

# WYOMING EARLY HEARING DETECTION AND INTERVENTION (EHDI) PROGRAM

## Recommendation and Referral Cheat Sheet for Initial Hearing Screening and Hearing Rescreening Results



A hearing screening/rescreening must include all ears and all three of the screening components below:

OTOSCOPY

OTOACOUSTIC EMISSIONS (OAE) OR PURE TONES

IMMITTANCE

If otoscopy reveals a foreign object in an ear, stop the screening and use recommendation #4. In all other circumstances proceed with the screening.

The table below summarizes what the recommendation and referral should be based on pass/fail results of both *initial* hearing screenings and hearing *rescreenings*.



Initial Hearing Screening Results		Immittance	
		Pass	Fail
OAE or Pure Tones	Pass	1 or 2	3
	Fail	3	3



Hearing Rescreening Results		Immittance	
		Pass	Fail
OAE or Pure Tones	Pass	1 or 2	4 or 5
	Fail	6	4 or 5

**RECOMMENDATIONS AND REFERRALS:**

- 1: Rescreen in 12 months unless concerns arise or a change in hearing is noted. Hearing levels appear adequate for speech/language development at this time.
- 2: Rescreen in 3 months to monitor pressure equalization (PE) tubes. Hearing levels appear adequate for speech/language development at this time.
- 3: Rescreen in 4-6 weeks.
- 4: Refer to Primary Care Physician (PCP) and rescreen in 4-6 weeks.
- 5: Refer to Ear Nose and Throat (ENT) physician and rescreen in 4-6 weeks.
- 6: Refer to Audiologist and rescreen in 4-6 weeks.

OAE screening is for children birth to 3 years-old; pure tone screening is for children greater than 3 years-old if they are developmentally able to be conditioned to the task.  
 Immittance screening is for children 9 months of age or older.  
 Children with a known hearing loss should be screened with otoscopy and immittance to monitor middle ear health.  
 Children with PE tubes should be screened with otoscopy, OAE/pure tones, and immittance every 3 months (use #2 above).