: Karger. Delhi: Springer-Verlag.
- Wolfe, J., & Schafer, E. C. (2010). Programming Cochlear Implants. San Diego: Plural Publishing Inc.

Course Title: Speech Perception

Marks – 100

Course Number	Course Code	Course category	Course Title			Clinical Training (CT)	Research Project (RP)/ Dissertation		Total Credits	Total Hours/Marks	
16	POA18CT302	Core Theory CT10	Speech Perce	4	-	-		4	60/ 100		
Learning Objectives					Lea	rning	outcom	es			
The objective of the course is to provide				At the end of the course, the student should be able							
knowledge on				to							
ab	 Speech coding i auditory pathway theories of spee 	n different y ch percep	t levels of	 a) discuss coding of speech in the auditory pathway in normal hearing and hearing impaired individuals 							
С	methods for spe) effect of short te perception	ech synth rm memo	esis ry on speech	b) critically ev and methods to	, /aluate o synt	e theoເ hesis ເ	ries of sp speech,	beech	percep	otion	
d) dichotic speech	c) apply the differences in the vowel and consonant perception in individual with normal hearing and						onant			
				hearing impairment, d) discuss various factors affecting speech perception.							

Unit	Syllabus									
UNIT	Theories of Speech Perception									
1:	 Basic concepts of speech perception; hearing, listening, perception and comprehension; acoustic cues of different classes of speech sounds 									
	b) Definition and concept of categorical and continuous speech perception									
	b) Normalization in speech perception: Definition and methods used for normalization of vowels and consonants									
	 c) Coding of speech in the auditory pathway - cochlea, auditory nerve and the central auditory pathway 									
	d) Theories of speech perception (acoustic, neurological, auditory, motor, analysis-by- synthesis, dual stream, reverse hierarchy theory)									

UNIT	Perceptual Cues for Vowels and Consonants									
II:										
	a) Perception of vowels and diphthongs in normal hearing listeners - major and minor									
	cues									
	b) Perception of consonants in normal hearing listeners : Major and minor cues to									
	identify place, manner and voicing features of stops, fricatives, affricates, nasals									
	c) Perception of vowels and consonants in the persons with hearing impairment									
	d) Perception of vowels and consonants through amplification and implantable devices.									
UNIT	Speech Perception of Segmental and Suprasegmental Features									
III:										
	a) Effects of co-articulation on speech perception									
	 Perception of segmental features in normal hearing individuals 									
	c) Perception of suprasegmental cues in normal hearing individuals									
	d) Perception of segmental and suprasegmental cues in persons with hearing	J								
	Impairment Exectors related to Speech Perception									
11:	a) Memory and speech perception: Stages of memory coding and capacity at the	2								
	different stages: Models of short term memory: Dual coding Model. Modal model.	Á								
	model for auditory memory and contrast, Working memory model; Role of short tern	ı								
	memory in the perception of consonants and vowels									
	b) Dichotic listening: Theories and physiological bases: Testing of dichotic listening and	ł								
	the clinical significance of the results; Factors influencing dichotic perception									
	 Music perception: Methods of study of perception of music; Perception of music through emplification and implementable devices 	;								
UNIT	General issues related to speech perception									
V:	a) later the second second state of the test second									
	a) Infant perception: theories of infant speech perception (universal theory	;								
	magnetic theory); methods of studying infant speech perception; perception of	l f								
	consonants and vowels in infants and comparison with adults	1								
	b) Speech perception in animals: methods of study of speech perception in animals	:								
	perception of consonants and vowels; categorical perception and normalization	;								
	animal vs. human perception; need for study of speech perception in animals									
	c) Methods to study speech perception: EEG/electrophysiological and behaviora	I								
	methods to study speech perception; study designs; role of cognition in speech	۱								
	perception.									

