

Did you know that many babies with hearing loss will startle to loud sounds? Only a hearing test can tell you if baby has a hearing loss.

Some babies may need further hearing testing even if they passed a hearing screening at birth. It is important to talk with your child's doctor and make an appointment for further testing if:

You have a family member with permanent hearing loss since childhood.

Your baby was exposed to an infection before birth.

Your baby or you had an infection at birth such as sepsis, or cytomegalovirus.

Your baby had an infection of the brain after birth such as meningitis.

Your baby had severe "yellow jaundice."

Your baby's head, face, or ears have an unusual shape or form.

Your baby had breathing difficulty at birth or immediately following birth.

Your baby had a head injury.

Your baby was given medications that can harm hearing.

Your baby had to stay in the Neonatal Intensive Care Unit for more than 2 days.

The Early Hearing Detection and Intervention Program helps families get the services they need. Call today if you have any questions or want to know where to get a hearing test.

1-877-757-4327

1 ★ 3 ★ 6

For Newborn Hearing

**Screening by 1 month of age.
Diagnosis by 3 months of age.
Early Intervention by 6 months of age.**

If you have concerns about your child's hearing, or want to schedule a hearing test, contact your child's doctor and call the Early Hearing Detection and Intervention Program for help.

Toll Free

1-877-757-4327

Email

EHDI@ky.gov

A child is never too young for an accurate hearing test!

Office for Children with Special Health Care Needs
Early Hearing Detection and Intervention Program
310 Whittington Parkway Suite 200
Louisville KY 40222
1-877-757-4327
502-429-4430, ext. 4

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**Early Hearing
Detection and
Intervention**

**Newborn Hearing Screening
& Follow-up Care for
Infants with Hearing Loss**

Information for Parents

What is a screening?

All babies are checked for signs of some possible health concerns. These checks are called screenings.

Why is it important to have my baby's hearing screened?

If your baby has a hearing loss it is important to find out early and get care to help with learning and language.

How is the hearing screening done?

Your hospital will test your baby's hearing and give you the results before you leave the hospital.

The hearing screening test is simple and does not hurt.

What does it mean if my baby fails the hearing screening?

If your baby does not pass the hearing screening, it means that your baby needs further hearing testing. These tests will give you more information about your baby's hearing.

If your baby does not pass the hearing screening or has other symptoms of congenital Cytomegalovirus, they will also receive a screen and/or test for this.

Follow-up testing is very important. If your baby has a hearing loss, you will want to find out early.



About 3 to 4 babies out of every 1000 babies will have some form of hearing loss at birth.

Where do I go for follow up hearing testing?

There are many resources for follow up testing for your child. You will receive a list of clinics to contact from Kentucky's Early Hearing Detection and Intervention Program or call 1-877-757-4327 for clinics in your area.



What if my child has a hearing loss?

Talk to your baby's doctor **and** audiologist.

Ask about local services for babies with hearing loss.

If you have any more questions, please call 1-877-757-4327.

1 in 3,000 babies will have hearing loss.

How many of those babies are in your office?

Kentucky's Early Hearing Detection & Intervention (EHDI) program consistently reports 99% of all newborns who are referred for diagnostic screening and/or have a risk factor for hearing loss.

Early identification of children with hearing loss is critical for language development. The EHDI program can help your patients and their families access diagnostic care and early intervention services, including OCSHCN and the KEIS program.

Having equipment, such as an OAE or AABR, to screen your patients at newborn and all well-child visits, enables earlier detection of potential hearing loss.

The number of children with hearing loss doubles during early childhood--from approximately 3 in 1000 at birth to 6 in 1000 by school age.

Guidelines for early intervention for hearing loss are simple: 1 – 3 – 6

Screening by 1 month

Diagnosis by 3 months

Early intervention by 6 months

Office for Children with Special Health Care Needs

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Louisville KY 40222**

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502-429-4430 ext. 4

Fax: 502-429-4489

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CABINET FOR HEALTH AND FAMILY SERVICES

Early Hearing Detection and Intervention

Newborn Hearing Screening & Follow-up Care for Infants with Hearing Loss

Information for Primary Care Providers

Why is it important for parents to have a diagnostic hearing test for their child?

1. Early Identification

Early identification is critical to language development, academic achievement, and social/emotional development for children with hearing loss.

2. Early Intervention

The earlier a hearing loss is identified, the earlier a child can receive appropriate intervention. This may mean hearing aids, speech and language therapy, and family support, among other options.

What is the recommended time frame for identification?

The recommended time frame for diagnosis and intervention follows the simple formula of **1 - 3 - 6.**

- Screening by 1 month of age
- Diagnosis by 3 months of age
- Early intervention by 6 months of age

Indicators for infants who may need on going follow-up testing to diagnose hearing

Infants who “pass” their newborn hearing screen may be at risk for progressive or late-onset hearing loss if they have one or more of these risk factors:

- Infant has a family member with permanent hearing loss since childhood
- Infant has a craniofacial anomaly or syndrome
- Infant had an infection of the brain after birth such as meningitis.
- Infant had bilirubin level equal to or greater than 18%mg.
- Infant or mother had an infection at birth such as sepsis, or cytomegalovirus.
- Infant had breathing difficulty at birth or immediately following birth.
- Infant had a head injury.
- Infant was given medications that can harm hearing.
- Infant had to stay in the Neonatal Intensive Care Unit for more than 2 days.
- Mother was exposed to Rubella
- Mother was diagnosed with Syphilis

OCSHCN can also provide services for infants and children with hearing loss

Comprehensive Audiological services are available at OCSHCN offices for children who need testing, hearing aids & ear molds, or follow-up services for cochlear implants.

Benefits for patients:

- Testing provided by licensed, certified audiologists
- Hearing aids available at manufacturer’s cost
- Lower than market rates for audiological services including hearing aid evaluations, checks and repairs
- Private third party insurance, KCHIP, Medicaid and all MCOs accepted

Benefits for physicians:

- Patient does not have to be enrolled in OCSHCN program or be treated by OCSHCN physicians
- Written test results provided to referring physician within 48 hours
- Variety of comprehensive testing available: ABR, OAE, Immittance Measures, Behavioral Audiometry, Hearing Aid Evaluations