



Protecting, maintaining and improving the health of all Minnesotans

Hearing Screening for Transferred Infant

The baby named below was transferred from the NICU before hearing screening could be performed. Please screen baby’s hearing before discharge to home and fax this sheet to the Newborn Screening Program at the Minnesota Department of Health.

Infants who have spent time in the NICU are at increased risk for hearing loss. It is essential that the infant be screened in a timely fashion and that the parents, the primary care physician, and MDH be made aware of the results.

If you have any questions regarding hearing screening for this infant, please contact the Newborn Screening Program at 1-800-664-7772.

Infant’s name: _____

Mother’s name: _____

DOB: _____

Transferring Hospital: _____

Receiving Hospital: _____

Hearing Screening Results

Date Screen Performed: _____

Right Ear Pass Refer

Left Ear Pass Refer

Screening Method ABR OAE

If baby did not pass, what appointments were made for follow-up?

January 2008