

# NE-EHDI Summary and Reporting Guidelines for Audiologists (*Birth – 3 years of age*)

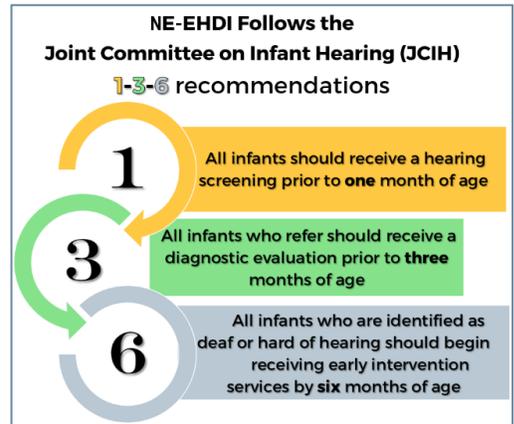
## Nebraska Early Hearing Detection and Intervention (NE-EHDI)

The NE-EHDI Program is located in the Newborn Screening and Genetics Program, Lifespan Health Services Unit, Division of Public Health, Nebraska Department of Health and Human Services. <http://dhhs.ne.gov/EHDI>

### **1<sup>st</sup> Step of Newborn Hearing Screening – Inpatient Screening at Birthing Facilities** (See page 2 for more details.)

### **2<sup>nd</sup> Step of Newborn Hearing Screening – Best Practices for Audiologists**

- Complete **initial diagnostic evaluation, by 1 month of age if possible.**



To align with the JCIH guidelines and recommendations from the NE-EHDI Advisory Committee, audiologists seeing infants should conduct a battery of tests to determine hearing status that includes a case history, documentation of risk indicators for hearing loss, otoscopic inspection, evoked Otoacoustic Emissions (OAE) assessment, Auditory Brainstem Response (ABR) assessment, and middle ear measures. The following protocols should be used to ensure the child is receiving the most comprehensive care:

- **JCIH 2019 statement endorses, for well-born infants only, who are screened by automated auditory brainstem response (AABR) and do not pass, that rescreening and passing by otoacoustic emissions (OAEs) testing is acceptable, given the very low incidence of auditory neuropathy in this population.**
  - If rescreening with OAE, please inform parents verbally and in writing that this will not rule out all types of hearing loss including auditory neuropathy.
  - JCIH continues to recommend AABR screening and rescreening protocols in the NICU to allow for detection of auditory neuropathy since it is more prevalent in this population.
- **Both ears should always be rescreened, even if one ear may have passed initially.**

These evidence based guidelines will help to identify most cases of childhood deafness present at birth.

- Complete the **confirmatory diagnostic evaluation by 3 months of age.**
  - If the child is identified as D/HH, he/she should be referred to EI by 3 mos. of age & enrolled in EI by 6 mos. of age.
- **If the child is identified as D/HH, the audiologist should discuss the following items with families:**
  - Parent Resource Guide provided by NE-EHDI, as appropriate. (Available online at <http://dhhs.ne.gov/Pages/EHDI-PRG> or request a printed copy from NE-EHDI.)
  - Information about hearing and childhood deafness, milestones for speech and language, as well as communication (sign language, listening & spoken language), and education options (EDN) for children who are D/HH.
  - Amplification including hearing aids or other assistive technology; fit amplification if chosen; and refer for consideration of cochlear implant candidacy when appropriate.
- **Discuss with family & PCP** the need for coordinating services between the PCP and specialty medical professionals (ophthalmologic, genetic, developmental pediatrics, neurology, cardiology, and nephrology), and educational professionals needed for family centered care.

**REPORT to the child's PCP** results of the diagnostic audiologic hearing evaluation, including information that an infant needs further testing to confirm hearing status.

**REPORT to NE-EHDI** all children birth-3 years of age who received a diagnostic evaluation, and those children who need further testing. **Report to NE-EHDI as soon as possible or within 5 days of the evaluation.**

- Audiologists should submit the Diagnostic form for all babies and children seen for a diagnostic evaluation. Audiologic Screening and Diagnostic Report form can be found at: <http://dhhs.ne.gov/EHDIEarly%20Hearing%20Detection%20and%20Intervention/Audiologic%20Reporting%20Form%202019.pdf>

#### **REPORT to NE-EHDI:**

- ✓ All outpatient screenings, re-screenings, evaluations (diagnostic and behavioral) on newborns/infants.
- ✓ Late identifications on children ages birth-3 years of age.
- ✓ ENT evaluations on children birth-3 years of age who have not passed their newborn hearing screening.
- ✓ Repeat screenings/evaluations on children birth-3 years of age due to risk factors for late onset or progressive hearing loss.

