

APRIL, 2004

ADAMS COUNTY CHILD HEALTH NOTES

Promoting early identification and partnerships between families, primary health care providers & the community.

Distributed by: Adams County Interagency Coordinating Council (ICC) and Adams County Health Department
Contributors: Washington State Department of Health and UW – Center on Human Development & Disability



HEARING IMPAIRMENT IN EARLY CHILDHOOD

The current recommendation of the Joint Committee on Infant Hearing is Universal Newborn Hearing Screening. Screening of all newborns occurs in most states. Currently in Washington State, only newborns with identified risk indicators for hearing loss routinely receive hearing screenings, although an increasing number of hospitals are starting to screen all newborns.

"I'm glad we discovered her hearing loss so early. I'm concerned about her language developing, and the earlier she can develop sounds, the better."

The average age of identification of hearing loss for children not screened at birth is 18 - 24 months. Optimal age of identification is before 6 months.

WHAT MIGHT YOU DO IN YOUR OFFICE PRACTICE?

- Check each infant's hospital records for newborn hearing screening.
- Review the history for high-risk factors (see box below).
- Ask if the child is meeting appropriate hearing, speech, and language milestones.

Parent of a child identified by newborn hearing screening with a sensorineural hearing loss

REFERRAL TO A PEDIATRIC AUDIOLOGIST

- if a child presents with one or more risk indicators for hearing loss
- if a child has not achieved appropriate hearing milestones (e.g., not alerting to sounds at 4-6 months) or speech/language milestones. Children < 6 months should be referred for Brainstem Auditory Evoked Response and Otoacoustic Emissions Tests. Children > 6 months should be referred for a behavioral evaluation.

RISK INDICATORS FOR HEARING LOSS

1. Parent/caregiver concern regarding hearing, speech, language or developmental delay
2. Recurrent or persistent otitis media with effusion for at least 3 months
3. Family history of hereditary childhood sensorineural hearing loss
4. *In utero* infection: cytomegalovirus, rubella, syphilis, herpes, and toxoplasmosis
5. Craniofacial abnormalities incl. morphological abnormalities of the pinna and ear canal
6. Birthweight < 1500 g.
7. Hyperbilirubinemia at a serum level requiring exchange transfusion
8. Ototoxic medications used in multiple courses or used with loop diuretics
9. Bacterial meningitis
10. Apgar scores of 0-4 at 1 minute or 0-6 at 5 minutes
11. Mechanical ventilation lasting 5 days or longer
12. Stigmata associated with a syndrome known to include sensorineural or conductive hearing loss
13. Head trauma associated with loss of consciousness or skull fracture

CLINICS CONVENIENT TO ADAMS COUNTY THAT PROVIDE PEDIATRIC AUDIOLOGY TESTING/SERVICES

Richland – Columbia Basin Hearing Center	(509) 736-4005
Seattle—Pediatric Audiology Dept., University of Washington, Center on Human Development and Disability	(206) 685-4692
Seattle--Children's Hospital and Regional Medical Center: Audiology Dept. (To call Children's Hospital outside the Seattle area)	(206) 528-5173 (877) 528-2700
Yakima--Yakima Valley Hearing and Speech Center	(509) 453-8248
Spokane--Spokane Ear Nose Throat Clinic	(509) 624-2326
Wenatchee—Eye and Ear Clinic	(509) 663-8711 1-800-726-8808

INFORMATION AND RESOURCES

www.infanthearing.org

Universal Newborn Hearing Screening Resource Center

www.boystown.org/chlc/

Center for Hearing Loss in Children public information series from the Boys Town National Research Institute. Thorough information for professionals and parents regarding hearing testing, appropriate hearing and speech/language milestones, hearing loss and hearing aids.

www.agbell.org

Website for Alexander Graham Bell Association for the Deaf and Hard of Hearing. Includes information for parents of hearing-impaired children

University of Washington, Center on Human Development and Disability, Audiology Dept.

206-685-4692 fax 206-543-5771 email: لمانcl@u.washington.edu

PLEASE NOTE: *There will be a training offered on May 5, 2004 from 5 to 7 pm in the basement of Othello Community Hospital. Ann Curry of Seattle Children's Hospital who is the Coordinator of Family Conversations Early Intervention Program for Children who are Deaf or Hard of Hearing will be presenting. This training is targeted to those interested in learning more about recognizing signs of hearing problems and working with children who may have them. There is **STARS credit** pending for child care providers. Please note the enclosed invitation.*