

# Wisconsin Statutes & Annotations

## Chapter 253. Maternal and Child Health.

### 253.115. Newborn hearing screening.

#### (1) DEFINITIONS. In this section:

(a) "Hearing loss" means an inability in one or both ears to detect sounds at 30 decibels hearing level or greater in the frequency region of 500 to 4,000 hertz that affects speech recognition and auditory comprehension.

(b) "Hertz" means a unit of frequency equal to one cycle per second.

(c) "Hospital" has the meaning given in s. [50.33 \(2\)](#).

(d) "Infant" means a child from birth to 3 months of age.

(e) "Newborn hearing screening program" means a system of a hospital under which an infant may be tested, using currently available medical techniques, to determine if the infant has a hearing loss.

(2) SCREENING PROGRAM REPORT. Beginning July 1, 2002, the department shall annually collect information from hospitals for the previous calendar year concerning the numbers of deliveries in each hospital and the availability in each hospital of a newborn hearing screening program. From this information, by July 31, 2003, and annually thereafter, the department shall determine the percentage of deliveries in this state that are performed in hospitals that have newborn hearing screening programs and shall report this information to the appropriate standing committees of the legislature under s. [13.172 \(3\)](#).

(3) HOSPITAL SCREENING PROGRAM. If, by August 5, 2003, the department determines that fewer than 88 percent of all deliveries in this state are performed in hospitals that have a newborn hearing screening program and so notifies the hospitals, every hospital shall, by January 1, 2004, have a newborn hearing screening program that is available to all infants who are delivered in the hospital.

(4) SCREENING REQUIRED. Except as provided in sub. [\(6\)](#), the physician, nurse-midwife licensed under s. [441.15](#), or certified professional midwife licensed under s. [440.982](#) who attended the birth shall ensure that the infant is screened for hearing loss before being discharged from a hospital, or within 30 days of birth if the infant was not born in a hospital.

(5) REFERRAL TO FOLLOW-UP SERVICES. The department shall provide referrals to intervention programs for hearing loss.

#### (6) EXCEPTIONS.

(a) Subsection [\(4\)](#) does not apply if the parents or legal guardian of the child object to a screen for hearing loss on the grounds that the test conflicts with their religious tenets and practices.

(b) No screening may be performed under sub. [\(4\)](#) unless the parents or legal guardian are fully informed of the purposes of a screen for hearing loss and have been given reasonable opportunity to object under par. [\(a\)](#) to the screen.

#### (7) SCREENING RESULTS.

(a) The physician, nurse-midwife licensed under s. [441.15](#), or certified professional midwife licensed under s. [440.982](#) who is required to ensure that the infant is screened for hearing loss under sub. (4) shall do all of the following:

1. Ensure the parents or legal guardian are advised of the screening results.
2. If the infant has an abnormal hearing screening result, ensure the parents or legal guardian are provided information on available resources for diagnosis and treatment of hearing loss.
3. Send to the state laboratory of hygiene board screening results and the infant's risk factors to contract a hearing loss.

(b) The state laboratory of hygiene board shall send the information provided under par. (a) 3. to the department.

(8) CONFIDENTIALITY. Except as provided under sub. (7) (a) 3. and (b), no information obtained under this section from the parents or legal guardian may be disclosed except for use in statistical data compiled by the department without reference to the identity of any individual and except as provided in s. [146.82 \(2\)](#).

**History:** [1999 a. 9, 185](#); [2009 a. 279](#); [2011 a. 260](#).