- Raphael, L. J., Borden, G. J., & Harris K. S. (2011). Speech Science Primer: Physiology, Acoustics, and Perception of Speech (Sixth edition). Baltimore, MD: LWW.
- Pisoni, D. B., &Remez, R. E. (Eds.). (2005). The Handbook of Speech Perception. Blackwell Publishing Ltd
- Pickett, J. M. (1998). The Acoustics of Speech Communication: Fundamentals, Speech Perception Theory, and Technology (1 edition). Boston: Pearson
- Niparko, J. K. (2009). Cochlear Implants: Principles and practices. 2nd Edn. Philadelphia: Lippincott: Williams & Wilkins

- Greenberg, S., Ainsworth, W. A., & Fay, R. R. (Eds.).(2004). Speech Processing in the Auditory System. New York: Springer.
- Mildner, V. (2007). The Cognitive Neuroscience of Human Communication (1 edition). New York: Psychology Press.
- Studdert-Kennedy, M., & Mattingly, I. G. (Eds.). (1990). Modularity and the Motor theory of Speech Perception: Proceedings of A Conference To Honor Alvin M. Liberman (1 edition). Hillsdale, N.J: Psychology Press.
- Tatham, M., & Morton, K. (2011). A Guide to Speech Production and Perception (1 edition). Edinburgh: Edinburgh University Press

Course title: Auditory Processing Disorders

Marks - 100

Course Number	Course Code	Course category	Course Title			Lecture (L)	Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks
17	POA18CT303	Core Theory CT11	Auditory Processing Disorders			4	-	-	4	60/ 100
	Learning C	Objectives	5		L	.earni	ng ou	tcomes		
The c know	bbjective of the cou ledge on:	rse is to p	rovide	At 1	he end of th to	ne col	urse th	e studen	t will b	e able
a	 Physiological ba processing disord differentiate it from the processing disord 	ises of au rders (API om other o	ditory D's) and to disorders	 a) diagnose and differentially diagnose auditory processing disorders (APDs) and explain their physiological bases, 						
c d	findings Factors affecting Aids and appliar	assessm nces in ma	nent of APD anagement of	b)	administer interpret th with finding	differ e find gs fror	ent tes ings in n imag	ts for dia cluding jing and	agnosi: correla cognit	s and ition ive
e	APD) Team work in m	c)	studies, advise clin APDS inclu appliances	ical cl uding , and	ientele guidar	on man nce on ai	ageme ds and	ent of		
					advise and manageme neurosurge manageme	l liaise ent tea eons c ent of	e with r am like on the APDs.	nembers neurolo diagnosi	s of the gists, s as w	ell as

Unit	Syllabus
UNIT	Introduction to Auditory Processing Disorders (APDs)
l:	
	a) Terminologies and definitions of APD
	b) Underlying neurobiological and neuro-chemical (genetic) correlates
	c) Relationship between neural maturation - degeneration and auditory processing
	d) Models to explain auditory and spoken language processing: Relationship between
	the two
	 a) Methods of studying auditory processing - Animal studies a) Various disorders that load to ADDs (Sundramos, TPL state); Signs, sumptoms and
	elassification
	f) Developmental communication disorders and APDs
	Accessment of ABDs (Debewierel)
	Assessment of APDs (Benavioral)
11:	a) Overview of Defiavioral assessment in APDs
	c) Dichotic test (linguistic and non-linguistic)
	d) Monaural tests (linguistic and non-linguistic)
	e) Psychoacoustic tests for assessment of APDs
	f) Development of APD test materials (linguistic and non-linguistic)
UNIT	Assessment of APDs (Electrophysiological)
III:	
	a) Electrophysiological measures and their clinical applications in diagnosing APDs
	i. Endogenous potentials
	ii. Exogenous potentials
	b) Correlation between behavioral and electrophysiological measures: implications for
	diagnosis
	c) Factors influencing assessment of APDs: behavioral and electrophysiological
UNIT	Management of APDs
IV:	a) Management of APDs in children and adults
	b) Direct remediation techniques and meta-cognitive and meta-linguistic approaches
	c) Auditory perceptual training and its methods, applicability and outcome.
	 a) Evidence based approach and treatment enicacy b) Multidisciplingry approach
	f) Signal enhancement and room acoustics
	a) Aids and appliances - indication and outcome
	h) Eactors affecting management of APDs
LINIT	Interdisciplinary approach in the diagnosis and management of APDs
	interdisciplinary approach in the diagnosis and management of APDS
v:	a) Electrophysiological and radiological correlates for APDs: implications in
	management
	b) Imaging and cognitive studies in APDs
	c) Diagnosis and differential diagnosis
	d) Open source software for developing diagnostic tests and intervention modules
	e) Role of Team members in diagnosis and management

- Katz J., Chasin M., & English, K. (2014). Handbook of Clinical Audiology. 7th Edn. Philadelphia: Lippincott, Williams & Wilkins.
- Musiek, F. E., & Chermak, G. D. (2014). Handbook Of Central Auditory Processing Disorder: Auditory Neuroscience And Diagnosis. 2nd Edn, Vol: 1. San Diego: Plural Publishing Group Inc.
- Chermak, G. D., & Musiek, F. E. (2006). Handbook of (Central) Auditory Processing Disorders Comprehensive Intervention. Vol. II. San Diego: Singular Publishing Group Inc.

