UTAH NEWBORN HEARING SCREENING STANDARDS***

- 100% of all newborns* are appropriately screened on time:
  - Hospital-born infants: Before discharge**
  - Out-of-Hospital-born infants: Before 10 days of age.**
  - Newborns who have been in the NICU > 5 days must have an Automated ABR to rule out a neural hearing loss.

- 90% of needed follow-up complete before 14 days of age.**
  - The outpatient rescreening must include the testing of both ears, even if only 1 ear failed the inpatient screening.

- Upon failure of outpatient rescreening or if first screening failure occurs at = 14 days of age, primary care physician is notified to allow for CMV testing before 21 days of age.

- 90% of all diagnostics completed before 3 months of age.**

- 100% of all Infants with hearing loss are referred to appropriate early intervention (USDB Parent Infant Program- ph: 801-629-4768 or fax: 801-629-4777; or Baby Watch Early Intervention: 1-800-961-4226) no longer than 7 days of completed diagnostic evaluation as recommended by the Utah Infant Audiologic Assessment and Amplification, JCIH, and AAP protocols.

* It is understood that special populations of newborns exist, including those residing in the NICU, where this may not be possible
** Use adjusted age for premature infants
*** Approved by the Newborn Hearing Screening Advisory Committee

November 2014
UTAH NEWBORN HEARING SCREENING
REGULATIONS

The following is a summary of State rules and regulations for the hearing screening legislation

INFORMATION HOSPITALS ARE REQUIRED TO GIVE TO
PARENTS AND PRIMARY CARE PROVIDERS

- Purpose of screening, procedures used, benefits, and consequences of hearing loss
- Whether baby was screened, results, and follow-up procedures, if necessary
- For babies requiring additional screening:
  - Written notice of availability and importance of re-screening
  - 2nd written notice, if necessary
  - Notify by fax, phone or other means of communication, the PCP and State EHDI of
    failed initial hearing screening
- For babies who do not pass complete screen, written notice of
  - Results
  - Recommended diagnostic procedures (what and where)
  - Resources for infants and children with hearing loss
  - Notify by fax, phone or other means of communication, the PCP of failed second
    hearing screening
- Reasonable Efforts within 30 days to locate babies who need additional procedures if the
  baby:
  - Does not return within 15 days
  - Is “lost to follow-up”
- To be considered a “reasonable effort” there must be documentation of at least:
  - Two attempts to contact parents by phone or memo
  - One attempt to contact infant’s primary care provider
  - Contacts may be by phone, mail, or via health care provider
REGULATIONS (continued)

EACH SCREENING PROGRAM MUST REPORT:

• Weekly to State’s Early Hearing Detection and Intervention (EHDI) Program
  - For each live birth, “identifying information” and the status of the hearing screen
  - For babies who do not pass or who are not screened (missed) or who are transferred to another facility prior to completing screening procedure:
    - Mother’s first and last name
    - Address
    - Phone number
    - Primary care physician
    - Infant’s birth weight
    - Hospital where infant was transferred*
  - Any information the program has about results of follow-up activities or diagnostic procedures

• Every two years and within 30 days of changes to the screening program:
  - A summary of procedures (called the Program Summary) used in the screening program, including:
    - Name of program director and supervising audiologist
    - Equipment
    - Screening protocols
    - Referral criteria
    - Parent education materials

• Hospitals receiving “transferred babies” must report screening results to birthing hospital and to the State EHDI office.

To facilitate improved follow-up procedures, please comply with the following guidelines:

• Submit screening data to Utah EHDI Data Coordinator weekly
• Hospitals must submit data using Hi*Track system.
• Data for babies that are transferred prior to completing the screening procedure must include:
  - mother’s first and last name
  - baby’s birth weight
  - hospital where baby was transferred

NEED ASSISTANCE?
- With any questions regarding data or audiology matters contact the Utah EHDI office at 801-584-8216 or 801-584-8215.
- For technical assistance on Hi*Track software, screening and equipment call the National Center for Hearing Assessment and Management (NCHAM) 435-797-3584