

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 the 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
Newborn 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) 509-8132

www.ct.gov/dph/ehdi

Telecommunications Relay Service 7-1-1

*For more information about
services for babies who are deaf or hard of
hearing contact:*

Child Development Infoline

1-800-505-7000

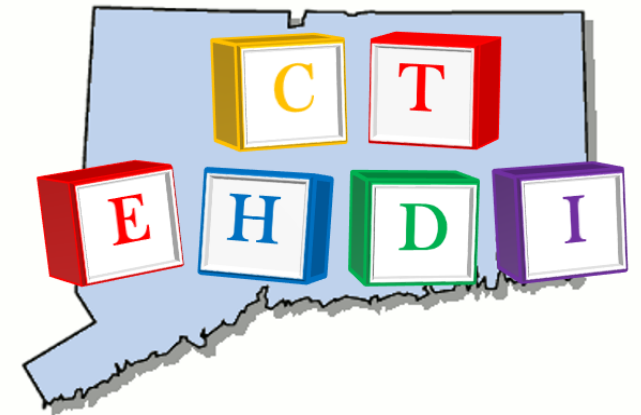
www.birth23.org

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Listen Up!

A Parent Guide to Newborn Hearing Screening



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Intervention (EHDI) Program**

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Newborn Hearing Screening

Why are babies given a screening at birth?

We screen because hearing loss is one of the most commonly occurring disabilities found in newborns. A hearing screening identifies babies who need additional testing to fully determine their ability to hear. Also, most babies with a hearing loss show no symptoms, which is why it's so important to have your baby's hearing screening completed by one month of age. The first three years of life are the most important for developing language and communication skills.

Is my baby at risk for hearing loss?

There are many risk factors that may contribute to hearing loss, such as NICU stay greater than five days; genetics; a family history of hearing loss; an infection in the mother while pregnant, like Cytomegalovirus (CMV); or others. If your baby has one of the above or other risk factors for hearing loss, your child's doctor or audiologist should suggest more frequent hearing checks. Also, some babies can pass the hearing screening at birth but could develop a hearing loss later on, especially if they have any risk factors.

How are babies screened?

One of two quick and painless methods are used to measure your baby's responses to sound.

What if my baby does not pass the screenings?

You should schedule an appointment with a **pediatric audiologist** (a person trained to test hearing on infants and children) as soon as possible. The nursery staff or your baby's doctor can assist you.

What if my baby has a hearing loss?

It is strongly recommended to enroll your baby in early hearing intervention services as soon as a hearing loss is diagnosed, but no later than six months of age. The **Connecticut Birth to Three System** can help families whose babies have hearing loss, including offering intervention services. Call 1-800-505-7000 or go to www.birth23.org to request a free evaluation. There are also parent organizations that can help: **Connecticut Hands and Voices** and **Guide By Your Side**. Both can be found at www.cthandsandvoices.org.

Speech, Hearing, and Behavior Checklist*

Birth - 3 Months

- Reacts to loud sounds.
- Calms down or smiles when spoken to.
- Recognizes your voice and calms 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 - 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 - 12 Months

- Enjoys playing peek-a-boo and pat-a-cake.
- 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" or "Want more?").
- 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.
- Imitates different speech sounds.
- Has one or two words ("Hi," "dog," "Dada," or "Mama") by first birthday.

1 - 2 Years

- Knows a few parts of the body and can point to them when asked.
- Follows simple commands ("Roll the ball") and understands simple questions, such as ("Where's your shoe?").
- Enjoys simple stories, songs, and rhymes.
- Points to pictures, when named, in books.
- Acquires new words on a regular basis.
- Uses some one- or two-word questions, such as ("Where kitty?" or "Go bye-bye?").
- Puts two words together ("More cookie").
- Uses many different consonant sounds at the beginning of words.

2 - 3 Years

- Has a word for almost everything.
- Uses two\three-word phrases to talk\ask.
- Uses k, g, f, t, d, and n sounds.
- Speaks in a way that is understood by family members and friends.
- Names objects to ask for them or to direct attention to them.

* The checklist is from: the National Institute on Deafness and Other Communication Disorders (www.nidcd.nih.gov).

Tips:

- If your baby needs to see an audiologist, obtain copies of the hearing screening results and CMV results from your baby's pediatrician and bring them to the audiology appointment.
- If your baby was born with a risk factor (like CMV or has a family history), schedule an appointment with a pediatric audiologist, even if your child passed the hearing screening. If you have concerns about what risk factors can cause a hearing loss after your baby is born, speak with your pediatrician.
- **Remember, a passing hearing result means that your baby's hearing is normal only at the time of the screening. A hearing loss could develop later for many reasons. Contact your doctor or audiologist with concerns.**