New Mexico Department of Public Safety Training Center
4491 Cerrillos Road, Santa Fe, New Mexico 87507
(505)827-9251—(800)521-9911 (NM Only) —Fax: (505)-827-3449— www.dps.nm.org/training

# PUBLIC SAFETY TELECOMMUNICATOR AUDIOLOGY COMPLIANCE FORM

Applicant Name ( Last, First, Middle)

## SECTION ONE Ears and Hearing

**Minimum Hearing Standards for Public Safety Telecommunicator**
**No Uncorrected** hearing loss in either ear **greater than 25db** at the test frequencies, 500, 1000, and 2000 Hz, and
**No more** than a **20db** loss in the better ear by audiometry, using ANSI(1969) standards.

| **Hearing Acuity ( Audiogram Required)** Record the values at each Hz level | *Excludable Condition* |
|---|---|
| Right (Decibels) Left (Decibels)<br>(Hertz) 500 _____ (Hertz) 500 _____<br>1000 _____ 1000 _____<br>2000 _____ 2000 _____ | ☐ |
| **Acute Otitis Media, Otitis Externa, and Mastoiditis** | *Excludable Condition* ☐ |

**Statement of Condition**

☐ The applicant **has passed** the minimum standards as established by the New Mexico Law Enforcement Academy Board without exclusions.

☐ The applicant **has one or more potentially excludable conditions** from the listed minimum medical standards as established by the New Mexico Law Enforcement Academy Board, but **can perform the functions** of a telecommunicator with accommodations. (Please explain below.)

☐ The applicant **has one or more potentially excludable conditions** from the listed minimum medical standards as established by the New Mexico Law Enforcement Academy Board, and **cannot perform the functions** of a telecommunicator. (Please explain below.)

I have personally examined the applicant and the listed results are correct.

☐ Audiologist ☐ Physician ☐ Other_____

_____ _____
Name of Examiner (Please Print) NM Lic. #

_____ _____
Signature Date

**Comments:**_____
_____
_____
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