

**Early Hearing Detection and Intervention
Hearing Screening and Follow-up Survey**

Reinstatement with Change

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Attachment 4B:

CDC EHDI Hearing Screening and Follow-up Survey (HSFS)

To navigate through the survey use the menu bar located near the top of each survey page and click on the desired section (e.g., Diagnostic).

2015 HSFS (DRAFT)

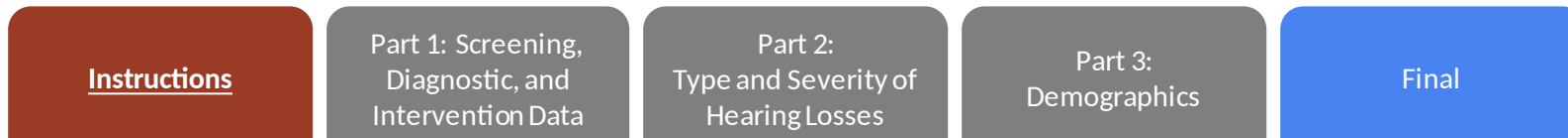
Hearing Screening and Follow-up Survey (HSFS)*

Contact Information	
Name	
E-mail	
Confirm E-mail	
State/Territory	

Note: Please select the Type and Severity system that was used to classify cases of permanent hearing loss for infants born in calendar year 2014 by clicking the orange box below and using the dropdown menu for your selection. You will not be able to complete the survey until you select either the "ASHA" or "DSHPSHWA" option.

[Click Here to Select Stages of Screening Used by State](#)

The following navigation bar is available on all worksheets. The underlined tab indicates the current sheet.
Click on a tab to jump to the corresponding sheet.



Directions:

Please complete the following survey with only documented, non-estimated data for infants born between January 1, 2015 and December 31, 2015. Any comments and/or caveats about the reported data can be entered in the Final section at the end of the survey. If you have any questions about this survey please refer to the explanations document or contact ehdi@cdc.gov

Survey Notes:

The survey is divided into three parts, which each having several different sections. These include Part 1 (Hearing Screening, Diagnostic, and Early Intervention), Part 2 (Type and Severity), and Part 3 (Demographics). Each part should be completed before the next one can be started. In Part 1 respondents must select if birthing facilities use a one stage, two-stage, or blended screening protocols.

2015 Documented Hearing Screening Data	
Total Occurrent Births	
Total Occurrent Births According to Vital Records	
Optional: Total Occurrent Births at Military Facilities According to Vital Records (Leave this field blank and enter "None" in the cell below if there are no military hospitals)	
Please indicate if Optional question above is None	
Optional: Total Occurrent Homebirths	
Overall Screening Results (Final / Most Recent)	
Total Documented as Screened	
Total Pass (most recent / final screen)	
Pass Before 1 Month of Age	
Total Not Pass (most recent / final screen)	
Not Pass Before 1 Month of Age	
Screening Results	
Missed initial / Refer outpatient	
Missed initial / Passed outpatient	
Pass initial <u>OR</u> Pass initial & Pass outpatient	
Refer initial / straight to diagnostic evaluation (including one-stage programs)	
Refer initial / Pass outpatient	
Refer initial / Refer outpatient	
Refer initial / Missed outpatient	
<i>Total Pass</i>	0
<i>Total Not Pass</i>	0
No Documented Hearing Screening*	

Total Documented as Not Screened	
Infant Died	
Non-resident	
Unable to be Screened due to Medical Reasons	
Parents / Family Declined Services	
Infant Transferred and No Documentation of Screening	
Infant Adopted	
Homebirths	
Parents / Family Contacted but Unresponsive	
Unable to Contact	
Unknown	
Other	
Total Occurrent Births (automatically calculated)**	0

Notes:

* This applies to one-stage and two-stage protocol sections.

**

The value for “**Total Occurrent Births (automatically calculated)**” must match the value listed for “**Total Occurrent Births**” at the top of this page. If there is any difference you will receive an error message.

