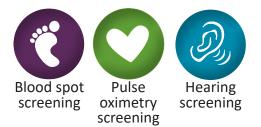
Newborn Hearing Screening FACT SHEET



What is newborn hearing screening?

Newborn hearing screening is a test that checks babies for hearing loss in the range where speech is heard. It is one of three newborn screens that should take place soon after birth, along with blood spot and pulse oximetry screening.



Why is hearing screening important?

It's important to identify any problems with hearing as soon as possible because speech and language begin to develop at birth. A child with hearing loss may have difficulty with speech and language without early help. If a baby has hearing loss, it is usually not noticeable to parents or providers because many babies with hearing loss startle to loud sounds and even appear to listen. Screening with follow-up testing is the only way to find hearing loss early. Learning that your baby has hearing loss at an early age will help you and your baby find the best ways to communicate.

How and when will my baby's hearing be screened?

Unlike hearing tests for older children and adults, newborn hearing screening does not require active participation from your baby. Instead, a small screening device will play soft sounds while it measures how your baby's inner ear or hearing nerve responds. The two methods currently in use for newborn hearing screening are otoacoustic emissions (OAE) and automated auditory brainstem response (AABR). See backside for more details.

Screening should be performed as soon as possible and is best completed before your baby is one month old. If your baby is born in a hospital, the initial screen should be performed before you and your baby go home. Hearing screening is best performed when your baby is calm, well-fed, and comfortable.

What do the results mean?

If your baby receives a PASS result, the screening indicates that your baby's hearing is normal at that time. Because hearing loss can occur at any time during a person's life, however, it is important to discuss any concerns about hearing loss or missed speech milestones with your baby's provider.

If your baby receives a REFER result, the screening indicates that further testing is needed to make sure that your baby is hearing all the sounds that are important for speech and language development. Your provider will help you arrange an appointment for follow-up as soon as possible.

How do OAE and AABR work?

With OAE, a soft rubber tip placed in each ear delivers gentle tones and measures the echo that occurs when the ear is functioning normally. With AABR, earphones deliver the test sounds. Sensors placed on the baby's head and neck measure how the baby's hearing nerve responds to those sounds. For both OAE and AABR, a computer measures whether the result is a PASS or a REFER (not pass).

Early Hearing Detection and Intervention Program

The Early Hearing Detection and Intervention (EHDI) program assists in identifying newborns and infants who have or are at risk for having hearing loss and guides families to appropriate intervention services.

The goals of the EHDI program are for all babies to have:

- hearing screened before 1 month of age
- diagnostic evaluation before 3 months of age
- early intervention services initiated before 6 months of age



Minnesota's EHDI program website provides resources for parents, providers, and other professionals. Parents can learn about the EHDI process, find materials to help guide them through hearing loss identification and intervention, and locate hearing specialists and education resources in their area. The site also offers information to help parents connect with locally-available family and community support systems.





More questions about screening?

Feel free to call the Newborn Screening Program at (800) 664-7772* or visit us online at: www.health.state.mn.us/newbornscreening or www.improveehdi.org/mn

*translators available



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