

Alberta's EHDI Program

Frequently Asked Questions

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Frequently Asked Questions about the EHDI Program

What is the EHDI Program?

Alberta's Early Hearing Detection and Intervention (EHDI) Program is a new provincial population-based screening program provided by AHS. The program identifies permanent hearing loss as early as possible in a baby's life. This ensures that follow-up and support can be provided sooner to improve language, learning and developmental outcomes for babies.

The EHDI Program's services include:

- **Screening** babies for hearing loss by *1 month of age*
- **Diagnosing** permanent hearing loss by *3 months of age*
- Ensuring access to **intervention** by *6 months of age*



Who is eligible?

All babies born in Alberta or born to parents living in Alberta are eligible for hearing screening within 90 days of birth. It's best for babies to be screened *within 30 days of birth*.

Where is the EHDI Program offered?

Hearing screening through the EHDI Program is now available province-wide. Screening is offered, free of charge, at most hospitals with over 200 births per year and select community sites. A list of sites currently offering hearing screening is available through the service listing at AHS.ca/ehdi.

Newborn hearing screening is available as an *inpatient service* on all NICUs as well as postpartum units at most hospitals with over 200 births per year. Screening is also available as an *outpatient service* at a number of community-based screening sites across the province.

Visit AHS.ca/ehdi for more information about Alberta's EHDI Program.

Frequently Asked Questions about Newborn Hearing Screening

Why should my baby's hearing be checked (screened)?

Permanent hearing loss is one of the most common conditions in newborns. Without screening, it can be hard to tell if a baby has hearing loss. Even though a baby may respond to sounds, they may not hear well enough to develop speech and language. More than half of all babies with permanent hearing loss are healthy and have no family history of hearing loss.

The earlier hearing loss is found, the sooner a baby will have support to help them develop language to prevent delays in their development. If hearing loss isn't found early, children have a high risk of developing problems with speech, language, memory, learning, and social development.

When should I have my baby screened for hearing loss?

It's best to have your baby screened *before they are 1 month old*.

Hearing screening can be done quickly while your baby sleeps or is quiet. Younger babies spend a lot of time sleeping, so it's easiest to screen hearing in babies who are very young.

How is hearing screening done?

There are 2 tests to screen for hearing loss in newborns. With both tests, a healthcare professional who is trained to screen hearing uses a small, soft ear tip to play quiet sounds into your baby's ears. A computer measures how your baby's ears respond to the sound.

Automated Otoacoustic Emission (AOAE)

checks to see how well the cochlea (a part of the ear that detects and responds to sound) is working. The cochlea's response to sound is called an otoacoustic emission. When a baby is quiet or sleeping, AOAE screening only takes a few minutes.



Automated Auditory Brainstem Response (AABR)

checks how well the nerve for hearing is working. AABR uses 3 small sensors that are placed on your baby's head and neck. When the ear hears sound, the sensors record the response of the nerve. This response is called an auditory brainstem response. When a baby is sleeping or quiet, AABR screening takes about 20 minutes.



Does hearing screening hurt?

Hearing screening is safe and doesn't hurt. The sounds are quiet and the ear tips are soft.

Do I have to have my baby's hearing screened?

No, you don't have to have your baby's hearing screened. But it's important to talk your healthcare provider if you don't want your baby's hearing checked. They may give you information to help with your decision or offer resources to check your baby's hearing.

What if my baby wasn't screened in the hospital?

Processes are in place to support you getting your baby's hearing screened at a local community-based screening site. Depending on where you live, you will be contacted to book an appointment, or you will be given a phone number to book your baby's hearing screening appointment.



When will I get the results of the hearing screening?

You will get the results as soon as the screening is done. The result of the test is a pass or refer.

What does a pass result mean?

A pass result means that your baby is hearing well on the day of the screening. But it's still important to have your baby's hearing checked if you ever have concerns about their hearing, speech, or language development. A child's hearing can change and it's possible to develop hearing loss later in childhood.

What does a pass with risk factors result mean?

This pass result means that your baby is hearing well on the day of the screening. Your baby has certain health issues (risk factors) that may increase the chance of developing hearing loss at a later time. A follow-up hearing test will be scheduled when your baby is between 6 to 8 months of age.

What does a refer result mean?

A refer result means your baby did not pass the hearing screening, but it doesn't mean your baby has hearing loss. Your baby will need another hearing test to confirm or rule out hearing loss.

Why don't some babies pass hearing screening?

There are several reasons why a baby doesn't pass hearing screening. There may be hearing loss but not passing the test may also be related to vernix (the white substance that covers a baby at birth) in the ear canal or fluid in the middle ear. The best way to diagnose hearing loss in your baby is to take them to the more specialized follow-up hearing test.

Frequently Asked Questions about the Diagnostic ABR Assessment

My baby did not pass the hearing screening – what happens next?

Your baby will be referred for a more specialized hearing test called a diagnostic Auditory Brainstem Response (ABR) test. This test is done by a pediatric audiologist (a healthcare provider who specializes in children's hearing) at an audiology service centre closest to you. The audiology service will contact you to book the appointment.



Why is it important to take my baby for a diagnostic ABR?

The diagnostic ABR is the best way to find out if your baby has hearing loss. The test is safe and won't hurt your baby. If your baby has hearing loss, you will get information about services to help your baby with their speech, language, learning, social and emotional development.

What happens at the diagnostic ABR appointment?

The diagnostic ABR test is done while your baby sleeps. The test is scheduled for up to 3 hours to allow time for your baby to fall asleep and to do the test. You can sit and hold your baby during the test.

Two sensors are placed on your baby's forehead and one behind each ear. A small, soft ear tip will be put into each of your baby's ears to play quiet sounds. The sensors record the response to sound.

When should my baby have a diagnostic ABR?

It's important that your baby has the diagnostic ABR testing when they are between 4 and 8 weeks old. The test is easiest to do in babies of this age because they sleep a lot so the test is often shorter and can be done in one appointment. The older a baby is, the more alert they are so the test can take longer or may need to be done over several appointments.

The earlier hearing loss is found, the sooner your baby will get the services they need to support their speech, language, learning, social and emotional development.

Why can't a diagnostic ABR be done right after hearing screening?

Waiting is hard, but the diagnostic testing is more accurate when your baby is at least 4 weeks old. Also, if your baby had any vernix or fluid in their ears at the time of the screening, waiting gives the ears a chance to clear.

What can I do to help prepare my baby for a diagnostic ABR?

Try to bring your baby awake to the appointment. We know it's not easy, but your baby must be sleeping during the test.

To help your baby sleep during the test:

- Keep your baby awake for at least 1 hour before the test.
- Try not to feed your baby for about 1½ hours before the appointment. You can feed your baby when the test begins to help them fall asleep.
- Bring any special blankets or items that may help your baby fall sleep.
- If you are driving to the appointment, have another adult in the car to play with your baby to keep them awake.

What will happen after the diagnostic ABR?

The pediatric audiologist will share the results of the test and explain them to you. Most of the time, you will get the test results on the same day as the test. If the test finds that your baby has permanent hearing loss, they may need another ABR test to better understand how your baby is hearing different sounds. You will also be referred to other specialists to help support you and your child.