2014 Documented Diagnostic Data	
Total Not Pass Screening	0
No Documented Hearing Loss	
Total with No Hearing Loss	0
No Hearing Loss Before 3 Months of Age	
Documented Permanent Identified (ID) Hearing Loss	
Total Hearing Loss	0
Hearing Loss ID Before 3 Months of Age	
No Documented Diagnosis / Undetermined	
Total with No Diagnosis	0
Audiologic Diagnosis in Process (Awaiting Diagnosis) <i>Requirement: Only infants seen at least one time and have a follow-up appointment scheduled</i>	
PCP/ENT did not Refer Infant for Diagnostic Testing	
Infant Died	
Non-resident	
Unable to Receive Diagnostic Testing due to Medical Reasons	
Parents / Family Declined Services	
Moved Out of Jurisdiction	
Infant Adopted	
Homebirths	
Parent / Family Contacted but Unresponsive	
Please use this dropdown box to indicate the Unresponsive Definition Used*	
Unable to Contact	
Unknown	
Other	

Total Diagnosed and Not Diagnosed (automatically calculated)**	0

Notes:

- * See the HSFS Explanations document for the definitions
- ** The value for “**Total Diagnosed and Not Diagnosed** (automatically calculated)” must match the value listed for “**Total Not Pass Screening**” at the top of this page. If there is any difference you will receive an error message.

2014 Documented Intervention Data	
Total Cases of Hearing Loss	0
Referrals to Part C Early Intervention (EI)	
Documented Referral Status	0
Referred to Part C EI	
Not Referred to Part C EI	
Unknown	
Referred to Part C EI Before Six Months of Age*	
Number Eligible for Part C EI*	
Total Enrolled in Part C EI	
Total Enrolled in Part C EI	0
Signed IFSP Before 6 Months of Age	
Signed IFSP After 6 Months of Age	
Receiving Part C EI Service	
Total Receiving Part C EI	0
Intervention Service Received Before 6 Months of Age	
Intervention Service Received After 6 Months of Age	
Intervention Service Received After 6 Months of Age, Due to Family Initially Declining Services*	
Monitoring Services	
Receiving Only Monitoring Services	
Receiving ONLY Intervention Services from Non-Part C EI	
Total from Non-Part C EI Services Only	0
Services Before 6 Months of Age	
Services After 6 Months of Age	
No Intervention Services	
Total No Services	0
Not Eligible for Part C Services	
Infant Died	
Non-resident	

	Unable to Receive EI due to Medical Reasons	
	Parents / Family Declined Services	
	Moved Out of Jurisdiction	
	Infant Adopted	
	Homebirths	
	Parent / Family Contacted but Unresponsive	
	Use this dropdown box to indicate the Unresponsive Definition Used**	
	Unable to Contact	
	Unknown	
	Other	
	Total Intervention & No Services ***	0

Notes:

- * The values for "Referred to Part C EI Before Six Months of Age", "Number Eligible for Part C EI", and "Intervention Service Received After 6 Months of Age, due to Family Initially Declining Services" are not included in any automatically calculated totals.
- ** See the HSFS Explanations document for the definitions
- *** The value for "**Total Intervention & No Services**" must match the value listed for "**Total Cases Hearing Loss**" at the top of this page. If there is any difference you will receive an error message.

Notes:

- * Only cases of hearing loss **not** reported in the Diagnostic Data section should be reported in the below "Hearing Loss not reported in "Documented Permanent Identified (ID) Hearing Loss" section.
- * Only cases of hearing loss **not** reported in the Intervention Data section should be reported in the below "Cases of Hearing Loss not included in the Early Intervention (EI)" section.
- * Only cases who did not pass hearing screening, has no confirmed diagnosis, but were enabled in early intervention services should be reported in the below "Cases enrolled in EI without a Confirmed Diagnosis" section.

Hearing Loss Cases not reported in "Permanent Identified (ID) Hearing Loss" (e.g., cases of late onset hearing loss)	
Cases of Non-permanent, Transient Hearing Loss ID	
Permanent Cases of Hearing Loss ID (e.g., late onset)	
Total Cases of Hearing Loss Not Included in Diagnostic Data	0

Cases of Hearing Loss not included in the Early Intervention (EI) (e.g., cases of late onset hearing loss)	
Total Cases of Hearing Loss Not Included in Diagnostic Data	0
Total Enrolled in EI (Part C or non-Part C)	
No Intervention: Monitoring Only	
No Intervention: Unknown	
No Intervention: Other	
Total Cases of Hearing Loss Not Included in Early Intervention	0

Cases enrolled in EI without a Confirmed Diagnosis	
Total Enrolled in EI (Part C or non-Part C)	
Total Cases Enrolled in EI without Confirmed Diagnosis	0

Note: Please see the Instructions tab for additional instructions on completing this tab. Only report Part 2 data using either the DSHPHWA or ASHA system – do not use both. If you do not see anything on this tab, please confirm you have selected a Type and Severity System on the Instructions Page and then use the links above to navigate to the appropriate system tab.

