Introducing the Infant Hearing Guide

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"Development of Digital Support Resources for EHDI Programs"

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Using the Infant Hearing Guide

• Give it to family to use at home
• Use it with family to reinforce the importance of hearing aid use and language stimulation
• Share information with other EI providers
  – Audiologists might use in waiting room or for counseling
  – Speech pathologists might use in therapy or to reinforce concepts
• In-servicing others such as day care providers, students, teachers, residents, primary care physicians
Organization and Overview

• Features three ‘books’ with 3 to 6 chapters in each book
  – Diagnosis
  – Taking action
  – Family support

• Offers frequently asked questions and additional resources at the end of each chapter

• Includes a variety of interactive tools and videos woven throughout the chapters
Main Page

Infant Hearing Guide

To begin learning about infant hearing loss, click on a topic from the lists below.

**Diagnosis**
- Newborn Screening
- All About Hearing Loss
- Causes of Hearing Loss

**Taking Action**
- Introduction to Hearing Aids
- About the First Hearing Aids
- Cochlear Implants
- Introduction to Early Intervention (EI)
- Communication Methods
- Early Intervention Services

**Family Support**
- Family Talk
- Family Resources
- Family Tools
First Chapter under Diagnosis

Infant Hearing Guide

Purpose of Screening
Newborn Hearing Screening
Screening Process
  Screening Process Diagram
Rescreens and Referral
Otoacoustic Emissions
Auditory evoked Potentials
  HearingTest Video
Screening Questions
Frequently Asked Questions
Additional Resources

The Purpose of Screening

A screening test is the first step in the process of identifying hearing loss. The purpose of a hearing screening is to identify the babies who may have a hearing loss. Screening procedures are fast, reliable, inexpensive and painless. Follow-up testing is always necessary when the screening test is not passed.

Babies are typically given several screening tests when they are born to identify common problems. One of the most common problems is hearing loss. Hearing loss occurs in about 3 babies in 1000 of healthy births. About 3 babies in 100 who have been in the neonatal intensive care unit (NICU) have hearing loss. It is important to identify hearing loss as early as possible to minimize the impact on the development of speech, language, and learning. Most states have passed laws requiring hearing to be screened at birth.

This section is about universal newborn hearing screening (UNHS) - what it is, when it is done, how it is done, and what to expect. A number of organizations have developed guidelines for UNHS programs. These guidelines can be found at [http://www.aap.org/policy/jcithy2000.pdf](http://www.aap.org/policy/jcithy2000.pdf). Additional resources for more information are included at the end of this section.
Frequently Asked Questions

How accurate is the hearing screening process at birth?
The hearing screening test is very accurate if your baby passes. If your baby does not pass, it is important to follow-up with a rescreening as soon as possible.

What is the hearing rescreen?
The hearing rescreen is typically a repeat of the first hearing screening. The rescreen may be done before your baby leaves the hospital or it may be done a few days later. If your baby is a healthy baby with no complications, the hearing rescreen should be completed within the first two weeks of life. If your baby has complications, the rescreen should be completed as soon as your baby’s health is stable.
Additional Resources

The Web is constantly changing - new sites are being created, old sites are removed and sites are being reorganized. The following Web addresses may have changed since the list was produced. This may require you to search the site for desired information. The list is not comprehensive but does include many useful resources.

Early Hearing Detection and Intervention Programs
http://www.cdc.gov/hcbddd/ehdi/

Joint Committee on Infant Hearing
http://www.jcih.org/contactus.htm

National Center for Hearing Assessment and Management
http://www.infanthearing.org/

National Institute on Deafness & Other Communication Disorders

Newborn Hearing Screening
http://www.babyhearing.org/

Why Newborn Hearing Screening is Important
http://www.nad.org/infocenter/infotogo/ee/screening.html
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Tools Page

Infant Hearing Guide

Tools for working with parents and other professionals.

Tools for...

Diagnosis
- Newborn Screening
- Screening Process Diagram
- Hearing Test Video
- All About Hearing Loss
- How the Ear Works Video
- Audiogram Video
- Speech Sounds Video
- Sound Explorer
- Causes of Hearing Loss
- Overview Graphic
- Possible Causes Video
- Hearing Loss Timeline

Taking Action
- Hearing Aids
- Types of Hearing Aids
- Bone Conduction
- Examples of Hearing Aids
- About First Hearing Aids
- Troubleshooting Video
- Cochlear Implants
- CI Video
- CI Animation
- Expectations Video
- Early Intervention
- Communications Milestones
- Early Intervention Services
- Your Baby's 1st Teacher Video
- Experiencing Language Video

Family Support
- Family Talk
- Initial Reactions Video
- Family Cultures Video
- Family Advocacy Video
- Family Resources
- Parent Network Video
- Family Tools
- EI Toolbox PDF
Glossary

ABR: Auditory Brainstem Response

AC: Air Conduction

Acetylsalicylic Acid (Aspirin): Medication that is potentially ototoxic (can cause hearing loss).

Acquired Hearing Loss: An acquired hearing loss is a loss of hearing that appears after birth. It can occur at any time in one's life, perhaps as a result of a disease, a condition, or an injury.

Activation: The act of turning on a cochlear implant.

ADA: Americans with Disabilities Act

Advocacy: Actively supporting a position that you believe in by working cooperatively with educational programs and other agencies.

AEP: Auditory Evoked Potentials

Air Conduction (AC): Sound transmitted to the inner ear through the external ear and middle ear structures.

Air Bone Gap (ABG): The difference between an air-conducted response and a bone-conducted response.
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My son was born in 1997. They did the screening test at the hospital when he was born. They took him out and tested him. They brought him back and informed us he didn't pass the hearing test. I was puzzled. We're not sure because of fluid in the ear, the doctor's were telling us, but we said okay, fine. We brought him back for the second testing. Sure enough, didn't pass the screening test. So they suggested going to the Department of Health.
Scenario #1

- 6 month old female
- Clinic visit after full-time hearing aid use is established
- Patti playing role of mom
- Nan playing role of audiologist
Scenario #2

- 3 month old male
- Home visit by early interventionist
- Patti playing role of mom
- Nan playing role of early interventionist
Questions?

• Individual copies of the Infant Hearing Guide are available through the National Center for Hearing Assessment and Management (NCHAM) and can be ordered by visiting http://www.infanthearing.org

• Multiple copies can be obtained for a small fee to cover production and shipping costs
  – Contact Nannette Nicholson at NicholsonNannette@uams.edu or (501) 569-8909