

**From the JOINT COMMITTEE ON INFANT HEARING  
2000 POSITION STATEMENT**

**INDICATORS ASSOCIATED WITH SENSORINEURAL AND/OR  
CONDUCTIVE HEARING LOSS**

<u>A</u> <b>For use with neonates (birth through age 28 days) when universal screening is not available</b>	<u>B</u> <b>For use with infants (age 29 days through 2 years) when certain health conditions develop that require rescreening</b>	<u>C</u> <b>For use with infants (age 29 days through 3 years) who require periodic monitoring of hearing.</b>
<ol style="list-style-type: none"> <li>1. Family history of hereditary childhood sensorineural hearing loss.</li> <li>2. In utero infection, such as cytomegalovirus, rubella, syphilis, herpes, and toxoplasmosis.</li> <li>3. Craniofacial anomalies, including those with morphological abnormalities of the pinna, and ear canal.</li> <li>4. Birth weight less than 1,500 grams (3.3 lbs.).</li> <li>5. Hyperbilirubinemia at a serum level requiring exchange transfusion.</li> <li>6. Ototoxic medications, including, but not limited to, the aminoglycosides, used in multiple courses or in combination with loop diuretics.</li> <li>7. Bacterial meningitis.</li> <li>8. Apgar scores of 0-4 at one minute or 0-6 at five minutes.</li> <li>9. Mechanical ventilation lasting five days or longer.</li> <li>10. Stigmata or other findings associated with a syndrome known to include a sensorineural and/or conductive hearing loss.</li> </ol>	<ol style="list-style-type: none"> <li>1. Responsible party concern regarding hearing, speech language, and/or developmental delay.</li> <li>2. Bacterial meningitis and other infections associated with sensorineural hearing loss.</li> <li>3. Head trauma associated with loss of consciousness or skull fracture.</li> <li>4. Stigmata or other findings associated with a syndrome known to include a sensorial and/or conductive hearing loss.</li> <li>5. Ototoxic medications, including, but not limited to, chemotherapeutic agents or aminoglycosides, used in multiple courses or in combination with loop diuretics.</li> <li>6. Recurrent or persistent otitis media with effusion for at least three months.</li> </ol>	<p>Some newborns and infants may pass initial hearing screening, but require periodic monitoring of hearing to detect delay-onset sensorineural and/or conductive hearing loss. Infants with these indicators require hearing evaluations at least every six months until age three years, and at appropriate intervals thereafter.</p> <ol style="list-style-type: none"> <li>1. Indicators associated with delayed <u>sensorineural</u> hearing loss include: <ul style="list-style-type: none"> <li>• Family history of hereditary childhood hearing loss.</li> <li>• In utero infection, such as cytomegalovirus, rubella, syphilis, herpes, or toxoplasmosis.</li> <li>• Neurofibromatosis Type II and neurodegenerative disorders.</li> </ul> </li> <li>2. Indicators associated with <u>conductive</u> hearing loss include: <ul style="list-style-type: none"> <li>• Recurrent or persistent otitis media with effusion.</li> <li>• Anatomic deformities and other disorders that effect eustachian tube function.</li> <li>• Neurodegenerative disorders.</li> </ul> </li> </ol>