Checklist for Medical Work-up of Infants with Hearing Loss
California Newborn Hearing Screening Program

1. Document prenatal history

- Ototoxic medication exposure
- Pregnancy complications
- Immunization status for Rubella
- Maternal status for syphilis
- Maternal drug and/or alcohol use
- Frequent spontaneous abortions

2. Document perinatal risk factors

- NICU admission 48 hours
- In-utero infections
- Craniofacial or external ear anomalies
- Stigmata associated with syndromes known to have hearing loss

3. Document family history

- Family members with permanent hearing loss with onset before 30 years of age

4. Complete physical examination, with special attention to:

- Minor anomalies – unusual morphologic features with no cosmetic or functional significance
- Major anomalies – dysmorphic features causing cosmetic or functional abnormalities (ie, cleft palate, cardiac, limb, or other skeletal deformities)
- Poor growth, microcephaly, or abnormal neurological exam

5. Laboratory

- Urine for CMV if < 3 weeks of age
- Consistent with history of findings, consider testing for rubella, syphilis, or toxoplasmosis
- Chromosome testing if significant dysmorphic features
- EKG if cardiac condition suspected
- Skeletal survey if growth delayed or disproportionate
- Head CT or MRI if neurological exam abnormal or if need to evaluate structure of middle or inner ear

6. Otolaryngology/otology referral

7. Ophthalmology referral

8. Cardiology/nephrology/neurology referral if indicated

9. Developmental evaluation if indicated

10. Genetics referral for syndromic forms of hearing loss or if no etiology for hearing loss is determined