- Chermak, G. D., & Musiek, F. E. (2002). Auditory Training: Principles and Approaches for Remediating and Managing Auditory Processing Disorders. Seminars In Hearing, 23(4), 297-308.
- Musiek, F. E., Baran, J. A., Shinn, J. B., & Jones, R. O. (2012). Disorders of the Auditory System. San Diego: Plural Publishing Inc.
- Jacobson, G.P & Shepherd, N.T. (2006). Handbook of (central) auditory processing disorders-Comprehensive intervention.

Other suggested reading

- American Speech-Language-Hearing Association. (2005). (Central) auditory processing disorder (technical report) Retrieved from http://www.asha.org/ members/desref-journals/deskref/ default..
- Geffner, D., & Ross-Swain, D. (2013). Auditory Processing Disorders: Assessment, Management, and Treatment. 2nd Edn. San Diego, Plural Publishing Inc.

Course title: Vestibular Systems and its Disorders

Marks – 100

Course Number	Course Code	Course category	Course Title			Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks		
18	POA18CT304	Core Theory CT12	Vestibular sys Disorders	4	-	-	4	60/ 100			
	Learning C	Objectives	5	Learning outcomes							
The	objective of the cour	rse is to p	rovide	After completing this course, the student should							
	 a) Anatomy and ph system b) Characteristics of c) Evaluation of ve d) Management op vestibular disord 	 a) discuss the vestibular s b) explain the system c) assess ves tests/proto d) recommen option for p dysfunction e) counsel an 	e func syster disor stibula cols d app persor n d guic vestib	tioning n ders o ropriat ns with de the o ular dis	of the b f the ves em using re manag vestibul clinical c sorders	alance stibular appro gemen lar	e and opriate t e with				

Unit	Syllabus
UNIT	Anatomy and Physiology of the Vestibular System)
1:	a) Peripheral vestibular system including semicircular canals, utricle, saccule and
	vestibular nerve
	b) Central vestibular pathway (brainstem, cerebellum, cortex)
	c) Reflexes involving vestibular system like vestibulo-ocular reflex, vestibulo spinal
	reflex and vestibulo- colic reflex
	u) Other systems involved in maintenance of balance like prophoceptive system, visual
LINIT	Assessment of the Vestibular System
	Assessment of the vestibular bystem
	a) Techniques and Principles of electronystagmography / videonystagmography
	Rotatory chair test. Video Head Impulse test. Sclera Coil search test. Vestibular
	Evoked Myogenic Potentials: cVEMP. oVEMP. Dynamic Posturography.
	Craniocorpography, Subjective visual vertical horizontal tests, Vestibular autorotation
	tests
	b) Screening for vestibular disorders
	 c) Questionnaires to assess quality of life in persons with vertigo
UNIT	Pathophysiology of Vestibular Disorders
III:	a) Peripheral Vestibular Disorders like Benign paroxysmal positional vertigo, Meniere's
	disease, Vestibular neuritis, Labyrinthitis, Ototoxicity, vestibular neuropathy
	b) Perilymph fistula, Superior semicircular canal dehiscence, Auditory neuropathy
	spectrum disorders, Vestibular schwannomas
	c) Central Vestibular disorders like Generalized neuropathy involving multiple systems,
	Multiple sclerosis, Cranial tumors, Cerebro-vascular accidents involving vestibular
	contex and cerebellum, venebro-basilar insufficiency, Migraine, Meningitis and
	d) Vestibular disorders in children
	 Age related changes in vestibular system
UNIT	Profiling Vestibular Disorders using Audio Vestibular Test Battery
	a) Benjan paroxysmal positional vertigo Menjere's disease Vestibular neuritis
1.	Labyrinthitis. Ototoxicity. Perilymph fistula. Superior semicircular canal dehiscence.
	Auditory neuropathy spectrum disorders, Vestibular schwannomas, Multiple
	sclerosis, Cranial tumors, , vestibular neuropathy
	b) Quality of life in persons with vestibular disorders
UNIT	Management of Persons with Vestibular Disorders
V:	
	a) Medical management
	b) Surgical management
	c) Vestibular rehabilitation:
	I. Repositioning Maneuvers
	II. Adaptation Exercises
	$\prod_{i \in \mathcal{I}} \prod_{i \in \mathcal{I}} \prod_{$
	d) Special considerations for rehabilitation of children with vestibular problems
	e) Vestibular implants

