

What to Do if Your Baby's Screening Reveals a Possible Hearing Problem

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Most new parents can't wait for the day when their child talks for the first time. When it finally happens, grandparents are telephoned, baby books are inked in with dates and times, and the computer's default sounds are replaced with the newly recorded cooing of "da-da." But in order for your baby's first words to be on schedule, you need to make sure that his or her hearing is OK.

About 2 or 3 out of every 1,000 children in the United States are born deaf or hard-of-hearing. Unfortunately, many of these children are not identified until after the age of two. This is long after what is called "the critical period"--the time when children begin to develop their speech and language skills.

A [hearing](#) screening lets you know if your child has a **possible** hearing problem. But in order to be sure, you must have your child's hearing fully tested. Like "heelstick" and immunization testing, a hearing screening is one important part of the complete set of services that you need to make sure that your baby is healthy and receiving the proper care. (See the NIDCD fact sheet [Has Your Baby's Hearing Been Screened?](#) for more information about hearing screenings.)

Remember, the hearing screening is only the first step. If a screening reveals that your child may have hearing loss, the next step is to schedule--and *keep*--an appointment for a follow-up examination with an [audiologist](#) (aw-dee-AH-luh-jist). An audiologist is a health professional who conducts a series of tests to determine whether your child has a hearing problem and, if so, the type and severity of that problem. To do so while your child is still an infant will help you make sure that he or she develops the necessary language skills to be successful--with family and friends, at school, on the job, and in all other life activities.

Why is a follow-up examination necessary?

A follow-up examination with an audiologist can help in many ways. Audiologists can identify the kind of hearing loss a child has and sometimes the cause. The audiologist also may recommend further medical attention, such as a visit to the [otolaryngologist](#) (OH-toh-LAYR-ehn-GAHL-oh-jist). An otolaryngologist is a physician specializing in ear, nose, and throat disorders who can determine the cause of a hearing loss as well as possible treatment options. If a hearing problem exists, the audiologist, otolaryngologist, pediatrician, or other professional who works with your child will point you to the various intervention services that can help you. The term *intervention* refers to the different steps that families can take to overcome communication barriers caused by a hearing loss. For example, you may be referred to a [speech-language pathologist](#) or a teacher who is experienced in working with deaf or hard-of-hearing children. You also may learn about special tools to help your child make use of what hearing she or he has as well as tips on how to best communicate with your child.

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When should I have the follow-up examination performed?

If your child did not pass the hearing screening, you should schedule the follow-up examination

immediately. The most important period in which a child learns language is during the first six months. If you suspect that your child has a hearing loss, you should schedule an appointment with an audiologist before your child reaches three months of age. Ask the hospital or facility staff who conducted your child's screening to provide you with contact information for one or more certified audiologists. They may be able to help you schedule an appointment. You also can obtain a list of certified audiologists from the following Web sites: American Speech-Language-Hearing Association at www.asha.org or American Academy of Audiology at www.audiology.org. By the time your child reaches six months of age, he or she should be receiving some form of intervention services.

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How can I help my child succeed if she or he has a hearing loss?

When intervention is introduced early, deaf and hard-of-hearing children can develop language skills that help them communicate freely and learn at the same rate as their hearing friends. Locate the services that are available in your community to help support your child. For example, the Individuals with Disabilities Education Act of 1997 (IDEA) ensures that all children with disabilities have access to the services they need to get a good education. In addition, Head Start and Early Head Start are federally funded programs that help young children in low-income families become better equipped to succeed in school.

Communicate with your child often. Keep informed about available intervention programs, and take part in all decisions regarding your child's progress. Remember: your child's hearing--like your child's overall health--is your responsibility. Acting responsibly can take many forms--from keeping an appointment for a hearing test, to learning sign language or strategies to support oral-auditory communication, to joining a support group, to making sure that your child's doctors and specialists have your most current contact information, especially if you've recently moved.

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What types of intervention services are available?

Many intervention options are available today. When your child uses more than one of these options, he or she has a better chance of understanding what others are saying, and of being understood.

Hearing Devices

A child with hearing loss can use various tools to communicate with the hearing and non-hearing world. One of the most common tools is the [hearing aid](#), a device worn in or behind the ear that helps make sounds louder to the wearer. Hearing aids have improved over the years and can be used for different degrees of hearing loss--from mild to moderate to severe. An audiologist can help you choose the best hearing aid for your child and make sure that it fits securely. Make sure you consult an audiologist who has experience with the special needs of infants and children. Some audiologists, called pediatric audiologists, specialize in treating children.

