



STATE OF ALABAMA DEPARTMENT OF
PUBLIC HEALTH

Donald E. Williamson, MD
State Health Officer

November 4, 2008

Dear Health Care Provider,

On January 21, 2008, the Alabama State Board of Health Administrative Code, Chapter 420-10-1, "Care and Treatment of Infants Identified through the Newborn Screening Program," was amended. Among other requirements, this amendment mandates all hospitals which perform infant deliveries to screen all newborns for hearing loss prior to discharge. To reduce the risk that an infant might miss the opportunity for an initial hearing screening, or miss a follow-up hearing diagnostic evaluation after a positive hearing screen, or even miss the provision of early intervention services if permanent hearing loss is diagnosed, the amendment also requires that these hearing results be reported to the Alabama Department of Public Health.

As a result of this mandate, the Alabama Newborn Hearing Screening Program, *Alabama's Listening*, has revised the guidelines for the program. The new guidelines require participants to follow the principles outlined in the Joint Committee on Infant Hearing (JCIH) 2007 Position Statement.* The 2007 guidelines were developed to support the goals of the Universal Hearing Screening, Evaluation, and Intervention for Newborns program as embodied in the objectives set forth in the national health program, Healthy People 2010. These guidelines provide current information on the implementation of successful Early Hearing Detection and Intervention (EHDI) systems.

The guidelines for the State of Alabama hearing screening mandate will now include the following:

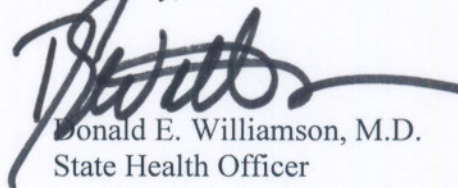
1. All newborns will receive a hearing screening prior to discharge.
2. Screening of infants in the well-baby nurseries may be screened via OAE or AABR. All infants who do not pass this screening for both ears will be scheduled, prior to discharge, for a follow-up screening. Follow-up screening shall include both ears (regardless if only one ear referred on the initial screening), within one month after discharge.
3. NICU infants admitted for > 5 days are to have AABR screening so that neural hearing loss will not be missed. All infants who do not pass the AABR screening in the NICU will be scheduled for follow-up evaluation with an audiologist, prior to discharge.** Follow-up diagnostic testing shall be accomplished within three months after discharge.

Health Care Provider
November 4, 2008
Page Two

4. The birthing hospital will convey the hearing screening results to the parents, medical home, and state newborn screening program. This includes information on infants who meet any of the risk factors associated with late onset hearing loss.
5. All infants not screened prior to discharge must be scheduled for outpatient screening by the birthing facility. Outpatient hearing screening shall be accomplished within one month.

Please contact Bob Hinds at 334-206-5556 or bhinds@adph.state.al.us if you have any questions regarding this new mandate. Thank you for your tireless efforts on behalf of Alabama's infants. With your continuing support this new mandate will provide even better health care for our most precious state resource.

Sincerely,



Donald E. Williamson, M.D.
State Health Officer

* For a complete copy of the JCIH 2007 Position Statement, please go to www.adph.org/newbornscreening and click on *Alabama's Listening*.

** Physiologic measure must be used to screen newborns for hearing loss which include OAE (otoacoustic emissions) and AABR (automated auditory brainstem response). OAE measurements reflect the status of the auditory system extending to the cochlear outer hair cells (sensory hearing). AABR testing reflects the status of the peripheral auditory system, eighth nerve and brainstem auditory pathways and thus identifies babies with neural hearing loss (neuropathy/dyssynchrony).