Below are scripts to assist hospitals in communicating about the newborn hearing screen, as well as the results. It is best you communicate to the parents that you will be performing a hearing screen during their stay. Give them option of observing the screen being performed and provide them with the Iowa Newborn Screening Program brochure that talks to them about the screen and its importance.

*By law, hospitals are not required to receive permission to perform the newborn hearing screening; it is a standard of care. However, it is still best practice to tell parents about the screening and why it is important.*

If you don’t feel you know enough about newborn hearing screening, its importance and the need to stress follow up, please visit the National Center for Hearing Assessment and Management’s web page. They have a newborn hearing screening training curriculum you can access online, [http://www.infanthearing.org/screening/index.html](http://www.infanthearing.org/screening/index.html). The training curriculum is broken into short modules so you can watch them one at time. You can also get a certificate for completing the training module if you choose.

**Birth Screen Results Scripts**

**Missed**

Congratulations on the birth of your baby! We were unable to provide a newborn hearing screen during your hospital stay. It is important that your baby be screened while he or she is a newborn to identify hearing loss as soon as possible. Let’s schedule a time for the screening to be completed within the next week. *(Assist the family in scheduling the appointment at the hospital, AEA or local audiology provider so they walk out of the hospital with the appointment date and time. This reinforces the importance of the screen.)*

**Declined Screen**

Congratulations on the birth of your baby! If you don’t mind, I would still like to leave you with something to read that explains the benefits and importance of screening your baby’s hearing. Approximately 95% of babies born with hearing loss are born to hearing parents, including mothers with normal pregnancies. If you change your mind and decide you do want the hearing screen for your baby, you can let me or your baby’s attending physician or nurse know and we will be happy to assist you. If you decide to have the screen performed after you leave the hospital, there is a toll free phone number in the Iowa Newborn Screening Program brochure that you can call for assistance in locating a provider nearest you. *(Please have the parents complete the refusal form on the EHDl website at [http://www.idph.iowa.gov/ehdi/forms](http://www.idph.iowa.gov/ehdi/forms) sign and date it prior to hospital discharge. Keep the original for your medical records, upload a PDF copy into that child’s record in the EHDl database and provide the family with their own copy of the form).*
**Inconclusive Screen**

Congratulations on the birth of your baby! We’ve attempted to screen your baby’s hearing but we not able to complete the screen. Some babies need to be screened more than once to get an accurate result. We will be back in a few hours or closer to discharge to perform the hearing screening on your baby.

**Bilateral Pass**

Congratulations on the birth of your baby! We just completed the hearing screen; the results are a pass. The screening indicates how your baby is hearing on the day of the screen and does not predict how they will hear in the future. It is always important to monitor the progress of your baby’s development and especially their speech and language. If you are ever worried that your baby can’t hear, talk to your baby’s doctor right away for a referral to an audiologist skilled in testing infants and young children. Here is your copy of the hearing screen results for you to keep. We will also share the results of the hearing screen with your baby’s primary care provider.

**Bilateral Pass with Risk Factors for Hearing Loss**

Congratulations on the birth of your baby! We just completed the hearing screen; the results are a pass. The screening indicates how your baby is hearing on the day of the screen and does not predict how they will hear in the future. Here is your copy of the hearing screen results for you to keep. We will also share the results of the hearing screen with your baby’s primary care provider.

Because your baby had some complications or relevant family history at birth, your baby is at greater risk for hearing loss. It is always important to monitor the progress of your baby’s development and especially their speech and language. In the coming months, you and your child’s primary care provider will receive a letter from the Newborn Hearing Screening Program that will outline when your child should be seen again for a follow up hearing screen. If you are ever worried that your baby can’t hear, talk to your baby’s provider right away for a referral to an audiologist skilled in testing infants and young children.

**Not Pass**

Congratulations on the birth of your baby! We just finished your baby’s hearing screen and your baby did not pass the screen today. This does not necessarily mean that your baby has a permanent hearing loss, but without additional testing we can’t be sure. We are going to assist you in scheduling a repeat hearing screen in one to two weeks. (Assist the family in scheduling the appointment at the hospital, AEA or local audiology provider so they walk out of the hospital with the appointment date and time. This reinforces the importance of the follow up hearing screen.) Here is your copy of the hearing screen results for you to keep, as well as an appointment reminder for the outpatient screen. We will also share the results of the hearing screen with your baby’s primary care provider.
Outpatient Screen Results Scripts

Bilateral Pass

The hearing screen is complete and the results are a pass. The screening indicates how your baby is hearing on the day of the screen and does not predict how they will hear in the future. It is always important to monitor the progress of your baby’s development and especially their speech and language. If you are ever worried that your baby can’t hear, talk to your baby’s doctor right away for a referral to an audiologist skilled in testing infants and young children. Here is your copy of hearing screen results for you to keep. We will also share the results of the hearing screen with your baby’s primary care provider.

Bilateral Pass with Risk Factors for Hearing Loss

Because your baby had some complications or relevant family history at birth, your baby is at greater risk for hearing loss. It is always important to monitor the progress of your baby’s development and especially their speech and language. In the coming months, you and your child’s primary care provider will receive a letter from the newborn hearing screening program that will outline when your child should be seen again for a follow up hearing screen. If you are ever worried that your baby can’t hear, talk to your baby’s provider right away for a referral to an audiologist skilled in testing infants and young children.

Not Passing

Your baby did not pass the outpatient hearing re-screen today. There can be simple reasons for this but without further diagnostic testing; I cannot tell you what your baby hears today. Further testing needs to be completed as soon as possible. The Joint Committee on Infant Hearing recommends diagnostic testing be completed no later than three months of age for the best possible outcomes. It is important to find out about hearing issues as early as possible to ensure your baby has the best change of developing normal language and communication skills or is treated for middle ear issues. Here is your copy of the hearing screen results from today’s appointment for you to keep and a copy of pediatric audiology providers available in the state that can perform diagnostic testing for your baby. I will send a copy of today’s hearing screen results to your baby’s primary care provider to assist in this process as insurance typically require a direct referral from the baby’s provider. I encourage you to talk to your baby’s primary care provider about the referral as soon as possible as babies tested before three months can typically avoid sedation. Although you may not be able to assist the family in scheduling the assessment as most insurance now require a referral from the child’s primary care provider, the family will have information about the providers.
that offer the testing, the recommended time frame to complete testing and the encouragement to talk to their baby’s provider about the referral. This reinforces the importance of the need for a diagnostic assessment. To find a list of diagnostic centers, please visit the Iowa EHDI website at http://www.idph.iowa.gov/ehdi/provider.

What NOT to tell Parents

- **Fluid in the ear caused the baby to fail the hearing screen.** It may be the reason, but we don’t know that for sure and it minimizes the importance of returning for the follow up.

- **This happens all the time, don’t worry.** This minimizes the importance of returning for the follow up.

- **The equipment wasn’t working right.** This suggests that we are not able to keep the equipment in working order.

- **The baby was too fussy and I couldn’t get a good test.** This suggests that you are not very good at doing what you need to do to get a baby tested.

- **Your baby has a hearing loss.** This is only a screening, meaning that we need to test the baby again. The only thing we know for sure is that baby didn’t pass at this time.