

Is My Baby's Hearing Normal?

Facts To Know

- Three million American children under the age of 18 years have varying degrees of hearing loss. You, the parents and grandparents, are usually the first to discover hearing loss in your babies, because you spend the most time with them. If, at any time, you suspect your baby has a hearing loss, discuss it with your doctor.
- Your baby's hearing can be professionally tested at any age. Computerized hearing tests make it possible to screen newborns. Some babies have more than an average chance of having hearing loss than others. If you checked any items on this list, your child should have a hearing test as soon as possible.
- All children should have their hearing tested before they start school. This could reveal mild hearing losses that the parent or child cannot detect. Loss or hearing in one ear may also be determined in this way. Such a loss, although not obvious, may affect speech and language.
- Hearing loss can even result from earwax or fluid in the ears. Many children with this type of temporary hearing loss can have their hearing restored through medical treatment or minor surgery.
- In contrast to temporary hearing loss, some children have nerve deafness, which is permanent. Most of these children have some usable hearing. Few are totally deaf. Early diagnosis, early fitting of hearing aids, and an early start on special educational programs can help maximize the child's existing hearing.
- Use this simple list to answer the question "Is My Baby's Hearing Normal?"

Determining If Your Child Has Hearing Loss

If you think your child has a hearing loss, you might be right. The following checklist will assist in determining whether or not your child might have a hearing loss. Please read each item carefully and check only those factors that apply to you, your family or your child.

INDICATORS FOR HEARING LOSS CHECK EACH ITEM THAT APPLIES

During Pregnancy	Mother had German measles, a viral infection or flu. Mother drank alcoholic beverages.	
My Newborn (Birth to 28 Days of Age)	Weighed less than 3.5 pounds at birth Has an unusual appearance of the face or ears Was jaundiced (yellow skin) at birth and had an exchange blood transfusion. Was in the neonatal intensive care unit (NICU) for more	

	<p>than five days</p> <p>Received an antibiotic medication given through a needle in a vein</p> <p>Had meningitis</p>	
My Family	<p>Has one or more individuals with permanent or progressive hearing loss that was present or developed early in life.</p>	
My Infant (29 Days to Age 2 Years)	<p>Received an antibiotic medication given through a needle in a vein.</p> <p>Had meningitis</p> <p>Has a neurological disorder.</p> <p>Had a serious injury with a fracture of the skull with or without bleeding from the ear.</p> <p>Has recurring ear infections with fluid in ears for more than three months.</p>	

Response To The Environment
CHECK EACH ITEM THAT APPLIES

Newborn (Birth to 6 Months)	<p>Does not startle, move, cry, or react in any way to unexpected loud noises</p> <p>Does not awaken to loud noises</p> <p>Does not freely imitate sound</p> <p>Cannot be soothed by voice alone.</p> <p>Does not turn his/her head in the direction of my voice</p>	
Young Infant (6 through 12 months)	<p>Does not point to familiar persons or objects when asked</p> <p>Does not babble or babbling has stopped</p> <p>By 12 months is not understanding simple phrases such as "wave by-bye", "clap hands" by listening alone</p>	
My Infant (13 months through 2 Years)	<p>Does not accurately turn in the direction of a soft voice on the first call.</p> <p>Is not alert to environmental sounds</p> <p>Does not respond to sound or does not locate where sound is coming from.</p> <p>Does not begin to imitate and use simple words for familiar people and things around the home.</p> <p>Does not sound like or use speech like other children of similar age.</p> <p>Does not listen to TV at a normal volume</p> <p>Does not show consistent growth in the understanding and the use of words to communicate.</p>	

What You Should Do?

- If you have checked one or more of these indicators, your child may have more than an average chance of a hearing loss.
- If your child has one or more of these indicators you should take him or her for an ear examination and a hearing test. This can be done at any age, as early as just after birth.
- If you did not check any of these factors but you suspect that your child is not hearing normal, even if your child's doctor is not concerned, have your child's hearing tested by an audiologist and when appropriate, his or her speech evaluated by a speech and language pathologist. If no hearing loss exists, the test will not have hurt him or her. However, if your child does have a hearing loss, delayed diagnosis could affect speech and language development.

This leaflet is provided as a public service to parents who are concerned that their child might have a hearing loss. It is not a substitute for an ear examination or a hearing test. Hearing loss can exist in children even though none of these checklist items are present.

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