If your child has profound hearing loss and would not benefit from a hearing aid, your doctor may suggest a [cochlear](#) (*KOH-klee-uhr*) *implant*. The cochlear implant is an electronic device that changes sounds to electrical signals and carries them past the nonworking part of the inner ear to the brain. With training, children with cochlear implants can learn to recognize sounds and understand speech. Talk with an otolaryngologist who specializes in cochlear implants to determine if the cochlear implant is the right form of intervention for your child.

Language and Communication Considerations

Children who are deaf or hard-of-hearing can learn to communicate in a number of ways. All deaf or hard-of-hearing children living in the United States will need to learn English to communicate in writing. In addition, some families of deaf or hard-of-hearing children may choose to communicate manually using American Sign Language, a distinct language with its own grammar and syntax that uses hand signs and gestures, body movements, and facial expressions to represent words and phrases.

Other families may choose approaches that build upon the English language when communicating. Cued speech combines the natural lip movements of speech with hand shapes representing phonetic sounds, providing additional visual cues so that sounds such as "p" and "b" or "f" and "v" can be distinguished. Other families take an oral-auditory approach. Here, a child uses his or her natural hearing ability, along with lip reading and hearing devices, to enhance

speaking and listening skills. Because language development begins early, you should select the approach you feel is best, and interact with your child as much as possible. Ask your audiologist, otolaryngologist, or pediatrician for more information about the choices that are available.

Assistive Technological Devices

For older children and adults, other devices can help a child communicate within certain environments. The personal FM amplifier converts a classroom teacher's voice, spoken through a microphone, into radio waves that are transmitted to a receiver that the child wears. In addition, deaf and hard-of-hearing viewers can watch almost all televised programming using closed captions, thanks to a special decoder that is now built into most television sets. More and more movie theaters across the country offer closed [captioning](#) as well. Telecommunications relay services, which are available through all telephone companies, enable deaf and hard-of-hearing people to communicate on the phone. They can type in messages on a keyboard, and view return messages on a display screen, all through the help of a communications assistant, who translates between the two telephone parties.

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The follow-up exam revealed that my child's hearing is OK after all. Does that mean we don't need to check his hearing again?

Parents should interact often with a deaf or hard-of-hearing infant. All of the caregivers in your child's life should interact with him or her as much as possible. You can do this by holding, facing, smiling at, and responding to your infant from the very beginning. Children need love, encouragement, and care from their families and caregivers.

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What should I do if my baby's hearing hasn't been screened yet?

Many hospitals now screen all newborns for hearing loss, and many more will do so as statewide screening programs are put into place. Currently, however, some hospitals screen only those newborns who are considered most at risk, such as those with a family history of deafness or who are of low birthweight. If you do not know if your child's hearing was screened, call your child's pediatrician and ask to see a copy of your child's records, or find out how the information can be obtained. If your child's hearing has not been screened, ask your doctor how to make an appointment for a screening and then do so before your child is one month old. Publications such as the NIDCD fact sheet [Has Your Baby's Hearing Been Screened?](#) can provide you with more detailed information about hearing screenings. You also can ask your doctor for written information about the screening process.

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Follow-up Checklist for Parents:

Name of baby: _____

Birthday: ____/____/____

By one month of age:

- ☐ Make sure that your child's hearing has been screened either before you leave the hospital, or immediately afterward. If your child's hearing has been screened, find out the results. If it has not, schedule a screening before your child reaches one month of age.

By three months of age:

- ☐ If your child did not pass the hearing screening, schedule a follow-up appointment with a certified audiologist immediately. Ask your doctor for a list of certified audiologists in your area. Your doctor may be able to help you schedule an appointment. Or find a list of audiologists in your area by visiting the following Web sites: American Speech-Language-Hearing Association at www.asha.org or American Academy of Audiology at www.audiology.org.
- ☐ If you must cancel the follow-up appointment, reschedule! **Make sure you take your child to a follow-up examination before she or he reaches three months of age.**

By six months of age:

- ☐ Start your child in some form of intervention by six months of age. Intervention can include hearing devices, such as hearing aids or cochlear implants; communication methods, including oral approaches such as lip reading, or manual approaches such as American Sign Language; or a combination of options, including assistive devices. Ask your pediatrician, otolaryngologist, or speech-language pathologist about the range of options that are available to you. Find a list of otolaryngologists in your area by visiting the American Academy of Otolaryngology-Head and Neck Surgery Web site at www.entnet.org; find a speech-language pathologist at the American Speech-Language-Hearing Association Web site at www.asha.org.

Ongoing:

- ☐ Remain active and involved in your child's progress.
- ☐ If you move, make sure that your child's doctors and specialists have your new address.
- ☐ Even if your child passed the follow-up examination, schedule periodic hearing tests, such as before your child begins school or if he or she shows signs of hearing loss.

