



Communication to Parents Regarding Newborn Hearing Screening

BEFORE the screening, explain:

- All infants in the state of Indiana receive a newborn hearing screen. Infants are given two opportunities to pass in the hospital.
- It is not painful – infants typically sleep through it
- Give a brief explanation of how the test works:

Auditory Brainstem Response (ABR)

Measures how the hearing nerve and brain respond to sound

- Sounds presented through soft headphones placed on infant's ears
- Three electrodes are placed on infant's head
- The electrodes collect the brain's response to the sounds

Otoacoustic Emission Testing (OAE)

Measures sound waves produced in infant's inner ear (cochlea)

- A soft clicking sound is presented to infant's ear through a small probe in the ear
- The hair cells in the cochlea (inner ear) vibrate. This vibration produces a very quiet sound that echoes into the middle ear.
- This emission (echo) is picked up by a microphone in the probe

Do:

- Explain test procedure to parents – how it works and what happens next
- Assure parents nothing hurts the infant. They may actually just sleep right through it.
- Know how screening works and how to identify and resolve issues during the test
- Explain test results using consistent scripts so all parents hear the same message for each scenario
- Give test results in writing as well using state provided forms
- If infant does not pass, clearly explain next steps in referral process and provide the parent with "What if My Baby Needs More Hearing Testing" brochure

Do not:

- Do not make excuses for why the infant didn't pass (fussy, fluid, equipment issues, etc). Remember, we don't know! Your words matter – and may impact parents' response to follow up. If a parent hears it was possibly equipment issues or infant was a little fussy, they may decide not to follow up with audiology.
- Do not say "baby came close to passing" or "almost passed". Hearing screen results are a strict PASS or FAIL. There is no such thing as "almost passing" even if it appears baby is near the passing criteria as the screen is running. That does not indicate a lesser degree of loss or close to normal hearing.



- Do not try to answer questions you don't know the exact answer to. It is absolutely OK to say, "I don't know but I can give you the name or resources of someone to call," then provide them with one of the EHDI contacts.

AFTER the screening:

Screening results should be conveyed immediately to the family so that they can understand the results. Be sure parents know the next steps for follow up. Provide results verbally and in writing using state results forms and referral brochures.

Passing result

- Baby has passed screening today which means he/she has hearing adequate for development of speech and language
- Remember hearing can change
- It is important to monitor milestones and contact your physician if any concerns arise

Passing result with risk factors for delayed onset hearing loss

- Baby passed today but he/she has a risk factor of _____, which is known to be a concern for developing hearing loss later in childhood
- It is important your baby has follow-up hearing testing during the first year of life. Your physician will guide you as to when the next test should be completed.
- It's important to monitor developmental milestones and contact your child's primary care physician as soon as any concerns arise

Did not pass hearing screening/refer

- Your baby did not pass the final hearing screen today
- This does not necessarily mean that your baby has a permanent hearing loss, but more detailed testing is needed to know your baby's hearing status
- Your infant will be scheduled with an audiologist (hearing specialist) to complete testing and determine if any further follow up is needed
- It is extremely important that you keep the appointment for further hearing testing
- It is important to get the test completed before the infant is 3 months old for the best speech and language outcomes. Also, sedation may be needed if the infant is older than 3 months old.