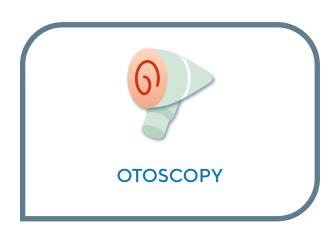
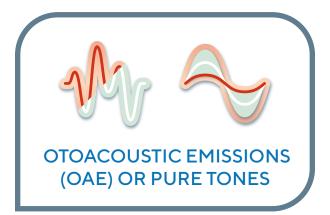
WYOMING EARLY HEARING DETECTION AND INTERVENTION (EHDI) PROGRAM

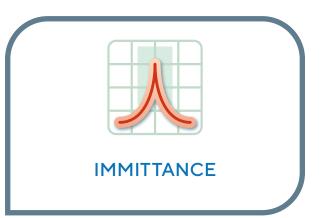
Recommendation and Referral Cheat Sheet for **Initial** Hearing Screening and Hearing **Rescreening** Results



A hearing screening/rescreening must include all ears and all three of the screening components below:







If otoscopy reveals a foreign object in an ear, stop the screening and use reccommendation #4. In all other circumstances proceed with the screening.

The table below summarizes what the recommendation and referral should be based on pass/fail results of both *initial* hearing screenings and hearing *rescreenings*.



<i>Initial</i> Hearing Screening Results			Immittance			
			Pass	6	Fail	(S) *
OAE or Pure Tones	. Pass	6	1 or 2		3	
	' Fail	(A)	3		3	



Hearing <i>Rescreening</i> Results			Immittance				
			Pass	(a)	Fail	(S) x	
OAE or Pure Tones		Pass	6	1 or 2		4 or 5	
		Fail	(S)	6		4 or 5	

RECOMMENDATIONS AND REFERRALS:







- 1: Rescreen in 12 months unless concerns arise or a change in hearing is noted. Hearing levels appear adequate for speech/language development at this time.
- 2: Rescreen in 3 months to monitor pressure equalization (PE) tubes. Hearing levels appear adequate for speech/language development at this time.
- 3: Rescreen in 4-6 weeks.
- 4: Refer to Primary Care Physician (PCP) and rescreen in 4-6 weeks.
- 5: Refer to Ear Nose and Throat (ENT) physician and rescreen in 4-6 weeks.
- 6: Refer to Audiologist and rescreen in 4-6 weeks.

OAE screening is for children birth to 3 years-old; pure tone screening is for children greater than 3 years-old if they are developmentally able to be conditioned to the task.

Immittance screening is for children 9 months of age or older.

Children with a known hearing loss should be screened with otoscopy and immittance to monitor middle ear health.

Children with PE tubes should be screened with otoscopy, OAE/pure tones, and immittance every 3 months (use #2 above).

