

Audiologic diagnostic appointments: Risk factor algorithm for birth hospitals

For infants who pass the newborn hearing screen, but have any of the following risk factors for reduced hearing:

TIER 1*

Schedule diagnostic evaluation immediately in the event of:

- Bacterial meningitis
- Congenital cytomegalovirus (cCMV) infection
- Parental or medical provider concern

Schedule evaluation by 1 month of age in the event of:

- History of maternal in utero Zika infection and screening via otoacoustic emissions methodology only

Schedule evaluation by 3 months of age in the event of:

- Aminoglycoside administration for more than 5 days
- Chemotherapy
- Cleft lip/palate
- Craniofacial anomalies (e.g. microtia/atresia)
- Down Syndrome
- ECMO
- Hyperbilirubinemia with exchange transfusion
- Perinatal asphyxia or hypoxic ischemic encephalopathy
- Permanent childhood hearing loss in immediate family (infant's parents or siblings)
- Positive diagnosis of infection associated with reduced hearing (e.g. herpes, rubella, syphilis, toxoplasmosis, viral meningitis, encephalitis)
- Significant head trauma especially basal skull/temporal bone fractures
- Syndromes associated with reduced hearing (e.g. CHARGE, Treacher Collins, Pierre Robin)

TIER 2*

Recommend behavioral audiologic diagnostic evaluation to occur at 9 months of age (corrected age) in the event of:

- ≥ 10 days mechanical ventilation
- ≤ 32 weeks gestational age
- ≤ 1500 grams birthweight
- Ear pits and/or preauricular tags
- History of maternal in utero infection (e.g. herpes, rubella, syphilis, toxoplasmosis)
- History of maternal in utero Zika infection and screening via ABR methodology
- Permanent childhood hearing loss in extended family

***NOTIFY FAMILY AND PEDIATRICIAN IN ALL CASES**



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