

# Universal Newborn Hearing Screening, Diagnosis, and Intervention

## Learning about Hearing Loss -- A Family's Checklist

Child's Name: \_\_\_\_\_

Child's Date of Birth: \_\_\_/\_\_\_/\_\_\_

Birth	Before 1 Month	Before 3 Months	Before 6 Months																				
<p>Checkups with Health Care Provider <span style="float: right;">□</span></p> <p style="text-align: center;">2-4 days</p> <p>□ <u>Hospital Birth:</u> Newborn Hearing Screen</p> <p>Date: ___/___/___</p> <p>Screening Results</p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center;"><u>Left Ear</u></td> <td style="text-align: center;"><u>Right Ear</u></td> </tr> <tr> <td style="text-align: center;">□ Refer □</td> <td style="text-align: center;">□</td> </tr> <tr> <td style="text-align: center;">□ Pass □</td> <td style="text-align: center;">□</td> </tr> <tr> <td style="text-align: center;">□ Not screened □ (missed)</td> <td style="text-align: center;">□</td> </tr> </table> <p>Be sure your doctor gets the results. If your baby does not pass the screening on both ears, or was not screened, schedule an Outpatient Screen (or evaluation by a Pediatric Audiologist [Hearing Specialist]).</p> <p>□ <u>Home Birth:</u> Contact _____ to schedule a hearing screening</p>	<u>Left Ear</u>	<u>Right Ear</u>	□ Refer □	□	□ Pass □	□	□ Not screened □ (missed)	□	<p>□ Outpatient Hearing Screen (or Rescreen)</p> <p>Place: _____</p> <p>Date: ___/___/___</p> <p>Screening Results</p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center;"><u>Left Ear</u></td> <td style="text-align: center;"><u>Right Ear</u></td> </tr> <tr> <td style="text-align: center;">□ Refer □</td> <td style="text-align: center;">□</td> </tr> <tr> <td style="text-align: center;">□ Pass □</td> <td style="text-align: center;">□</td> </tr> </table> <p>Be sure your doctor gets the results. If your baby does not pass the screening on both ears, make an appointment to see a Pediatric Audiologist [Hearing Specialist].</p>	<u>Left Ear</u>	<u>Right Ear</u>	□ Refer □	□	□ Pass □	□	<p>□ Evaluation by Pediatric Audiologist<sup>1</sup> (Hearing Specialist) with experience testing children 0 – 2 years of age. (Babies over 4 mos. old may need sedation.) Be sure your doctor gets the results.</p> <p>Place: _____</p> <p>Date: ___/___/___</p> <p>Test Results</p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center;"><u>Left Ear</u></td> <td style="text-align: center;"><u>Right Ear</u></td> </tr> <tr> <td style="text-align: center;">□ Normal hearing □</td> <td style="text-align: center;">□</td> </tr> <tr> <td style="text-align: center;">□ Hearing loss □</td> <td style="text-align: center;">□</td> </tr> </table> <p>□ Visit <a href="http://www.babyhearing.org">www.babyhearing.org</a></p> <p>If a baby has a <u>HEARING LOSS</u>, the next steps are:</p> <p>□ Contact family support groups (IMPACT – 1-877-322-7299; <a href="http://www.impactfamilies.org">www.impactfamilies.org</a>)</p> <p>□ Referral to early intervention program (Early Start – 1-866-505-9388)</p> <p>□ Evaluation by an ENT<sup>1</sup> (Ear, Nose and Throat doctor) with experience treating children 0 – 2 years of age.</p> <p>Place: _____</p> <p>Date: ___/___/___</p> <p>□ Learn about communication options and programs</p> <p>□ Hearing aid fitting and monitoring by a Pediatric Audiologist, if needed, including information on loaner hearing aids</p> <p>□ Learn about assistive listening devices (such as FM systems, cochlear implants, etc.)</p>	<u>Left Ear</u>	<u>Right Ear</u>	□ Normal hearing □	□	□ Hearing loss □	□	<p>□ Enroll in early intervention program that has experience serving children with hearing loss</p> <p>Place: _____</p> <p>Date: ___/___/___</p> <p>□ Get more information about communication options and programs</p> <p>□ Regular visits to a Pediatric Audiologist</p> <p>Evaluations:</p> <p>□ Ophthalmologist<sup>1</sup> (eye specialist) every year</p> <p>Place: _____</p> <p>Date: ___/___/___</p> <p>□ Genetic Specialist<sup>1</sup>, if appropriate</p> <p>Place: _____</p> <p>Date: ___/___/___</p> <p>□ Other Medical Specialists<sup>1</sup> (heart, development, kidneys, etc.) as needed</p> <p>Place: _____</p> <p>Date: ___/___/___</p> <p><sup>1</sup>You will usually need a referral from your doctor to see these specialists</p> <p>Many services may be available at no cost; contact your California Newborn Hearing Screening Program Hearing Coordination Center at <a href="tel:1-877-388-5301">1-877-388-5301</a></p>
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<p><u>Service Provider Contact Information</u></p> <p>Health Care Provider:</p> <p>Pediatric Audiologist:</p> <p>Early Intervention Provider:</p> <p>Family Support Group:</p> <p>Other:</p>																							

