

# At-Risk Criteria for Delayed Onset/Progressive Hearing Loss

## Recommended Follow-up



- **Family History of Congenital Childhood Hearing Loss**
  - Does not include history of middle ear infections/tubes;
  - Does not include family members with known causes of hearing loss like Rubella, Meningitis, or loud noise exposure & trauma;
  - Does include family members with hearing loss in one or both ears since childhood from unknown cause or history of genetic hearing loss.
- **In-utero Infection (TORCH) includes:**
  - **Toxoplasmosis** – infected during or just before pregnancy, especially 1<sup>st</sup> trimester;
  - **Group Beta Strep (GBS)** – sick infant with positive GBS culture;
  - **Syphilis** – infected during pregnancy, baby can be treated prior to delivery;
  - **Rubella** – infected primarily during the first trimester;
  - **Cytomegalovirus (CMV)** – can be transmitted through the placenta, birth canal or post-natally through breast milk;
  - **Herpes Simplex Virus (HSV)** – active infection during pregnancy, primarily active during vaginal delivery.
- **Hyperbilirubinemia (Jaundice)**
  - At levels exceeding indication for exchange transfusion.
- **Ear Malformations/Craniofacial Anomalies** Babies who cannot be screened at the hospital due to no ear, partial ear, or no ear canal opening should be immediately referred to First Steps and their physician. Babies who can be screened and pass should be referred for follow-up at 9-12 months of age.

**Other at-risk factors for hearing loss** in infants exist and would routinely be investigated by the infant's primary care physician. These factors include:

- Syndromes that are commonly associated with hearing loss, such as, Down's Syndrome, Usher Syndrome, Waardenburg Syndrome, and Neurofibromatosis Type 2, to name a few;
- Low birth weight- below 3.3 lbs.
- Prolonged ventilation (> 10 days);
- Aminoglycosides (>5 days) and loop diuretics used in combination with aminoglycosides;
- Apgar scores of 0-3 at 5 minutes or those who fail to initiate spontaneous respiration by 10 minutes or those w/ hypotonia persisting to 2 hrs. of age;
- Any infant not passing two newborn hearing screenings;
- Parental concern.