- Biswas, A. (2009). Clinical audio-vestibulometry for otologists and neurologists. 4th Ed. Mumbai, India: Bhalani Publishing House.
- Jacobson, G. P., & Shepard, N. T. (2014). Balance function assessment and management. San Diego: CA: Plural Publishing Inc.

Other suggested reading

- Ackley, R. S., Decker, T. N., & Limb, C. J. (2007). An essential guide to hearing and balance disorders. New Jersey: Lawrence Erlbaum Associates Inc.
- Desmond, A. L. (2004). Vestibular function: evaluation and treatment. New York: Thieme Medical Publishers Inc.
- Hughes, G. B., & Pensak, M. L. (2007). Clinical Otology. New York: Thieme Publishers, Inc.
- Jackler, R. K., & Brackmann, D. E. (2005). Neurotology. 2nd Ed. Philadelphia: Elsevier Mosby.
- Kaga, K. (2014). Vertigo and balance disorders in children. Tokyo, Japan: Springer.
- McCaslin, D. L. (2013). Electronystagmography and videonystagmography ENG / VNG. San Diego: Plural Publishing Inc.
- Murofushi, T., & Kaga, K. (2009). Vestibular evoked myogenic potential- its basics and clinical applications. Tokyo, Japan: Springer.
- Myers, B.L. (2011). Vestibular Learning Manual. San Diego: Plural Publishing Inc.
- O'Reille, R.C., Morlet,T & Kushing, S.L (2013). Manual of pediatric balance disorders. San Diego: Plural Publishing Inc.
- Ruckienstien, M & Davis, S. (2014). Rapid interpretation of balance function tests. San Diego: Plural Publishing Inc.
- Shepard, N. T., & Telian, S. A. (1997). Practical management of the balance disorders patient. New York: Thomson Delmar Learning.

Course Title: Clinicals in Audiology -3

Marks: 100

Course Number	Course Code	Course category	Course Title	Lecture (L)	Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks
19	POA18CR305	Clinical Rotation CR3	Clinicals in Audiology - 3	-	5		5	225/ 100

Note: Clinical practicum for CR-3 will be based on the sub-specialty clinics attended the students. The practicum is listed at the end of the syllabus.

Course Title: Research Practicum

Marks:100

Course Number	Course Code	Course category	Course Title			Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks
20	POA18RP306	Research Project RP3	Research Practicum			-	4	4	120/ 100
	Learnin	g Objectives	5	L	earni	ng ou	tcomes		
The the and a) b)	objectives of the course on researc statistics are to: become familiar collection and or learn about comp dissertation	At the end of th able: a) demonstrate the research individual re	e prog n stud quirer	irse the ress ir y depe ments	e studer relevar nding or of the st	nt will b nt secti n the udy.	ons of		

Course Plan

- 1. Complete the literature search related to the research question
- 2. Undertake pilot study and interim analysis if required
- 3. Begin data collection as required by the research study
- 4. Demonstrate progress in dissertation as written report and submit for evaluation

Semester IV Content

Course title: Audiology in Practice							Mark	s – 100			
Course Number	Course Code	Course category	Course Title			Lecture (L)	Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks	
21	POA18CT401	Core Theory CT13	Audiology in practice				-	-	4	60/ 100	
	Learning O	bjectives	5	Learning outcomes							
The knov	objective of the cour wledge on	se is to pr	ovide	At the end of the course, the students should be able to							
	 a) Different setup for audiology practice and team work b) Scope of practice, legal and ethical 				a) define the role of an audiologist in different set-ups.b) Liaise with other professionals in setting-up						
	issues for audiolo c) Government acts policies related to	c) d)	audit audio ups. discuss Go on the form acts relating	vernn ulatio g to h	nents a nents a n of po earing	es in exis and othe blicies ar disability	sting se r agen nd legis y	et- cies slative			
				e)	discuss the audiology.	legal	implic	ations of	f practi	ce in	

