

# Risk Assessment: Joint Commission on Infant Hearing (JCIH) Risk Indicators

## Ages

One month through 20 years

## Purpose

To assess risk factors for delayed onset, progressive and acquired hearing loss

## Procedure

For initial interviews review all the following risk indicators (The Joint Committee on Infant Hearing, 2019) which are associated with permanent congenital, delayed onset or progressive hearing loss in childhood.

## Perinatal Risk Indicators

1. A history of family members of early progressive or delayed onset, permanent hearing loss in childhood
2. Neonatal Intensive care of more than five days.
3. Hyperbilirubinemia requiring exchange transfusion.
4. Aminoglycoside administration greater than 5 days duration.
5. Asphyxia and or hypoxic ischemic encephalopathy.
6. Extracorporeal membrane oxygenation (ECMO.)
7. In-utero infections such as herpes, rubella, syphilis, and toxoplasmosis.
  - In-utero infections with cytomegalovirus (CMV)
  - Mother + Zika and infant with laboratory findings of Zika + clinical findings.
8. Certain birth conditions or findings:
  - Craniofacial anomalies including microtia, atresia, ear dysplasia, white forelock, and microphthalmia.
  - Congenital microcephaly, congenital or acquired hydrocephalus.
  - Temporal bone anomalies
9. Over 400 syndromes have been identified with atypical hearing thresholds for more information refer to <https://hereditaryhearingloss.org/syndromic>

## Perinatal or Postnatal Risk Factors

10. Culture-positive infections associated with sensorineural hearing loss
11. Events associated with hearing loss
  - Significant head trauma especially basal skull/ temporal bone fracture
  - Chemotherapy
12. Family/caregiver concern

## PASS

Children for whom no risk factors for hearing loss are identified do not require referral.

## REFER

Caregiver concern of hearing, speech, language, developmental delay, and or developmental regression should be referred immediately.

Children who pass their newborn hearing screen but have a risk factor for hearing loss should be referred to an audiologist (ideally one specializing in pediatrics) for at least one diagnostic audiology assessment as outlined in JCIH 2019 guidelines.

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*To obtain this information in a different format, call: 651-201-3650.*