Date: March 26, 2020

To: Hospitals, clinics, newborn hearing screening and healthcare providers

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RE: Newborn Hearing Screening and COVID-19 Guidance

Please forward this guidance to primary care clinicians, pediatricians, nursery staff, NICU physicians, laboratory staff, audiologists, and all other health care providers who serve newborns and infants.

As you are all aware, businesses, individuals, and organizations around the world, including in the State of Utah, are proactively preparing and responding to the 2019 Novel Coronavirus (COVID-19).

The work of newborn hearing screening in Utah continues during the COVID-19 crisis. All obligations, laws, and Utah Department of Health policies regarding newborn hearing screening and all related follow-up remain in place.

- Reporting requirements should continue as usual (< 7 days of testing).
- Newborn hearing screening should be accomplished before discharge.
- If current hospital COVID-19 policies or concerns by the family prevent outpatient follow-up, CMV testing should be considered before discharge when an infant fails the inpatient hearing screening in order to meet the 21-day deadline for the detection of a congenital CMV infection.
- If the family is unable to return for timely follow-up, i.e., before 14 days of age for rescreening or before 3 months of age for diagnostic audiologic evaluation, the hospital should perform regular outreach with the family to facilitate follow-up as soon as possible. This outreach should be documented within HiTrack as a “COVID-19 Note”.

• It is the responsibility of the hospital newborn hearing screening program to track infants who have been unable to complete the early hearing detection and intervention (EHDI) process and ensure follow-up occurs.

To reduce the need for multiple visits during this temporary COVID-19 outbreak and to ensure timely EHDI milestones during this time, consider:

• Completing diagnostic audiological testing prior to hospital discharge for high-risk infants; and/or,
• Upon newborn hearing screening failure at outpatient rescreening, completing the diagnostic testing at that same visit.

Newborn hearing screening and its appropriate follow-up is considered an essential service and should be completed to the safest extent possible. National, state, local, and your hospital/clinic safety guidelines should be followed to protect all involved.

Resources

https://coronavirus.utah.gov/

We realize this is a challenging and stressful time. Please do not hesitate to reach out to the EHDI team if we can help.

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