

LIST OF REFERENCES FOR MILD AND UNILATERAL HEARING LOSS

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PREVALENCE

SCHOOL-AGE

1. Axelsson A, Aniansson G, Costa O. Hearing loss in school children: a longitudinal study of sensorineural hearing impairment. *Scand Audiol.* 1987;16(3):137–43.
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4. Niskar AS, Kieszak SM, Holmes AE, Esteban E, Rubin C, Brody DJ. Prevalence of hearing loss among children 6 to 19 years of age. *JAMA.* 1998;279(14):1071–75.
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7. Sorri M, Rantakallio P. Prevalence of hearing loss at the age of 15 in a birth cohort of 12 000 children from northern Finland. *Scand Audiol.* 1985;14(4):203–7.

NEWBORN PERIOD

1. Dalzell L, Orlando M, MacDonald M, Berg A, Bradley M, Cacace A, Campbell D, DeCristofaro J, Gravel J, Greenberg E, Gross S, Pinheiro J, Regan J, Spivak L, Stevens F, Prieve B. The New York State universal newborn hearing screening demonstration project: ages of hearing loss identification, hearing aid fitting, and enrollment in early intervention. *Ear Hear.* 2000; 21:118–30.
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Champagne-Ardenne. *Acta Paediatr.* 2007;96:1150-4.

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FLUCTUATING & PROGRESSIVE HEARING LOSS

1. Brookhouser PE, Worthington DW, Kelly WJ. Fluctuating and/or progressive sensorineural hearing loss in children. *Laryngoscope.* 1994;104(8 Pt 1):958-64.
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OUTCOMES

MILD BILATERAL LOSS: OUTCOMES

1. Blair J, Peterson M, Viehwed S. The effects of mild sensorineuroal hearing loss on academic performance of young school-age children. *The Volta Review.* 1985;87:87-93.
2. Briscoe J, Bishop DV, Norbury CF. Phonological processing, language, and literacy: a comparison of children with mild-to-moderate sensorineural hearing loss and those with specific language impairment. *J Child Psychol Psychiatry.* 2001;42(3):329-40.
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UNILATERAL LOSS: OUTCOMES

1. Bess FH. The unilaterally hearing-impaired child: a final comment. *Ear Hear.* 1986; 7(1):52–4.
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3. Bess FH, Tharpe AM. Unilateral hearing impairment in children. *Pediatrics.* 1984;74(2):206–16.
4. Bess FH, Tharpe AM. An introduction to unilateral sensorineural hearing loss in children. *Ear Hear.* 1986;7(1):3–13.
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MILD BILATERAL & UNILATERAL LOSS: OUTCOMES

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4. Tharpe AM, Bess F. Identification and management of children with minimal hearing loss. *Int J Pediatr Otorhinolaryngol.* 1991;21(1):41–50.
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SPEECH RECOGNITION

MILD BILATERAL LOSS: SPEECH RECOGNITION

1. Crandell CC. Speech recognition in noise by children with minimal degrees of sensorineural hearing loss. *Ear Hear.* 1993;14(3):210–6.
2. Needleman AR, Crandell CC. Speech recognition in noise by hearing-impaired and noise-masked normal-hearing listeners. *J Am Acad Audiol.* 1995;6(6):414–24.

UNILATERAL LOSS: SPEECH RECOGNITION

1. Ruscetta MN, Arjmand EM, Pratt SR. Speech recognition abilities in noise for children with severe-to-profound unilateral hearing impairment. *Int J Pediatr Otorhinolaryngol.* 2005;69(6):771–9.
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AUDITORY PROCESSING

MILD BILATERAL LOSS: AUDITORY PROCESSING

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UNILATERAL LOSS: AUDITORY PROCESSING

1. Fujiki N, Naito Y, Nagamine T, Shiomi Y, Hirano S, Honjo I, et al. Influence of unilateral deafness on auditory evoked magnetic field. *Neuroreport*. 1998;9(14):3129–33.
2. Hartvig Jensen J, Johansen PA, Borre S. Unilateral sensorineural hearing loss in children and auditory performance with respect to right/left ear differences. *Br J Audiol*. 1989;23(3):207–13.
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UNILATERAL LOSS: LOCALIZATION

1. Humes LE, Allen SK, Bess FH. Horizontal sound localization skills of unilaterally hearing-impaired children. *Audiology*. 1980;19(6):508–18.
2. Newton VE. Sound localisation in children with a severe unilateral hearing loss. *Audiology*. 1983;22(2):189–98.

AMPLIFICATION & ACOUSTICS

MILD BILATERAL LOSS: AMPLIFICATION & ACOUSTICS

1. Anderson KL, Goldstein H. Speech perception benefits of FM and infrared devices to children with hearing aids in a typical classroom. *Lang Speech Hear Serv Sch*. 2004;35(2):169–84.
2. Bess F. Classroom acoustics: an overview. *Volta Review*. 2000;101(5):1–14.
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UNILATERAL LOSS: AMPLIFICATION & ACOUSTICS

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4. Updike CD. Comparison of FM auditory trainers, CROS aids, and personal amplification in unilaterally hearing impaired children. *J Am Acad Audiol.* 1994;5(3):204–9.

INTERVENTION

MILD BILATERAL & UNILATERAL LOSS

1. English K, Church G. Unilateral hearing loss in children: an update for the 1990's. *Lang Speech Hear Serv Sch.* 1999;30:26–31.
2. Gordon-Brannan M, Hodson BW, Wynne MK. Remediating unintelligible utterances of a child with a mild hearing loss. *Am J Speech Lang Pathol.* 1992;1(4):28–38.
3. Matkin N, Wilcox A. Considerations in the education of children with hearing loss. *Pediatr Clin North Am.* 1999;46(1):143–52.

PSYCHOSOCIAL

1. Newman CW, Jacobson GP, Hug GA, Sandridge SA. Perceived hearing handicap of patients with unilateral or mild hearing loss. *Ann Otol Rhinol Laryngol.* 1997;106(3):210–4.
2. Stein D. Psychosocial characteristics of school-age children with unilateral hearing losses. *J. Acad. Rehabil. Audiol.* 1983;16:12–22.
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DEGREES OF HEARING LOSS

DEGREES OF HEARING LOSS: OUTCOMES

1. Davis JM, Shepard NT, Stelmachowicz PG, Gorga MP. Characteristics of hearing-impaired children in the public schools: part II--psychoeducational data. *J Speech Hear Disord.* 1981;46(2):130–7.
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DEGREES OF HEARING LOSS: PARENTS

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DEGREES OF HEARING LOSS: PREVALENCE/SERVICES/AMPLIFICATION

1. Shepard NT, Davis JM, Gorga MP, Stelmachowicz PG. Characteristics of hearing-impaired children in the public schools: part I--demographic data. *J Speech Hear Disord.* 1981;46(2):123–9.
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HARD-OF-HEARING

1. Meadow-Orlans K, Mertens D, Sass-Lehrer M, Scott-Olson K. Support services for parents and their children who are deaf or hard of hearing: A National Survey. *Am Ann Deaf.* 1997;142(4):278–88.
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