

Rhode Island Early Hearing Detection and Intervention

BABIES IN THE NEONATAL INTENSIVE CARE UNIT (NICU)

As a parent or guardian, you are the most important person helping to care for your baby's hearing and development. FINDING HEARING LOSS IN INFANTS IS URGENT

The earlier hearing loss is found, the sooner your baby will get help.

Early Intervention helps babies with hearing loss avoid language delays.



HEARING SCREEN

All babies should have their hearing screened or have a scheduled appointment before leaving the hospital. If your baby **passes** the hearing screen: >> Watch how your baby communicates and learns.

If your baby has risk factors (page 5) for hearing loss, at least one hearing test is recommended between 7 and 30 months (2½ years) of age.

- >> The Rhode Island Early Hearing Detection and Intervention (RIEHDI) will provide information to help you set up this appointment.
- >> Talk with your child's **primary care doctor** if you have questions or concerns.

For questions or concerns regarding newborn hearing screening, please call RIEHDI:

>> 401-277-3700

In the Hospital (pass)



HEARING SCREEN

If your baby **does not pass** the hearing screen:

- >> The hospital audiologist (hearing specialist) or pediatrician discusses results with you and the hospital doctors.
- A full hearing test with a Pediatric Audiologist (hearing specialist for children) is needed as soon as possible.
 The doctor may arrange a full hearing test before your baby goes home.

If your baby goes home without a full hearing test, a Rhode Island Early Hearing Detection and Intervention audiologist will contact you to help schedule an appointment with a Pediatric Audiologist of your choice.

For questions or concerns regarding newborn hearing screening, please call RIEHDI:

>> 401-277-3700

In the Hospital (doesn't pass) 2

FULL HEARING TEST

If your baby **does not have** hearing loss:

>> Watch how your baby

communicates and learns.

If your baby has risk factors (page 5) for hearing loss, at least one hearing test is recommended between 7 and 30 months (2½ years) of age.

- >> Rhode Island Early Hearing Detection and Intervention will provide information to help you set up this appointment.
- >> Talk with your child's primary care doctor if you have questions or concerns.

If your baby has hearing loss:

A Pediatric Audiologist:

- >> Counsels you about results and may recommend another full hearing test.
- >> Introduces communication options,

hearing aids, cochlear implants, and funding sources.

- >> Recommends an ear, nose, and throat (ENT) evaluation.
- >> Schedules further testing and provides ongoing counseling and care.
- » Gives information about programs for children with hearing loss and refers you to Early Intervention Programs (see page 6 for details).
- >> Sends results and recommendations to your child's primary care doctor.

A **primary care doctor** examines your baby and refers your baby to an Ear, Nose, and Throat (ENT) doctor for an evaluation.

An ENT doctor examines your baby, recommends treatment, and may do a **Computed Tomography (CT) scan** or **Magnetic Resonance Imaging (MRI)** scan and provides medical clearance.

Before or Soon after Discharge 3

CONTINUED EDUCATION AND SUPPORT

PROGRAMS FOR AGES 0-3 YEARS

(see page 6 for phone numbers)

Early Intervention services:

>> Offer ongoing visits in your home to provide information, support, and services. Help you develop a plan of action, called an Individual Family Service Plan (IFSP), to address your baby's needs.

HEARING HEALTHCARE

A Pediatric Audiologist could provide:

- >> Hearing aids and/or FM hearing systems.
- >> Cochlear implants.
- >> Further testing, counseling, and ongoing care.

Your doctor may refer you to a specialist, who will provide special medical checkups.

All children with hearing loss should see:

- >> Otolaryngologist (ear, nose, and throat doctor)
- >> Ophthalmologist (eye doctor)
- >> Genetic specialist

Some children may need to see:

- >> Cardiologist (heart doctor)
- >> Nephrologist (kidney doctor)

Before Six Months



RISK FACTORS FOR HEARING LOSS

If your baby has risk factors for hearing loss, at least one hearing test is recommended between 7 and 30 months (2½ years) of age.

Risk factors can include:

- >> Family history of hearing loss in childhood.
- >> Head, face, or ears that are shaped or formed in a different way than usual

(including ear tags, ear pits, cleft lip, and/or cleft palate).

- >> Medical condition associated with hearing loss (check with your healthcare provider and/or RIEHDI).
- >> Jaundice (high bilirubin level) that needed treatment with a blood transfusion.
- >> Exposure to certain infections in the uterus/womb.
- >> More than five days in the Neonatal Intensive Care Unit (NICU).
- >> Infection around the brain and spinal cord caused by bacteria (bacterial meningitis).
- Severe injury to the head (temporal bones) that needed medical care.
- >> Ear infections with fluid that last three months or longer.
- >> Low birth weight
- » Any worry you have about your child's hearing or speech.

As Your Baby Grows

CONTINUED EDUCATION AND SUPPORT, PROGRAMS FOR AGES 0-3 YEARS

EARLY INTERVENTION PROGRAM

Services and care coordination for children with all special healthcare needs.

Family Service of Rhode Island Providence, 401-519-2307 Referral Line: 401-519-2308 Looking Upwards Portsmouth, 401-293-5790 Referral Line: 401-293-5796

Meeting Street Providence, 401-533-9100 Referral Line: 401-533-9104

Seven Hills Cranston, 401-921-1470 Referral Line: 401-709-7207

RHODE ISLAND PARENT INFORMATION NETWORK (RIPIN) 401-270-0101

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Auditory Brainstem Response (ABR) A test that gives information about the inner ear (cochlea) and brain pathways for hearing. The test can be used with children who have a difficult time with standard methods of hearing screening.

Cochlear Implant An inner ear implant. This small electronic device can help to provide a sense of sound to a person who is profoundly deaf or severely hard-of-hearing.

Computed Tomography (CT) Scan A CT scan uses X-rays to make detailed pictures of structures inside of the body.

Early Intervention (EI) RI's Early Intervention Program promotes the growth and development of infants and toddlers who have a developmental disability or delay in one or more areas. Developmental disabilities or delays can affect a child's speech, physical ability, or social skills.

FM Hearing System An FM system is a device that helps a person who is hard-of-hearing to hear. FM systems send sound from a microphone used by the person speaking to a baby wearing the device.

Genetic Specialist A doctor with special training in genetics. In addition to educating families about genetic conditions, they perform clinical exams and order lab tests to diagnose genetic causes of hearing loss and other genetic conditions. Individual Family Service Plan (IFSP) An IFSP is a plan made for children who are deaf or hard-ofhearing. This plan is made by a child's parents and a service coordinator. The plan outlines all of the intervention services and equipment that a family and child will need for the child and his or her hearing loss.

Magnetic Resonance Imaging (MRI) A test that uses a magnetic field and pulses of radio wave energy to make pictures of organs and structures inside the body. An MRI also may show problems that cannot be seen with other imaging methods.

Nephrologist A doctor who has been trained in the diagnosis and management of kidney disease.

Ophthalmologist An eye doctor

Otolaryngologist An ear, nose, and throat (ENT) doctor

Pediatric Audiologist An expert who is trained to test your baby's hearing. An audiologist who works with children is a pediatric audiologist.

Primary Care Doctor A doctor who manages the physical, mental, and emotional well-being of patients (children) in every stage of development.

Temporal Bones Bones on each side of the skull that enclose the middle and inner ear.

Glossary of Terms

RIEHD Rhode Island Early Hearing Detection and Intervention

134 Thurbers Avenue, Suite 215 Providence, RI 02905 401-277-3700 voice



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