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Where can I learn more?

Alexander Graham Bell Association for the Deaf and Hard of Hearing (AG Bell)

3417 Volta Place, NW
Washington, DC 20007-2778
Voice: (202) 337-5220
Toll-free Voice: (866) 337-5220
TTY: (202) 337-5221
Fax: (202) 337-8314
E-mail: info@agbell.org
Internet: www.agbell.org

American Academy of Audiology (AAA)

11730 Plaza America Drive, Suite 300
Reston, VA 20190
Voice: (703) 790-8466
Toll-free Voice: (800) 222-2336
TTY: (703) 790-8466
Fax: (703) 790-8631
E-mail: info@audiology.org
Internet: www.audiology.org

American Academy of Otolaryngology-Head and Neck Surgery (AAO-HNS)

One Prince Street
Alexandria, VA 22314-3357
Voice: (703) 836-4444
TTY: (703) 519-1585
Fax: (703) 683-5100
E-mail: webmaster@entnet.org
Internet: www.entnet.org

American Society for Deaf Children (ASDC)

3820 Hartzdale Drive
Camp Hill, PA 17011
Voice: (717) 703-0073
Toll-free Voice: (866) 895-4206
TTY: (717) 703-0073
E-mail: ASDC4U@aol.com
Internet: www.deafchildren.org

American Speech-Language-Hearing Association (ASHA)

10801 Rockville Pike
Rockville, MD 20852
Voice: (301) 897-5700

Toll-free Voice: (800) 638-8255
TTY: (301) 897-0157
Fax: (301) 571-0457
E-mail: actioncenter@asha.org
Internet: www.asha.org

**BEGINNINGS for Parents of Children Who Are Deaf or Hard of Hearing, Inc.
(BEGINNINGS)**

P.O. Box 17646
Raleigh, NC 27619
Voice: (919) 850-2746
Toll-free Voice: (800) 541-4327 (In-state only)
TTY: (919) 850-2746
Fax: (919) 850-2804
E-mail: info@ncbegin.org
Internet: www.ncbegin.org

Boys Town National Research Hospital (BTNRH)

555 North 30th Street
Omaha, NE 68131
Voice: (402) 498-6511
TTY: (402) 498-6543
Fax: (402) 452-5027
E-mail: moeller@boystown.org
Internet: www.boystownhospital.org/Hearing/index.asp/ www.babyhearing.org

**Conference of Educational Administrators of Schools and Programs for the Deaf
(CEASD)**

P.O. Box 1778
St. Augustine, FL 32085-1778
Voice: (904) 810-5200
TTY: (904) 810-5200
Fax: (904) 810-5525
E-mail: nationaloffice@ceasd.org
Internet: www.ceasd.org

Council on Education of the Deaf (CED)

P.O. Box 2094, 800 Florida Avenue, NE, Gallaudet University
Washington, DC 20002
Fax: (202) 651-5749
E-mail: roz.rosen@gallaudet.edu
Internet: www.deafed.net

Deafness Research Foundation (DRF)

2801 M Street, NW
Washington, DC 20007
Voice: (202) 719-8088
Toll-free Voice: (866) 454-3924
Toll-Free TTY: (888) 435-6104
Fax: (202) 338-8182
E-mail: info@drf.org
Internet: www.drf.org

National Association of the Deaf (NAD)

814 Thayer Avenue, Suite 250
Silver Spring, MD 20910-4500
Voice: (301) 587-1788
TTY: (301) 587-1789
Fax: (301) 587-1791
E-mail: nadinfo@nad.org
Internet: www.nad.org

National Black Association for Speech-Language and Hearing (NBASLH)

P.O. Box 61328
Charleston, SC 29419
Voice: (843) 574-6441

Fax: (843) 820-5026
E-mail: [nbash2@aol.com](mailto:nbaslh2@aol.com)
Internet: www.nbaslh.org

**Clearinghouse on Disability Information, Office of Special Education and
Rehabilitative Services (OSERS)**

550 12th Street, SW, Room 5133
Washington, DC 20004
Voice: (202) 245-7303
TTY: (202) 205-5637
Fax: (202) 245-7636
Internet: www.ed.gov/about/offices/list/osers/index.html

**Office of Special Education Programs (OSEP), Office of Special Education and
Rehabilitative Services (OSERS)**

550 12th Street, SW, Room 4109
Washington, DC 20202-2600
Voice: (202) 245-7426
Fax: (202) 245-7616
Internet: www.ed.gov/about/offices/list/osers/osep/index.html

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For more information, contact the [NIDCD Information Clearinghouse](#).

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