

Professional Ethics in Audiology: Guidelines and Best Practices

Mohammad Hossein Nilforoush  , Mahsa Sepehrnejad  

Letter to Editor

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Introduction

Professional ethics in audiology is not merely a collection of theoretical principles or regulatory provisions; rather, it constitutes the cornerstone of public trust, the quality of clinical services, and the professional legitimacy of the field within the healthcare system. Nevertheless, empirical evidence indicates a significant gap between professional ethics education and the actual realities of clinical practice in audiology—a disparity that, if left unaddressed, may result in severe professional and social ramifications (1, 2).

According to the existing literature, clinical decision-making in audiology must be predicated upon the four fundamental principles of biomedical ethics: beneficence, non-maleficence, respect for patient autonomy, and justice. These principles become increasingly paramount when advanced technologies, high-cost interventions, and the commercial hearing-aid market intersect with the therapeutic process; in such contexts, the boundary between the patient's clinical best interests and economic or organizational considerations can easily blur (3).

A systematic review of the literature indicates that a substantial portion of ethics research in audiology is predominantly descriptive, frequently overlooking real-world clinical scenarios, conflicts of interest, commercial pressures, and the lived experiences of practicing audiologists. This research gap ensures that many ethical challenges, rather than being subject to

critical analysis and structural reform, are instead internalized as unwritten norms within professional practice (1, 2).

One of the most contentious areas is the relationship between audiologists and the hearing aid industry. Evidence suggests that while such interactions can provide opportunities for education and technological advancement, they may—in the absence of transparent ethical frameworks and effective oversight—degenerate into sources of conflict of interest and undue pressure on clinical decision-making (4).

Established international codes of professional ethics, including the ASHA Code of Ethics, underscore the imperative of professional autonomy, transparency, and the prioritization of client interests (5). However, without contextualization and localization, these principles remain merely aspirational.

Consequently, scientific journals in the field of rehabilitation can play a pivotal role in institutionalizing professional ethics in audiology by prioritizing the publication of critical analyses and empirical studies.

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Instructor, Department of Audiology, School of Rehabilitation Sciences, Isfahan University of Medical Sciences, Isfahan, Iran

Corresponding Author: Mahsa Sepehrnejad; Instructor, Department of Audiology, School of Rehabilitation Sciences, Isfahan University of Medical Sciences, Isfahan, Iran; Email: msepehrnejad@gmail.com

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