

“ There are many more options for the effective treatment of children with hearing loss today than there have been in the past. But the **first and most important part** of the process for these children is to **diagnose their hearing loss early.**”

—John P. Little, M.D.
Pediatric Otolaryngology-Head & Neck Surgery, PLLC
Director, Pediatric Cochlear Implant Program at
Children’s Hospital Knoxville

“ The earlier I can confirm a hearing loss, the faster I can get children the resources they need to hear the world around them. Today’s sophisticated hearing technology makes it **easy to test** children of all ages—even infants.”

—Laura Mutchler, Au.D.
Audiologist, Baptist Memorial Hospital, Memphis



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To Learn More About...

Newborn Hearing:

Tennessee Newborn Hearing Screening
State of Tennessee Department of
Health 855-202-1357 or 615-532-8462
<http://tn.gov/health/topic/MCH-nbh>

Newborn Hearing Follow-Up Questions:

The University of Tennessee Center on Deafness
Newborn Hearing Follow-Up Program
866-961-2397
<http://centerondeafness.utk.edu/newborn/>

Early Intervention:

Tennessee Early Intervention System (TEIS)
800-852-7157
<http://www.tn.gov/education/teis>

Family Support:

Family Voices of Tennessee
888-643-7811
<http://www.tndisability.org/familyvoices/>

Hearing Loss in Children:

<http://www.communicatewithyourchild.org>
<http://www.infantheating.org>
<http://www.babyhearing.org>
<http://www.cdc.gov/ncbddd/ehdi>
<http://www.ncbegin.org>
<http://www.raisingdeafkids.org>

Beyond a Hearing Screen—What Next?



EMILY BUTLER

THE UNIVERSITY of TENNESSEE 
KNOXVILLE
CENTER ON DEAFNESS

No child is too
young to test.



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Why is my baby being referred for further testing?

Your baby's hearing screening results have indicated that additional testing is necessary. Many babies who do not pass the hospital screening are found to have normal hearing. Some babies, however, are found to have a permanent hearing loss in one or both ears. Without additional testing, hearing loss might be present and go undetected for years. Hearing loss can have a significant impact on communication development. Babies who receive the earliest diagnosis and treatment for hearing loss have the best chance of developing communication skills more like that of their peers who have normal hearing.



What do I do next?

Your baby's physician or a hospital staff member can help you make an appointment with a pediatric audiologist who can perform special tests to determine if your baby has hearing loss. These tests are accurate and will not hurt your baby. Most babies sleep through the entire test. It is very important to schedule this appointment as soon as possible. Tennessee's Newborn Hearing Screening Program strongly encourages parents to have these tests performed before your baby is 3 months old.

What are some causes of hearing loss in children?

Many parents are very surprised to learn that their baby has been referred for more hearing tests. Permanent hearing loss occurs in approximately 2 to 3 babies per 1,000 births. Many babies with hearing loss do not have a family history. Causes may include heredity, viruses, medications that

are harmful to hearing, fluid in the ears, debris in the ear canals, or infection. Some types of hearing loss are temporary and can be medically treated. Other types are permanent. Hearing loss can be in one or both ears and can vary from mild to profound.

What can I expect if my baby has a hearing loss?

Medical management

If the pediatric audiologist determines your baby has a hearing loss, you should be referred to an ear specialist called an otolaryngologist—also known as an ear, nose, and throat (ENT) physician. This doctor will help you learn more about the cause of and possible treatments for your baby's hearing loss.

Early intervention

If your baby is identified with a hearing loss, he or she will be referred for early intervention services. Early intervention professionals can provide you with activities to work on at home. In Tennessee, these services are provided at no cost to families for all babies who have any degree or type of hearing loss until the child is 3 years old, even babies with hearing loss in one ear.

Family support

Families of a baby newly identified with hearing loss should be referred for parent-to-parent support services. You will be connected to other parents who also have a child (or children) with hearing loss. They can provide emotional support as well as information about local resources for children who have hearing loss.

Continued hearing care

Babies and children who are deaf or hard-of-hearing need to see a pediatric audiologist and their ENT doctor on a regular basis. There may be changes in hearing even after the loss is first identified. Parents should look for changes in their baby's hearing behaviors and immediately tell their physician(s) or audiologist of any concerns.

*“ We were so surprised when our little girl didn't pass the hospital hearing screen. No one in our family had a hearing loss, and she was a healthy baby. We were told to act fast and take her to an audiologist for testing. She was identified with a moderate loss in both ears. That same day at the clinic, they also tested my son and we found out he has a hearing loss too. My advice to all parents would be to **act fast.**”*

—Kim, mother of two children with hearing loss, Madisonville

Communication opportunities

If your baby has a hearing loss, you may work with several professionals who have information about communicating with your baby. Audiologists, ENT doctors, speech-language pathologists, early intervention providers, and educators of the deaf are all specialists who can help you learn more about the communication opportunities that are available to your baby. Some optional modes of communication are American Sign Language, Listening and Spoken Language (sometimes called Auditory-Oral or Auditory-Verbal), Cued Speech, or Total Communication. For more information on these and other options, see the list of web sites on the back of this brochure.