Can my baby hear?

Why do some children need to have another hearing test if they pass the screening at birth?

Hearing loss can develop at any time. Although passing the screening at birth is a good start, some children have risk factors associated with hearing loss which could develop later in life.

Here are some of the reasons why monitoring hearing throughout childhood is recommended:

- delayed speech and/or language development
- family history of permanent hearing loss in childhood
- noticeable differences of the head, face, neck or ears
- certain medications given at birth
- syndromes associated with hearing loss
- admission to the neonatal intensive care unit
- prematurity (less than 37 weeks)

A parent or caregiver with concerns is one of the most important reasons to have a child’s hearing tested.

VTEHDI will send a letter to you and your baby’s primary care provider if ongoing monitoring is recommended.

What is the Vermont Early Hearing Detection and Intervention program?

The Vermont Early Hearing Detection and Intervention program (VTEHDI) provides support, training and care management to families and their babies, and to community providers. These partnerships help with timely referrals for diagnostic testing and early intervention services.

We give families and providers follow-up recommendations for ongoing hearing care based on the child’s risks and needs.

Our program works with state and national agencies and organizations to achieve the national early hearing detection and intervention 1-3-6 goals.

For more information, contact us:

Phone: 1-800-537-0076 or 1-802-651-1872
E-mail: VTEHDI@vermont.gov
Visit: www.healthvermont.gov/family/hearing

This pamphlet is available in other languages on our website:
www.healthvermont.gov/family/hearing/resources

Vermont Department of Health
Vermont Early Hearing Detection and Intervention
Division of Maternal and Child Health
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Why should ALL newborns have a hearing screening at birth?

Babies begin developing speech and language from the moment they are born. The first year of life is critical for normal speech and language development. When sounds and voices can’t be heard, language development is delayed. Hearing loss is easily missed in the early years of life. Many parents think they would be able to tell if their baby could not hear. This is not always the case.

About three newborns in every 1,000 have some degree of hearing loss. Only half of children diagnosed with hearing loss have a known family history of hearing problems or other risk factors for hearing loss. Newborn hearing screening can detect possible hearing loss in the first days of life.

When will my baby have a hearing screening?

A hearing screening should be provided to your baby before you leave the hospital. Most hospitals will screen a baby’s hearing after he/she is 12–24 hours old.

If you give birth at home, your midwife will screen your baby within the first weeks of life.

Who will screen my baby’s hearing?

Hearing screening may be done by audiologists, nurses, trained technicians, respiratory therapists, or midwives.

How will my baby’s hearing be screened?

Two types of available hearing screenings are Automated Auditory Brainstem Response (AABR) and automated Otoacoustic Emissions (OAE). Your baby may be screened by one or both of these methods.

The screenings are safe, quick, and painless. Most babies sleep through the screening and the results are available when the screening is complete.

What are the possible results of a newborn hearing screening?

PASS means no further action is needed at this time.

REFER means your baby did not pass the hearing screening in one or both ears. This does not confirm hearing loss, but a repeat hearing screening is needed.

Incomplete or Attempted; No Results Available indicates that the screening had to be stopped before completion and another screening is needed. This is usually due to the baby’s level of activity or problems with the equipment itself.

The results of your baby’s hearing screening will be shared with your baby’s primary care provider and with us, the Vermont Early Hearing Detection and Intervention program (VTEHDI).

What if my baby did not get a hearing screening or needs another screening?

You will be contacted by the VTEHDI program. Our staff will help you determine where to make an outpatient screening appointment.

Hearing screenings are available at:
• community hospitals
• some audiology practices
• some pediatric offices

National and State 1-3-6 goals

National standards of care and VTEHDI goals are to screen all newborns’ hearing before leaving the hospital or by 1 month of age. If a baby does not pass the first screening process then more testing is needed. Babies with any degree of hearing loss will have the best chance for normal speech and language development if they are diagnosed by 3 months of age and enrolled in supportive services by 6 months of age.