

**The Directors of Speech and Hearing Program in State Health and  
Welfare Agencies (DSHPSHWA) Data Form**

DATA Reporting Form - Year 2000 Information

**Please remember to record if the data is actual (Act) or estimated (Est) and thank you for your time.**

State Reporting:

Reporting Year: **2000**

1) Does your state have legislation requiring Newborn Hearing Screening? :  Yes  No

2) Are birthing hospitals / facilities / providers required by the state to report hearing screening information?  Yes  No

a) If you answered "yes" to question #2, what information are hospitals / facilities/ providers required to report?

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**Screening Information**

3) Number of Live Births:  Act  Est

· Source of the data (i.e. state report?):

4) Total Number of Infants Screened from **1/01/00 – 12/31/00**:  Act  Est

a) Number Screened Prior to Discharge:  Act  Est

b) Number Screened After Discharge, but before 1 month:  Act  Est

· Source of the data:

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**Referral Information**

5) Number of Infants Referred for diagnostic Audiologic Evaluation:  Act  Est

• Source of data:

6) Total Number of Infants who Received a diagnostic Audiologic Evaluation:  Act  Est

a) Number evaluated by 3 months  Act  Est

· Source of the data:

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**Case Information**

7) Total Number of Children born between **January 1, 2000 and December 31, 2000**, who were identified with a Permanent Congenital Hearing Loss (PCHL):  Act  Est

a) Of the total number of children born between **January 1, 2000 and December 31, 2000** who were identified with a PCHL, how many were screened through a Newborn Hearing Screening Program:  Act  Est

8) Average, Median, and Age Range of Children when they are Diagnosed with PCHL:

a) Average Age (Months):                      c) Minimum Age (Months)

b) Median Age (Months):                      d) Maximum Age (Months)

Did your state use the DSHPSHWA formula (see instructions) to determine the previous values:  Yes  No

· If you answered no, please explain:

9) Total Number of Children born in 2000 with PCHL receiving Intervention:  Act  Est

a) Number born in 2000 with PCHL receiving intervention by 6 Months:  Act  Est

**Hospital Reporting & Screening Information**

- 10) Number of birthing hospitals / facilities:  Act  Est
- 11) Number of birthing hospitals / facilities with Universal Newborn Hearing Screening (UNHS):  Act  Est
- 12) Does your state define a UNHS birthing hospital / facility by the percent of infants screened:  Yes  No  
 · If yes, please select one of the following choices:
- a)  Screen 95% or over  Screen 90% or over  Screen 85% or over  Other (Please specify)
- 13) How do birthing hospitals / facilities record and report Hearing Screening Results:
- |   |   |
|---|---|
| <input type="checkbox"/> EBC                    | <input type="checkbox"/> OZ System              |
| <input type="checkbox"/> Blood Spot Cards       | <input type="checkbox"/> Neometrics             |
| <input type="checkbox"/> Web-Based System       | <input type="checkbox"/> Auris                  |
| <input type="checkbox"/> Custom/State Developed | <input type="checkbox"/> Other (please specify) |
| <input type="checkbox"/> Hi-Track               |   |

**Hearing Loss Type & Severity**

**DSHPSHWA uses the following criteria to classify hearing loss:**

- Mild: 21 – 40dB HL  
 Moderate: 41 – 70dB HL  
 Severe: 71 – 90dB HL  
 Profound: 91 + dB HL

- 14) Does your state use the DSHPSHWA system to classify the severity of a hearing loss?  Yes  No  
 · If you answered **No** to the previous question, please specify the classification criteria used.

- Mild (dB):  
 Moderate (dB):  
 Severe (dB):  
 Profound (dB):

- 15) Please complete the following two charts if your state recorded the type and severity of hearing loss for children with PCHL in reporting year 2000.

**UNILATERAL HEARING LOSSES:**

SENSORINEURAL (Total # )				CONDUCTIVE (Total # )		MIXED (Total # )			
Mild	Moderate	Severe	Profound	Mild	Moderate	Mild	Moderate	Severe	Profound

**BILATERAL HEARING LOSSES:**

SENSORINEURAL (Total # )				CONDUCTIVE (Total # )		MIXED (Total # )				Auditory Neuropathy
Mild	Moderate	Severe	Profound	Mild	Moderate	Mild	Moderate	Severe	Profound	

- If your state did not collect the above data are there any plans to record this data in the future?  Yes  No  
 · If you answered **Yes**, estimated date to begin recording type and severity of identified cases of PCHL:

## 1999 EHDI Data Update

**Note:** This section is only for states that provided data for last years DSHPHWA form (for reporting year 1999). Only those states are requested to update the information they provided for reporting year 1999. If you did not return a 1999 DSHPHWA form last year, please to **do not** complete this section.

5) Number of Children Identified With Permanent Congenital Hearing Loss (PCHL) in  
**Birth Year 1999:**                     Act     Est

6) Average, Median, and Age Range of Children when they are Diagnosed with PCHL

- a) Average Age (Months):             Act     Est
- b) Median Age (Months):             Act     Est
- c) Minimum Age (Months):         Act     Est
- d) Maximum Age (Months):         Act     Est

7) Number of Children born in 1999 with PCHL receiving Intervention:                     Act     Est

**Additional Comments:**