

Monday, 13 April 2015

[Service Development and Screening](#)

AGE APPROPRIATE HEARING ASSESSMENT / DIAGNOSTIC TESTING GUIDANCE
Issued by the Regional Newborn Hearing Screening Quality Improvement
Group (March 2015)

1. Referral Pathway

Parental or professional concern regarding an infant/young child's hearing may be identified at any time. Where such concern is identified, direct referral should be made, irrespective of newborn hearing screening outcomes and with parental agreement.

- Under 6 months of age → paediatric otolaryngology/ENT
- Births up to 3 years → audiology services that provide visual reinforcement audiometry (VRA)
- Over 3 years → Audiology services

Distraction testing (delivered by health visitors) is not part of the Healthy Child, Healthy Future Programme. Distraction testing should only be carried out as part of a diagnostic audiological assessment in a controlled environment, by appropriately skilled staff.

2. Test Options

- 2.1 Under 6 months (corrected gestational age (GA))
 - Auditory Brainstem Response (ABR) under natural sleep, especially for younger babies. Test at 80dB and 100dB at evaluation frequency range. If there is a passing OAE, some conduction testing should also be performed.

- Where it has not been possible to obtain reliable ABR results, audition or assessment should be used in line with national clinical guidelines, available at: [Paediatric Audiology Unit](#)

- Diagnostic otoscopy examinations (OAE) audiology

- Behavioural testing-Visual Reinforcement Audiometry (VRA) around 7 months if the infant is close to this age. Take into account the urgency of testing.

- 2.2 Over 6 months up to 3 years (corrected gestational age (GA))
 - Visual Reinforcement Audiometry
 - Use ear specific and frequency specific stimuli. A significant hearing loss should be excluded. If ear and frequency specific information cannot be obtained the child should be referred to rule out milder degrees of hearing loss.

Parental or professional concern regarding an infant/young child's hearing may be identified at any time. Where such concern is identified, direct referral should be made, irrespective of newborn hearing screening outcomes and with parental agreement.

Details

Format

A4 PDF

Target group

Health professionals

Downloads

Attachment	Size
Age Appropriate Hearing Assessment Diagnostic Testing Final 110315_0.pdf	419.92 KB
Print	