

Risk Assessment and Hearing History

Ages

One month through 20 years

Purpose

To assess risk factors for lost to follow-up, delayed onset, progressive and acquired hearing loss

Equipment

Child and Family Hearing History and *JCIH Risk Assessment, Early Childhood Screening Hearing Worksheet, School Hearing Worksheet, or other documentation form.

Procedure

Review the following:

For infants newborn to one month of age or any initial C&TC visit of a child up when the child can reliably be screened with pure tone audiometry typically at three to four years of age:

- Universal newborn hearing screening is required for all newborns by one month of age using either otoacoustic emissions (OAE) or auditory brainstem response (ABR) technology.
- If an infant did not receive newborn hearing screening, it is recommended that an objective screening, OAE or ABR as appropriate, be performed as soon as this gap in screening is identified.
- Review: <u>Child and Family Hearing History and *JCIH Risk Assessment</u> (<u>www.health.state.mn.us</u>).

For all children:

- Review as indicated by parental concern: JCIH Postnatal Risk Indicators and observed complaints and behaviors
- Monitor developmental milestones and caregiver concern. This is especially important until
 pure tone audiometry screening can be performed, typically at three to four years of age.

For youth 11 through 20 years, review <u>Indicators of Noise Induced Hearing Loss</u> (www.health.state.mn.us).

Minnesota Department of Health Child and Teen Checkups 651-201-3650 health.childteencheckups@state.mn.us www.health.state.mn.us 11/2023

To obtain this information in a different format, call: 651-201-3650.