Scope of Practice, Laws, Regulations and Professional Ethics								
 Scope of Practice, Laws, Regulations and Professional Ethics a) Scope of practice in global and Indian scenario b) Professional ethics c) Existing acts, legislations, policies related to persons with communication impairment d) Role of audiologist in the formulation of acts, regulations and policies e) Implementation of acts, legislations, policies and welfare measures relating to persons with hearing impairment f) Advocacy groups, NGO's and rights of citizens g) National and international standards related to audiology 								

UNIT	Specialized Programs in Audiology									
II:	a) Need for specialized programs in audiology: Geriatric and persons with multiple									
	disability									
	D) Forensic audiology									
	d) Health, wellness, and health care - Health promotion and disease prevention, quality									
	 Disability-friendly environment including public education 									
	 f) Prevention and early identification programs including societal participation 									
UNIT	Service Delivery Models in Audiology									
III:	a) Services in different medical / rehabilitation/ research /educational set ups									
	 b) School based services pertaining to regular and special schools 									
	c) Community based practice in rural and urban areas									
	d) Family empowerment programs									
	 e) Home based delivery of services e) Automassian analysis in surficiency 									
	f) Autonomous practice in audiology									
	g) Apps for screening/assessment and management									
UNIT	Tele-practice in Audiology									
IV:	a) Information and communication technology in Audiology practice									
	b) Infrastructure for video-conferencing and tele-practice in audiology									
	 c) Lechniques/principles of remote testing for screening and diagnostic assessment for bearing intervention and counseling 									
	d) Challenges and limitations of tele-practice in audiology in screening assessment and									
	evaluation, selection of aids and appliances, therapeutics and counseling.									
UNIT	Issues in Audiology Practice									
V:	a) Entrepreneurship and planning to set up private practice/clinic for audiology practice:									
	Clinical ethics									
	management and storage									
	c) ICE framework for documentation / reports									
	d) Quality control and auditing in audiology practice									
	e) Documenting and implementing evidence based practice in audiology									
	f) Understanding team approach: Work in cohesion with other professionals									
	a) Information resources in audiology including books and journals, both electronic and									
	print - Databases									

- Taylor, B. (2015). Marketing in an Audiology practice. San Diego: CA: Plural Publishing Inc.
- Ramachandran,V & Stach, B.A. (2013). Professional Communication Audiology. San Diego: Plural Publishing Inc
- <u>www.rehabcouncil.nic.in</u> (website of Rehabilitation Council of India)
- <u>www.disabilityaffairs.gov.in</u> (website of Department of Empowerment with Disabilities
- Acts relating to disability, particularly hearing, enacted by the Indian Parliament
- Rushbrooks, E & Houston, K.T. (2015). Telepractice in Audiology. San Diego: Plural Publishing Other suggested reading
- College of Audiologists and Speech-Language Pathologists of Ontario. (2004). Use of Telepractice Approaches in Providing Services to Patients/Clients.
- Dobie, R.A (2015). Medico legal evaluation of hearing loss. San Diego: Plural Publishing Inc
- Dunn, H.H., Roeser, R.J., & Valente, M. (2000). Audiology- practice management. New York: Thieme Medical Publishers Inc.

- King, P.F. et al., (1993). Assessment of hearing disability- guidelines for medico-legal practice, London: Whurr Publishers.
- Resource Guide for Educational/Pediatric Audiologists. Retrieved from http://www.asha.org/aud/pediatric-ed
- Rizzo, S.R., & Trudean, M.D. (1994). Clinical administration in audiology and speech language pathology. San Diego: Singular Publishing Group Inc.
- Stephen, R.R., Jr., Trudeau, D.M. (Eds.) (1994). Clinical administration in audiology & speech language pathology. San Diego: Singular Publishing Group Inc.

