

Communication During Tests and Procedures

Providers

- Be sure the patient completes a CAP to be included in the EMR or paper chart.
- Be sure all staff is aware of patient's hearing status and how best to communicate with the patient.
- Add universal "hearing loss" symbol to patient's wristband or use a separate band to indicate patient's hearing status.
- Allow hearing aids and cochlear implants to be worn until tests or procedures begin, unless medically unsafe. When removed, place devices in a container with patient's name.
- Before proceeding with tests or procedures, provide patient with step-by-step explanations and instructions in writing.
- Discuss with patient any possible ototoxic effects of anesthesia or other medications.
- Answer all questions before putting on surgical mask.

Radiology

X-ray / CT Scan / MRI

Communication can be particularly challenging since the technician typically does not remain in the room when X-rays, scans, or MRIs are in progress.

- Arrange for additional staff person to be available during tests to facilitate communication with the patient. For example: Tap the patient's shoulder once to hold breath, twice to resume normal breathing, or turn lights on and off for visual cues.
- Patients who use cochlear implants may not be able to undergo an MRI. Confirm with patient and health care team before proceeding.
- For MRIs, provide patients with earplugs or protective headsets, preferably both.

Surgical Procedures

Due to anxiety, fatigue, and effects of pre-surgical medication, the ability to understand and retain information may be further compromised for hard of hearing and deaf patients.

- Prepare patient by providing all instructions verbally and in writing before surgery.
- Have a dry erase board or tablet readily available for communication.
- Answer all questions before putting on surgical mask.
- Once the patient is determined to be medically stable in the recovery room, allow patient to use hearing aids and cochlear implants.

Discharge and Follow-up

It is essential to allow sufficient time for discussion, questions, and clarification. It is also important to:

- Provide discharge plans in writing.
- Use teach-back to confirm patient's understanding.
- Provide patient with contact information for follow-up questions. Refer to the CAP to determine how communication will occur, i.e., email, patient portal, or captioned phone.

2024