The earlier a child with hearing loss is identified, the less effect it could have on their education, relationships, and earning potential.



The Connecticut EHDI program operates under Connecticut General Statutes, Section 19a-59, which took effect July 1, 2000, and requires all Connecticut-born babies receive a hearing screening at birth. All newborn hearing screening results are reported to the Department of Public Health.

For more information about hearing screening, contact:

Connecticut Department of Public Health

Early Hearing Detection and Intervention Program

410 Capitol Avenue, MS # 11 MAT
P.O. Box 340308
Hartford, CT 06134-0308
Voice: (860) 509-8251
Secure Fax: (860) 629-6965
https://portal.ct.gov/ehdi
Telecommunications Relay Service 7-1-1

For more information about supports for babies who are deaf or hard of hearing, contact:

Child Development Infoline 1-800-505-7000 www.birth23.org

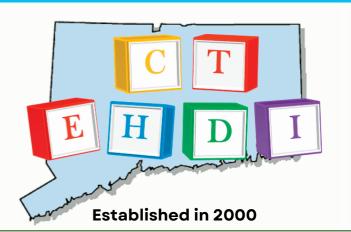
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A Parent Guide to Newborn Hearing Screening



Connecticut Department of Public Health

Early Hearing Detection & Intervention (EHDI) Program

Voice: (860) 509-8251 Fax: (860) 629-6965 https://portal.ct.gov/ehdi

Newborn Hearing Screening

Why are babies given a screening at birth? Hearing loss is one of the most commonly occurring disabilities found in newborns. The newborn hearing screening identifies babies who need additional testing to determine their ability to hear. Most babies with a hearing loss show no symptoms, which is why it's critical to have your baby's hearing screening completed by one month of age.

How are babies screened?

A quick and painless method is used to measure your baby's responses to sound.

What if my baby passes the screening?

The first three years of life are the most important for developing language and communication skills; therefore, it is recommended to have your child screened again, at least once before 36 months old, even if they passed their newborn hearing screening.

What if my baby fails the screening?

Schedule an appointment with a pediatric audiologist as soon as possible! Ideally, testing should be completed by no later than three months of age. Ask the birthing staff or your baby's doctor for assistance or contact an audiologist directly by using the "Audiology Centers" list found to the right.

Is my baby at risk of a hearing loss?

If unsure, ask your healthcare provider if your child has any of the risk factors in the "Risk Factors for Hearing Loss" list found to the right. Even if your baby passed their newborn hearing screening, there are risk factors that could cause a hearing loss later on. If your baby has risk factors for hearing loss, it is extremely important to discuss a follow-up hearing test schedule with your child's healthcare provider and an audiologist.

What if my baby has a hearing loss?

It is recommended to enroll your baby in early hearing intervention services as soon as hearing loss is diagnosed, but not later than six months of age. Contact the *Connecticut Birth* to *Three System (800-505-7000 or www.birth23.org)* for free supports for children up to three years old. Also, the *American School for the Deaf (860-570-2393 or www.asd-1817.org)* has contracted with the EHDI program to provide free family-to-family and other family-focused supports.

Audiology Centers

The following audiology centers have the specialized equipment and experience to conduct hearing testing in infants and children:

Connecticut Children's Medical Center

Hartford, Farmington, and Glastonbury, CT. (860) 545-9642 or (860) 837-6300

Lawrence & Memorial Hospital Waterford, CT. (860) 271-4900

UCONN., Speech & Hearing Clinic Storrs, CT. (860) 486-2629

Yale New Haven Children's Hospital New Haven and Trumbull, CT. (877) 925-3637

Or, visit www.ehdi-pals.org for a list of pediatric audiologists by location.

Risk Factors for Hearing Loss

The following conditions require follow-up hearing screening or testing due to likelihood of a **delayed** hearing loss.

This is not an inclusive list or meant to replace advice by a healthcare professional.

- Caregiver concern regarding hearing, speech, language, developmental delay or developmental regression.
- Family History of childhood hearing loss.
- Syndromes: There are many syndromes associated with hearing loss, please visit: www.hereditaryhearingloss.org.
- Congenital Cytomegalovirus (cCMV).
- In utero infections, such as herpes, rubella, syphilis, toxoplasmosis, Zika, etc.
- Craniofacial malformations, temporal bone abnormalities, congenital microcephaly, microtia, atresia, or head trauma.
- NICU staγ > 5 daγs.
- Hyperbilirubinemia exchange transfusion.
- Extracorporeal membrane oxygenation (ECMO).
- Asphyxia\Hypoxic Ischemic Encephalopathy.
- Aminoglycoside for > 5 days.
- Chemotherapy.

Your Baby's Hearing and Communicative Development Checklist*

The checklist below presents the average age by which most babies accomplish a variety of early speech and language skills. If your child has not accomplished all the items by the upper age of the age range, please consult your pediatrician.

Birth to 3 Months

- Reacts to loud sounds.
- Calms down or smiles when spoken to.
- Recognizes your voice and calms down if crying.
- When feeding, starts or stops sucking in response to sound.
- Coos and makes pleasure sounds.
- Has a special way of crying for different needs.
- Smiles when he or she sees you.

4 to 6 Months

- Follows sounds with his or her eyes.
- Responds to changes in the tone of your voice.
- Notices toys that make sounds.
- Pays attention to music.
- Babbles in a speech-like way and uses many different sounds, including sounds that begin with p, b, and m.
- Laughs.
- Babbles when excited or unhappy.
- Makes gurgling sounds when alone or playing with you.

7 Months to 1 Year

- Enjoys playing peek-a-boo and pat-acake.
- Turns and looks in the direction of sounds.
- Listens when spoken to.
- Understands words for common items such as "cup," "shoe," or "juice".
- Responds to requests ("Come here").
- Babbles using long and short groups of sounds ("tata, upup, bibibi").
- Babbles to get and keep attention.
- Communicates using gestures such as waving or holding up arms.

*The above is an abridged list from the National Institute on Deafness and Other Communication Disorders. Visit: www.nidcd.nih.gov.