YOUR BABY NEEDS A HEARING ASSESSMENT

Why do we screen babies for hearing loss?

Two out of 1,000 babies have hearing loss at birth. Two more develop hearing loss by the age of five. These children may hear some sounds but miss others, making it harder to learn speech and language. This can lead to behaviour and emotional challenges.

The Infant Hearing Program provides hearing screening for all newborns in hospital or community settings and:

- Identifies newborns with permanent hearing loss
- Supports language development so they will be ready to start school
- Identifies and monitors children at risk of developing hearing loss

Hearing screen results

The hearing screen indicates your baby needs a full hearing assessment:

☐ Refer – More detailed testing is needed
☐ No result – Screen incomplete, more detailed testing is needed
☐ Bypassing hearing screen – A full hearing assessment is needed
How to prepare your baby for the hearing assessment

Your baby must sleep during the assessment. They should arrive for the appointment tired and hungry or it may need to be rebooked.

Please:
• Avoid lotion on your baby’s head on the day of the test
• Keep your baby awake a few hours before and while travelling to the appointment
• Be prepared to feed your baby at the clinic just before testing begins

Bring:
• Blanket and items to feed or calm your baby
• Extra diapers and clothes

What if your baby has hearing loss?

The audiologist will explain:
• How the hearing loss may affect your baby
• How technology may help your baby hear more
• What services/technologies are available to help your baby

Can hearing loss happen later in your child’s life?

Hearing loss can develop during childhood. Have your baby’s hearing tested by an audiologist if you have concerns about their hearing, speech or language development.

Checking if your baby is at higher risk for hearing loss

Babies with certain risks for hearing loss will be monitored. The same sample collected by the hospital or midwife for the newborn blood spot screening can be screened for:
• Cytomegalovirus infection – babies usually show no symptoms at birth but hearing loss could develop later
• Some common genetic risk factors – there is usually no family history of hearing loss

You have chosen to:
□ Consent – Results may be available at your audiology appointment or sooner if a risk is identified.
□ Decline – Your baby will not have this screen. Changes in hearing may not be found right away and could delay speech and language development.

For more information please visit: ontario.ca/infanthearing