

Wyoming Administrative Rules

Health, Department of

Mandatory Screening of Newborn Infants

Chapter 2: Mandatory Screening of Newborns for Hearing Loss

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CHAPTER 2

MANDATORY SCREENING OF NEWBORNS FOR HEARING LOSS

Section 1. Authority. The Wyoming Department of Health (“Department”) promulgates these Rules under Wyoming Statutes 35-4-801, -802.

Section 2. Purpose and Applicability.

(a) The purpose of these Rules is to implement the mandatory newborn hearing screening, as provided under W.S. 35-4-801, -802.

(b) The purpose of this Chapter is to establish the requirements and procedures for mandatory newborn hearing screening.

Section 3. Definitions.

(a) Except as otherwise specified, the terminology used in these Rules is the standard terminology and has the standard meaning used in healthcare.

(b) The following definitions apply in the interpretation and enforcement of these Rules:

(i) “Hearing screening” means an objective, physiological measurement used to identify individuals at risk for hearing loss.

(ii) “Trained individual” means a person who has received instruction on hearing screening protocols and the operation of hearing screening equipment.

Section 4. Wyoming Newborn Hearing Screening.

(a) The Wyoming Newborn Hearing Screening includes:

(i) An initial hearing screening according to Section 5 of this Chapter; and

(ii) A rescreening, as necessary, according to Section 6 of this Chapter.

(b) The Wyoming Newborn Hearing Screening must be performed according to one of the following methods:

(i) Auditory Brainstem Response (ABR);

(ii) Automated Auditory Brainstem Response (AABR); or

(iii) Otoacoustic Emissions (OAE), either Transient Evoked OAE (TEOAE) or Distortion Product OAE (DPOAE).

(c) The criteria to pass the Wyoming Newborn Hearing Screening is established as follows:

(i) If ABR is performed, the normal ABR must be to click stimulus at 35 dBnHL (decibels above normal hearing levels) or less in each ear;

(ii) If AABR is performed, the normal AABR must be to click stimulus at 35 dBnHL or less in each ear;

(iii) If TEOAE is performed, the normal TEOAE response must be for click stimulus at 84 dB SPL (decibels of sound pressure levels) presentation level or less in each ear; or

(iv) If DPOAE is performed, the normal DPOAE response must be 1500-6000 Hz (Hertz) stimuli at 65-55 dB SPL or less in each ear.

(d) The Wyoming Newborn Hearing Screening must be completed in each ear.

(e) Stimulus presentation level and the arrangement of electrodes and transducers of the hearing screening equipment must be in accordance with manufacturer specifications.

(f) Regardless of the timing requirements under Sections 5 and 6 of this Chapter, the Wyoming Newborn Hearing Screening and rescreening may be delayed due to transfers and medical contraindications. The birthing hospital, trained midwives, and attending physicians outside of hospitals shall document the delays, and ensure hearing screening has taken place prior to ultimate discharge.

Section 5. Initial Hearing Screening.

(a) If a child is born in a Wyoming hospital, the child shall receive a hearing screening by a trained individual before discharge.

(b) If a child is born outside of a Wyoming hospital, the attending physician, midwife, or person attending the delivery shall offer to provide or arrange a hearing screening for the child.

(c) If a child is transferred to another Wyoming birthing hospital, the hospital that transfers the child shall be responsible for ensuring that the hearing screening takes place. If a Wyoming resident child is transferred to a hospital outside of Wyoming, the transferring Wyoming hospital shall ensure that hearing screening takes place either prior to transfer, at the receiving hospital, or upon the child's return to Wyoming.

(d) The trained individual performing the newborn hearing screening shall identify

risk factors for hearing loss at the time of the screening.

Section 6. Rescreening.

(a) If a child fails the initial screening:

(i) The trained individual who performed the initial screening shall advise the parent or legal guardian of the importance that rescreening occur within seven (7) to ten (10) days of initial screening; and

(ii) A trained individual shall rescreen the newborn within seven (7) to ten (10) days of the initial screening.

(b) If a child fails the rescreening, the trained individual shall facilitate the referral for diagnostic audiologic evaluation including providing the following notifications within twenty-four (24) hours of the failed rescreening:

(i) Written notification to the primary care physician that the child has failed the Wyoming Newborn Hearing Screening and that diagnostic audiologic evaluation is recommended;

(ii) Written notification to the parent or legal guardian that the child has failed the Wyoming Newborn Hearing Screening, that diagnostic audiologic evaluation is recommended, and that the primary care physician has been notified; and

(iii) Written notification to the Department that the child has failed the Wyoming Newborn Hearing Screening.

Section 7. Reporting.

(a) All hearing screening results, identified risk factors, and status of newborns not screened shall be reported at least monthly to the Department in the form and manner prescribed by the Department.

(b) An audiologist who completes a diagnostic audiologic evaluation from a Wyoming Newborn Screening referral shall provide written notification of all screening and evaluation results to the Department in the form and manner prescribed by the Department within fifteen (15) calendar days of completed evaluations. Reporting of diagnostic audiologic evaluation results may include, but not limited to:

(i) Diagnostic audiologic evaluation reports for a diagnosis of normal hearing bilaterally; and

(ii) Diagnostic audiologic evaluation reports for any diagnosis of hearing loss

regardless of type, degree, or laterality, including undetermined.

Section 8. Informed Consent.

(a) Before performing the initial hearing screening, rescreening, or diagnostic audiologic evaluation, a trained individual shall obtain the informed consent of the child's parent or guardian, according to W.S. 35-4-801(c).

(b) If the parent or guardian objects to the initial hearing screening, rescreening or diagnostic audiologic evaluation:

(i) The child is exempt from the objected hearing screening;

(ii) The parent or guardian must complete a written waiver form; and

(iii) The trained individual shall assure completion of the written waiver form documenting the objection and submit the waiver form to the Department within thirty (30) calendar days of birth.

Section 9. Fees.

(a) If a child's initial hearing screening is collected by a trained individual at a hospital, the hospital shall pay the Department a fee of sixty-five dollars (\$65.00) per initial hearing screening performed.

(b) The fees assessed under this section cover the reasonable costs of the initial hearing screening and rescreening for the same newborn, referrals, equipment, education and training, and other services necessary to maintain functionality and sustainability of this self-funded program.

(c) The Department, in consultation with the designated committee pursuant to W.S. 35-4-801(d), may increase the fees assessed under this section, if it is determined that the cost of the program necessitates such increase, but in no instance may this fee be increased more than twenty-five percent (25%) without revising these rules.