

***Guidelines
Rescreening Hearing of Infants
in the Medical Home***



**Louisiana Department of Health
Office of Public Health
Louisiana Early Hearing Detection and Intervention Program (LA EHDI)**



Rescreening Guidelines at a Glance

- Test both ears, **even if only 1 ear did not pass the hospital screening.**
- If ABR was used for hospital screening, ABR **must** be used for rescreen.
- An infant who does not pass the rescreen in both ears at a single visit must be referred to a pediatric audiologist.
- Regardless of newborn hearing screening results, an infant with risk indicators for delayed onset hearing loss requires diagnostic assessment by 24 to 30 months of age.
- Report all screening results to Louisiana Early Hearing Detection and Intervention (EHDI) on a Follow-up Services Report (FSR) form electronically or by fax:
<https://ehdi.oph.dhh.la.gov> Fax: (504) 568-5854

The Early Hearing Detection and Intervention goals are “1-3-6”

- ❖ ***Before 1 month old: Perform hearing screening on all newborns***
- ❖ ***Before 3 months old: Complete an appropriate diagnostic audiological assessment***
- ❖ ***Before 6 months old: Begin early intervention services***

“Children who follow these timelines have been shown to have significantly better language skills than those later identified children.” *Yoshinaga-Itano et al. (1998). Language of early- and later-identified children with hearing loss. Pediatrics, 102: 1161-1171.*

TECHNOLOGY and PROCEDURES WHEN AN INFANT DOES NOT PASS RESCREENING

For babies with a “further testing needed” result on the newborn hearing screening form, the outpatient rescreening **should be completed by one month** after hospital discharge, even if transient middle ear pathology is suspected or is being treated.

Choice of rescreening technology:

Only Auditory Brainstem Response (ABR) or Otoacoustic Emissions Screening (OAE) are acceptable.

- If the initial screen was with ABR, then ABR must be used for rescreening.
- If the initial screen was with OAE, then either OAE and/ or ABR rescreening is appropriate.

Procedures When an Infant Does Not Pass the Rescreening:

- When rescreening results are “do not pass,” the infant should be referred to a **pediatric audiologist** for a diagnostic evaluation **as soon as possible**.
- Do not complete a second rescreening. Repeated rescreens delay the confirmation of hearing status. A delay will also increase the likelihood that sedation will be required.
- Diagnostic audiological evaluations can be completed during medical management of a middle ear problem.

PROCEDURES FOR INFANTS WITH RISK INDICATORS FOR DELAYED-ONSET OR PROGRESSIVE HEARING LOSS

Regardless of newborn hearing screening results, children with risk indicators for delayed-onset hearing loss should have a **diagnostic assessment by an audiologist at least once by 24 to 30 months of age.**

Early and more frequent assessment may be needed for children with a high-risk indicator, denoted below with an asterisk (*).

Risk Indicators Associated with Delayed-onset or Progressive Hearing Loss in Childhood

- *Family history of permanent childhood hearing loss
- *Congenital CMV infection
- *Syndrome associated with hearing loss
- *Caregiver concern regarding hearing, speech, language, or developmental delay
- *Extracorporeal membrane oxygenation (ECMO)
- *Culture-positive postnatal infections, such as viral or bacterial meningitis
- *Chemotherapy
- Neonatal intensive care of more than 5 days
- Exposure to ototoxic medications (i.e., gentamicin and tobramycin)
- Exposure to loop diuretics (i.e., furosemide and Lasix)
- Hyperbilirubinemia that requires exchange transfusion
- In utero infections, such as herpes, rubella, syphilis, and toxoplasmosis
- Assisted ventilation
- Craniofacial anomalies
- Physical findings, such as white forelock, associated with a syndrome known to include a sensorineural or permanent conductive hearing loss

STATE REPORTING PROCEDURES

Submit a Follow-up Services Report (FSR) to the Department of Health Early Hearing Detection & Intervention (EHDI) program within 7 days for:

- Rescreening results of infants who did not pass the hospital newborn hearing screening
- Initial screening results for any infant who was not screened prior to hospital discharge, and for home births

Electronic submission:

Register at <https://ehdi.oph.dhh.la.gov> to enroll as a LA EHDI – Information System user (LA EHDI-IS) to access your patients newborn hearing screening results and submit follow-up service reports electronically

Or fax forms to:

Fax: (504) 568-5854

Contact us:

Phone: (504) 599-1086

E-mail: LAEHDI@la.gov

Website: www.ehdi.dhh.la.gov