**3<sup>rd</sup> Step of Newborn Screening – Audiologists Refer to the Early Development Network (EDN) for EI services** by 3 months of age, or as soon as possible so the child can be enrolled in EI by 6 months of age. An infant or toddler should be referred to EDN if they have:

**EDN Referral Guidelines for EI continued from page 1:**

- A suspected significant level of developmental delay in one or more developmental area(s): cognitive, adaptive, communication, social/emotional, and/or physical (including vision, hearing).
- A diagnosed physical or mental condition that has a high probability of resulting in a significant developmental delay.
- Referrals and questions regarding services for infants and toddlers birth to 3 years old with disabilities should be made to the local EDN Referral Agency of the child/family by calling Nebraska ChildFind at 1-888-806-6287 (toll-free) or visiting the EDN website: <http://edn.ne.gov/cms/make-a-referral>

**FAMILY SUPPORT**

**Nebraska Hands and Voices (H&V)** is dedicated to supporting families with children who are deaf or hard of hearing (D/HH) without bias around communication modes or methods statewide. It is a parent-driven, non-profit organization providing families with resources, networks, and information that meet their individual needs to improve communication access and educational outcomes for their children. Guide By Your Side (GBYS) is a program within Nebraska H&V. The GBYS Guides are parents of a D/HH child who have been trained to provide support and advocacy for other families. The Guides have real life experience in raising a D/HH child, and are knowledgeable about the issues encompassing the journey. Families who are just beginning the journey can learn from veteran parents about the challenges as well as the joys of raising a child who is D/HH. For many parents, their only regret in the ‘early years’ is not connecting to other parents sooner! You can find more information at <http://www.handsandvoicesne.org/guide-by-your-side/> [gbys@handsandvoicesne.org](mailto:gbys@handsandvoicesne.org)

**PTI Nebraska** is a statewide resource for families of children with disabilities and special health care needs. The staff are parent/professionals and are available to talk to parents and professionals about special education, other services and disability-specific information. PTI Nebraska’s mission is to provide training, information and support to Nebraska parents and others who have an interest in children from birth through twenty-six and who receive or who might need special education or related services. Enable parents to have the capacity to improve educational outcomes for all children. The vision is that children with disabilities will be prepared to lead productive, independent adult lives to the maximum extent possible. You can find more information at <http://pti-nebraska.org/> (402) 346-0525 or (800) 284-8520

**1<sup>st</sup> Step of Newborn Hearing Screening – Best Practices for Birthing Facilities**

- It is the responsibility of the birthing facility to have an inpatient hearing screening performed on all newborns before discharge. This also includes providing education about the hearing screening and next steps when appropriate.
- If a newborn does not pass (refers) the hearing screening, a rescreen is performed before discharge. If the infant does not pass the inpatient rescreen then an outpatient hearing screening should be completed by one month of age.
- The birthing facility reports the hearing screening results to NE-EHDI and the PCP.
- The birthing facility or PCP should schedule an appointment with the audiologist for infants who do not pass (refers on) the outpatient screening.
- NE-EHDI conducts follow-up on infants who do not pass the hearing screening to assist the families with completing the next steps within the **JCIH** recommended timeline.

**For more information about the following**, please go to <http://dhhs.ne.gov/Pages/EHDI-Audiologists.aspx>

- List of screening equipment that is used at each of the birthing facilities in Nebraska. This will help you know what type of rescreening a baby will need at your facility.
- List of Pediatric Audiology Clinics in Nebraska
- Infant Hearing Act of 2000
- NE-EHDI Program Advisory Committee
- Relevant Research Articles

**Please continue to provide services that are family-centered by promoting family & professional partnerships, responding to individual family needs, building on strengths, and respecting the diversity of families.**

**QUESTIONS? Call toll free 888-546-0935 or contact:**

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**NEBRASKA**  
Good Life. Great Mission.

**Thank you for all the work you do to provide quality services to families in Nebraska!**

DEPT. OF HEALTH AND HUMAN SERVICES  
EARLY HEARING DETECTION & INTERVENTION PROGRAM  
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