Total Permanent Hearing Loss	0
Did your Jurisdiction use different or custom dB ranges?	No

		BILATERAL			UNILATERAL			LATERALITY UNKNOWN (for Cases where it is unknown if the loss is unilateral or bilateral)
		RIGHT EAR	LEFT EAR	UNKNOWN EAR (Note: record degree of loss for each ear)	RIGHT EAR	LEFT EAR	UNKNOWN EAR	
Sensorineural	Slight							
	Mild							
	Moderate							
	Moderately Severe							
	Severe							
	Profound							
	Unknown Severity							
Conductive	Slight							
	Mild							
	Moderate							
	Moderately Severe							
	Severe							
	Unknown Severity							
Mixe	Slight							

d	Mild								
	Moderate								
	Moderately Severe								
	Severe								
	Profound								
	Unknown Severity								
Type Unknown	Slight								
	Mild								
	Moderate								
	Moderately Severe								
	Severe								
	Profound								
	Unknown Severity								
Auditory Neuropathy	Slight								
	Mild								
	Moderate								
	Moderately Severe								
	Severe								
	Profound								
	Unknown Severity								
Totals by Ear		0	0	0	0	0	0	0	0
Totals by Child		0		0	0	0	0	0	
Total Cases Resolved (i.e., change from hearing loss to no hearing loss)									
Overall Total*								0	

Note:

* The “**Overall Total**” must match the value listed for “**Total Permanent Hearing Loss**” at the top of this page (and taken from the Part 1 Diagnostics section).

Note: If your Jurisdiction uses different dB ranges, please select the "Yes" option on the "ASHA System" Tab and list the ranges that are used. If different categories are used to classify hearing loss, please list those categories and their corresponding dB ranges below.

ASHA Categories	Hearing Loss Range (dB HL)	Custom Categories	Custom Ranges (dB HL)
Normal	(-) 10 to 15		
Slight	16 to 25		
Mild	26 to 40		
Moderate	41 to 55		
Moderately Severe	56 to 70		
Severe	71 to 90		
Profound	91+		

Part 3: Demographics

Note: Please see the Instructions tab for additional instructions on completing this tab.

	Screening			Diagnostics		Intervention
	Total Occurrent Births	Total Pass	Total Not Pass	Normal Hearing	Hearing Loss	Total Enrolled in Part C EI
Totals (from Part 1)	0	0	0	0	0	0
Sex						
Male						
Female						
Unknown						
Totals (automatically calculated)*	0	0	0	0	0	0
Maternal Age						
<15 years						
15-19 years						
20 - 24 years						
25-34 years						
35 - 50 years						
> 50 years						
Unknown						
Totals (automatically calculated)*	0	0	0	0	0	0
Mothers Education						
Less than High School						
High School Graduate or GED						
Some College or AA/AS degree						
College Graduate or above						
Unknown						
Totals (automatically calculated)*	0	0	0	0	0	0

Maternal Ethnicity						
Hispanic or Latino						
Not Hispanic or Latino						
Unknown						
Totals (automatically calculated)*	0	0	0	0	0	0
Maternal Race						
White (Not Hispanic)						
White (Hispanic)						
White (Ethnicity Unknown)						
Black or African American (Not Hispanic)						
Black or African American (Hispanic)						
Black or African American (Ethnicity Unknown)						
Asian						
Native Hawaiians & other Pacific Islanders						
American Indian & Alaska Natives						
Unknown						
Other						
Totals (automatically calculated)*	0	0	0	0	0	0

Notes:

- * The value for “**Totals (automatically calculated)**” must match the value listed for “**Total** ” count at the top of this page. If there is any difference you will receive an error message. Please see the red cells that do not match.
The red shading indicates an error. Please enter the correct numbers in the yellow field to correct the errors.

Comments:

Please use this section to enter any comments and/or caveats about the reported data (2,500 character limit).

Check for Errors:

Please refer to the list below to check for outstanding errors in the survey. If there are any red fields, please navigate to the appropriate tab and fix the error before submitting.

Part 1: Screening	No errors
Part 1: Diagnostic	No errors
Part 1: Intervention	No errors
Part 2: DSHPSHWA	No errors
Part 2: ASHA	No errors
Part 3: Demographics	No errors