

WHAT SHOULD I DO IF MY BABY IS DIAGNOSED WITH HEARING LOSS

Learning that your child has been diagnosed with hearing loss can be overwhelming. You may be unsure about how you can communicate with your baby. Remember that you are already an expert at communicating with your child.

Everyone has made a funny face at a baby and watched for that baby to smile. Communication is not just spoken or written words—it involves touching, smiling, hugging or kissing your baby, rocking your baby, singing, or laughing. Most babies with hearing loss have some hearing (called residual hearing) and can partially hear voices, especially when you are close to the baby.

[Suggestions & Reminders for Parents](#)

EVALUATION

If your baby did not pass his/her newborn hearing screen, he/she should have his/her hearing evaluated by an audiologist as soon as possible. An audiologist is a health care provider who specializes in working with people with hearing loss.

It is important for parents to know that not every baby who did not pass his or her newborn hearing screen actually has hearing loss.

It is important to have the diagnostic assessment completed to learn how your baby is hearing.

Babies who are referred for audiology diagnostic evaluation should receive a complete audiological (hearing) evaluation. This evaluation is done to determine how your baby is hearing, as well as look for possible causes of a baby's hearing loss.

CLICK ON THE FOLLOWING LINKS FOR MORE INFORMATION:

[How Hearing Loss is Diagnosed in Infants and Children](#)
[Level I and Level II Audiology Providers in Indiana](#)

After the communication evaluation, most children diagnosed with hearing loss should be enrolled in treatment with an early intervention specialist who is trained and experienced in working with young children with hearing loss. An early intervention specialist may be a speech-language pathologist, an audiologist, an early childhood educator with special training in hearing loss, or an early intervention deaf educator.

Children diagnosed with hearing loss should continue to see their audiologist for audiological (hearing) management. This management may include other hearing evaluations, ear mold impressions and fittings, or hearing aid adjustments.

Intervention

If your baby has been confirmed to have hearing loss, he/she should be referred to First Steps for direct intervention services right away. These services will give you information about the range of available options so that you can make the best decision regarding care and treatment of your child. Babies who are enrolled in direct early intervention services, especially before age 6 months, tend to make the fastest progress.

First Steps is the State of Indiana's early intervention system. Our program serves families with infants and toddlers (ages birth to three) who are experiencing developmental delays or have a diagnosed condition that has a high probability of resulting in a developmental delay. First Steps is funded by state and federal funds. Every family in Indiana, regardless of income or location, can access the First Steps program.

First Steps services can begin at birth if needed, or at any time before your child's third birthday. Services can last until your child no longer needs help or until s/he turns three years old.

Any child, age birth to three, in the state of Indiana is entitled to a developmental evaluation at no cost. However, children must meet eligibility criteria and show a need for services to receive ongoing services.

Please click here for more information on First Steps services for your child: <http://www.in.gov/fssa/4655.htm>

Treatment / therapies

Hearing aids

Hearing aids are devices worn in the ear to allow a person to hear conversation and sounds in the environment. Your baby's doctor must approve use of this device. You and your child will work with an audiologist to determine the best options for technology.

Cochlear implant

A cochlear implant is a hearing device placed in the ear by surgery. People can have either one cochlear implant or two cochlear implants. Cochlear implants are usually used to help people with severe or profound hearing loss who did not

receive significant help from hearing aids. Your baby's doctor must approve use of this device.

Communication interventions

Auditory/oral (listening and talking) communication

Visual (by sight) communication (such as American Sign Language or Cued Speech)

Combined auditory/oral and visual communication

Hearing technology (including FM systems)

Hearing technology is available for every type and degree of hearing loss. One example of hearing technology for newborns or children is an FM system. An FM system is a two-part device—both the person talking and the person listening wear part of the FM system. The person talking wears a transmitter (of speech). The person listening wears a receiver (of speech). Speech is transmitted through an FM signal (like a radio signal). An FM system allows a child to be within “earshot” (about six inches away) from the speaker’s voice at all times.

Speech Therapy-

In young children with hearing loss, speech and language development can be delayed. Speech-language pathologists work with families to help their children with hearing loss develop language understanding (reception) and language use (expression).

Auditory Verbal Therapy is a specific type of speech therapy that enables those who are deaf or hard of hearing to use their hearing to listen, process verbal language, and speak. Through Auditory-Verbal Parent Guidance Therapy, families make listening and speaking a natural part of daily life