

## **Alabama's Listening: Newborn Hearing Screening Program**

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## **Alabama's Listening: Newborn Hearing Screening Program**

- **Why is newborn hearing screening so important?**
- **What is a hearing screening?**
- **Risk factors for delayed onset of hearing loss.**
- **Alabama's statistics.**

## **Why is Newborn Hearing Screening Important?**

- **Without universal newborn hearing screening, the average age of identification of hearing loss in the United States is 2 years.**

## **Why is Newborn Hearing Screening Important?**

- **Infants who are identified and receive intervention by 6 months of age have the opportunity to develop speech and language skills close to their normal peers.**

## **Why is Newborn Hearing Screening Important?**

- **Infants who are identified after 6 months of age have speech and language skills at 50 to 60 percent of their chronological age. These children rarely catch up to their normal-hearing peers.**

### **Why is Newborn Hearing Screening Important?**

- Hearing loss is more prevalent than all other screenable disorders combined.
- One to three out of 1000 babies have hearing loss.
- For Alabama, this means 60 – 180 babies each year will be born with a hearing loss.

### **What is a Hearing Screening?**

- A screening only determines if the hearing organ is functioning within normal limits.
- A screening does not tell you how much hearing loss is present.

### **What is a Hearing Screening?**

- Two types of tests are available for newborn hearing screening:
  - Otoacoustic Emissions (OAE).
  - Automated Auditory Brainstem Response.

### **Otoacoustic Emissions**

- Otoacoustic Emissions (OAE) screen the hair cells in the inner ear.
- Soft clicks or tones are presented into the baby's ear through a probe placed in the ear canal.
- A small microphone in the probe measures the echo that is returned from the baby's ear.
- The echo is analyzed to determine how well the inner ear is working.

### **Automated Auditory Brainstem Response**

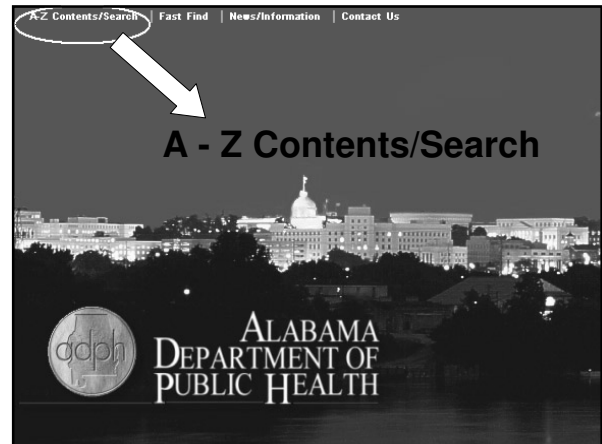
- AABR screen the inner ear and the auditory nerve.
- A soft click is presented to each ear while electrodes record the response as it travels between the ear and brain.
- The response is analyzed to determine how well the inner ear and auditory nerve are working.

### **Risk Factors for Delayed Onset of Hearing Loss**

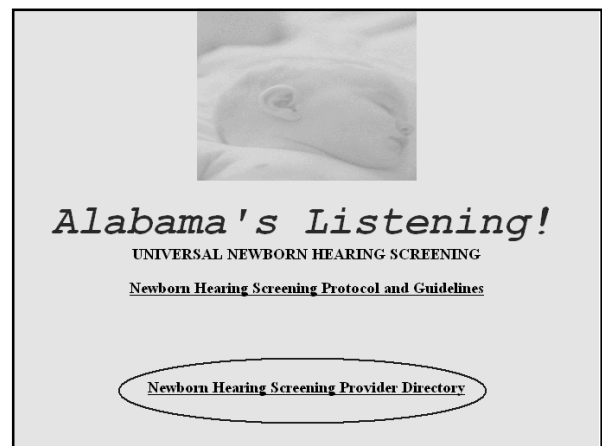
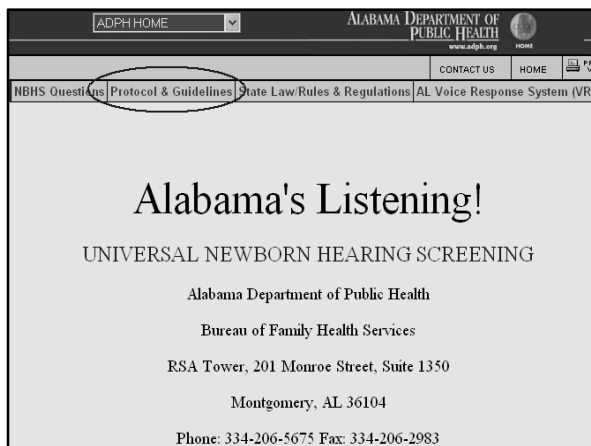
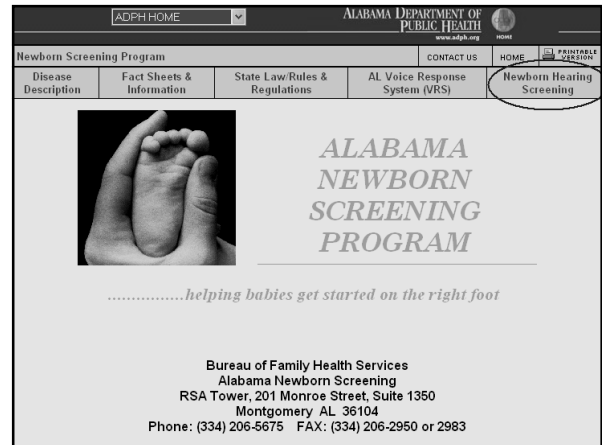
- Family history of genetic hearing loss.
- Hyperbilirubinemia- greater than 14 days or resulting in a blood transfusion.
- Toxoplasmosis.
- Syphilis.
- Maternal Rubella.
- Herpes.
- Cytomegalovirus (CMV).
- Mechanical ventilation for longer than 5 days.