Course title: Seminars in practices related to medical audiology

Marks :100

Course Number	Course Code	Course category	Course Title	Lecture (L)	Clinical Training (CT)	Research Project (RP)/ Dissertation	Total Credits	Total Hours/Marks
22	POA18CT402	Core Theory CT14	Seminars in practices related to Medical Audiology	4	-	-	4	60/ 100

Learning Objectives	Learning outcomes
The objective of the course is to provide knowledge on:	
	After completing this course, the student will be
a) basic competencies in hospital inpatient	able to:
procedures such as referrals and ward visits	 a) Familiarize with procedures related to inpatient protocols
 b) documentation of assessment and management 	b) Document the findings, opinion and record the outcome measures.
 c) Infection control protocols d) medical priorities needed in emergency situations 	 Follow precautions and prevent infection to patient and self

Course plan

- 1) Infection control/management caution on type of dress, washing hands and use of disinfectants
- 2) Basic life support including seizures- Prevention of seizure triggers and providing first aid
- 3) Issues related to sedation of infants- Contraindication and need; intra-venous sedation
- 4) Medical assessment of middle ear disorders and its implication
- 5) Medico-legal issues.

Course Title: Clinicals in Audiology - 4

Course Number	Course Code	Course category	Course Title	Lecture (L)	Tutorial (T)/Clinical Training (CT)	Research Project/ Dissertation	Total Credits	Total Hours/Marks
23	POA18CR403	Clinical Rotation CR4	Clinicals in Audiology - 4	-	5		5	225/ 50

Criteria for clinicals CR 1 and CR 2

- a) The student should be able to carry out complete audiological evaluation and management of persons with hearing impairment.
- b) After completion of clinical postings, the student will have the ability to apply, show (in a clinical diary/log book), and perform the following on patients/clients:

Know-how

- a) Make appropriate changes in OAE protocols depending on the clinical / research needs
- b) Develop protocol for recording exogenous and endogenous auditory evoked potentials

c) Integrate the results of audiological evaluation and correlate it to the possible pathophysiological/radiological findings

- d) Apply the latest technological advances available for persons with hearing impairment.
- e) Make appropriate modifications in hearing devices depending on the listening needs.
- f) Recommend appropriate aural rehabilitation program for persons with hearing impairment

Demonstrate

- a) Recording of exogenous and endogenous potentials
- b) Generation of stimuli for recording AEPs
- c) Analyze auditory evoked potential waveforms
- d) Electroacoustic measurement of different types of hearing aids
- e) Carry out ear mold modifications

Do

- a) Record OAEs, ABR for different stimuli and cortical auditory potentials on 5 persons with hearing loss
- b) Complete audiological evaluation on 5 persons with hearing loss and prepare a detailed report with appropriate recommendations
- c) Select and fit appropriate hearing devices to 10 individuals with different degree, configuration and type of hearing loss.
- d) Plan and carry out appropriate aural rehabilitation program for five children
- e) Evaluate and counsel/carry out appropriate audiological management for 5 persons with tinnitus.
- f) Carry out aided AEPs

Clinicals for CR3 and CR 4

Know-how

- a) Identify, manage and counsel persons with genetic hearing loss
- b) Choose/modify appropriate tests/protocols for evaluating children and multiply disabled
- c) Choose appropriate tests/protocols for evaluation and management of persons with giddiness
- d) Develop language / culture sensitive APD tests
- e) Advise clinical clientele on the latest implantable devices available for persons with hearing impairment.
- f) Set up audiology clinics / centers in different set ups
- g) Procedure for certification of persons with disability
- h) Financial planning and insurance policies

Demonstrate

- a) Administration of different tests for APD
- b) Plan management for 5 persons with APD/at risk for APD
- c) Administration of different tests for vestibular assessment
- d) Troubleshoot cochlear implants

Do

- Administer complete audiological test battery, behavioural and electrophysiological tests on 10 children with hearing loss and prepare a report explaining the results of the test and make appropriate recommendations
- b) Administer APD test battery on 5 persons with APD symptoms and prepare a report
- c) Administer complete vestibular test battery on 5 persons with giddiness
- d) Carry out preimplant counselling for 5 persons with hearing loss
- e) Carry out mapping for 5 persons using cochlear implants
- f) Counsel 5 persons regarding use and maintenance of cochlear implants

Course title: Dissertation

Course Number	Course Code	Course Title		L	Т	Р	С	Total Hours
24	POA18RP404	Dissertation		-	-	8	8	240
		L	.earning	outcon	nes			
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Course Plan

- 1. Complete the data collection,
- 2. Data analysis and interpretation
- 3. Complete writing the dissertation in the prescribed format.
- 4. Make a presentation in the department
- 5. Prepare manuscript for publication and submit for approval of the publication oversight committee