**PEDIATRIC AUDIOLOGIST**

**HEARING LINK USER GUIDE**

**Guidelines and Definitions**

**1-3-6 GOALS [From the Joint Committee on Infant Hearing (JCIH) 2019 Position Statement]**

* All infants should be screened for hearing loss prior to discharge from birthing facilities or within 1 month of age.
* All infants who refer from the screening process should complete a diagnostic audiological evaluation by 3 months of age.
* All infants with diagnosed hearing loss should receive appropriate intervention by six months of age including amplification selection, if appropriate, as well as early intervention.
* North Carolina EHDI follows these same 1-3-6 goals for early hearing.

**STATE MANDATE**

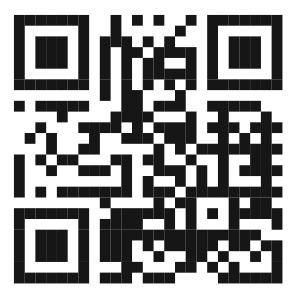
* According to North Carolina Administrative Code (10A NCAC 43f.1200), any screening information on children < 6 months of age and any diagnostic or amplification information on children <12 months of age **must be reported within 5 days,** including no shows and missed appointments.

**DIAGNOSTIC RESULTS**

* Confirmed- You confirmed that a child has a permanent hearing loss using ear-specific and frequency-specific testing or you confirmed a child has a temporary conductive hearing loss with bone conduction testing.
* Not Confirmed- You were unable to confirm that a child has a permanent hearing loss and/or testing was incomplete for any reason.
* None- You confirmed that a child has normal hearing.
* Not Reported- This is for internal use only; audiologists do not need to use this option.
* Please select the type of hearing loss, the degree of hearing loss, and whether amplification was recommended. Add any pertinent comments such as test results or clarification, reliability, special circumstances, and recommendations.
* Please enter follow up appointments under the “Appointments” tab.
* Please enter all no shows and missed appointments.

**DIAGNOSTIC DESIGNATION**

* Complete EHDI Diagnostic Evaluation- You have obtained ear-specific and frequency-specific information and can determine the type and degree of permanent hearing loss **OR** you have confirmed that the child has normal hearing sensitivity in both ears.
* **If hearing loss is present**, you are ready to counsel the family and have them sign the “Permission For Referral” (PFR) form. Go to: [www.ncnewbornhearing.org](http://www.ncnewbornhearing.org) and click on “Forms” for the most up-to-date PFR form.
* Incomplete Diagnostic Evaluation- You have NOT obtained ear-specific and/or frequency-specific information and have not determined the type and/or degree of permanent hearing loss. **A confirmed temporary conductive hearing loss should initially be entered as an “Incomplete Diagnostic Evaluation,” and will be considered a “Complete EHDI Diagnostic” only after subsequent diagnostic testing confirms normal hearing thresholds bilaterally.**
* Periodic Diagnostic Evaluation- A “Complete EHDI Diagnostic Evaluation” is already recorded, and this is a periodic evaluation to monitor for any hearing changes.
* None- No results were obtained, such as when a patient no shows for their appointment.

 www.ncnewbornhearing.org