## Alabama's Statistics

- All 58 birthing hospitals have newborn hearing screening programs in place.
- Screening rate is greater than 95%.
- Information is received from metabolic blood spot form for approximately 85% of babies.
- Approximately 5% of babies fail the initial screening.





<p>Guidelines for Prevention and Control</p> <p>Arthritis</p> <p>ATR/AHSCIR</p> <p>Autauga County: A Message to</p> <p><b>B</b></p> <p>Baldwin Co. Health Department</p> <p>Birth Certificates</p> <p>Breast and Cervical Cancer</p> <p><b>C</b></p> <p>Calendars_2005</p> <p>Calendars_2004</p> <p>Calendars_2003</p> <p>Cancer Registry</p> <p>Cardiovascular Health</p> <p>Car Seats</p> <p>Center for Health Statistics</p> <p>Child Death Review</p> <p>Childhood Lead Poisoning Prevention</p> <p>Child Restraints</p> <p>CHIP (Children's Insurance)</p> <p>Chronic Disease in Alabama (pdf)</p> <p>Community Development</p> <p>Comprehensive Cancer Control Plan</p>	<p>Motor Vehicle Safety</p> <p><b>N</b></p> <p>Nat'l Employee Health &amp; Fitness Day</p> <p>Nat'l Medicare Nursing Home Compare</p> <p>Newborn Screenings</p> <p>News Releases</p> <p>Notifiable Diseases/Conditions (pdf doc)</p> <p>Nurse Aide Registry</p> <p>Nursing Home Deficiencies</p> <p>Nutrition</p> <p><b>O</b></p> <p>Obesity Fact Sheet (pdf)</p> <p>Onsite Sewage Branch</p> <p>Open Access Scheduling</p> <p>Oral Health</p> <p><b>P</b></p> <p>PACE-EH</p> <p>Perinatal Program</p> <p>Personnel</p> <p>Pharmacy Unit</p>
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## **Newborn Hearing Care Coordination**

- **Goal:** To ensure children with hearing loss are identified early and enrolled in early intervention services.

## **Referrals**

- **Newborn Hearing Screening Coordinator (NHSC)**  

- **Area Social Work Directors (ASWD)**  

- **Patient 1st Care Coordinators**

## **Contact Procedure**

- **Telephone call**
  - Families
  - Hospital or doctor
- **Letter**
- **Home visit**

**Fax Reports to:  
Newborn Screening Program  
334 - 206 - 2983**

## **Second Test - Complete**

- **Send report to NHSC**
- **Include:**
  - Date of test
  - Medical provider performing test
  - Test results

## **Second Test - Incomplete**

- **Second test scheduled for future date**
  - Send Interim report
  - Continue to monitor
- **No second test scheduled**
  - Talk with family
  - Continue to monitor

## **Second Test - Failed**

- Infants who failed second test
  - Tested by audiologist
  - Not tested by audiologist

## **Additional Psychosocial Needs Identified**

- Offer care coordination services
- Follow patient first procedures

## **Documentation**

- Open case during locating/contacting phase.
  - Case opened when entered into patient information.
- Complete a Referral for Care Coordination Form

## **Documentation**

- Document all findings/activities in progress notes.
- Complete psychosocial assessment / case plan **ONLY** if psychosocial needs are identified and family accepts care coordination.
- Close case using Activity Type 7.

## **Remember**

- Update Medicaid number
  - in ACORN
- Hospital or doctor
  - newborn hearing screening results
- Psychosocial assessment
  - “**ONLY**” if additional needs identified

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