COVID-19 Creates Pediatric Hearing Health Emergency in Texas

Early detection and intervention is one of the most important factors in determining outcomes for children who are deaf or hard of hearing. In 2020, many barriers affected infants receiving timely newborn hearing screenings and diagnostic services. As a result, Texas saw an increase in the number of babies lost to follow-up during the newborn hearing screening process. In addition, significantly more babies who required diagnostic evaluations were identified as deaf or hard of hearing compared to the two previous years. This increase in loss to follow-up and overall diagnoses of hearing loss will lead to more children with late-identified hearing loss over the next 2-4 years. Primary care physicians are on the front line for identifying babies who have missed a screening or diagnostic appointment and helping them complete the process.

![Figure 1](https://www.calliercenter.utoledo.edu/)

Figure 1 displays stages of the early hearing detection and intervention process on the x-axis and the number of infants born in Texas in 2020 on the y-axis. Grey and black boxes show infants who did or did not pass the screening/test, respectively. Orange boxes show infants who missed the birth screen; gold boxes display infants who missed the outpatient screen; and blue boxes show infants who missed the audiology assessment. The orange, gold, and blue numbers reflect estimates of how many babies who missed the screening would not have passed or would be diagnosed as deaf or hard of hearing (DHH) based on the percent of infants who did not pass that stage of the process. Texas may have missed >300 infants who are DHH due to more infants missing hearing screenings earlier in the process.

**Risks of Late-Identified Hearing Loss**

- Delayed speech/language development
- Reduced academic achievement
- Difficulty in social interactions
- Mental health concerns
How You Can Help

**Check Screening Status**

The state database for hearing screening results can be accessed at [TEHDI.com](http://TEHDI.com).

We recommend verifying the screening status of every child age 3 years or younger as a matter of routine.

**Refer for Follow-up**

If a child:
- Missed initial newborn hearing screening
- Missed outpatient screen after a failed initial screening
- Missed diagnostic testing after failed screening

If a parent:
- Expresses concern about hearing or speech development, refer to audiology.

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Newborn Hearing Screening Process

1. **Initial Newborn Hearing Screening**  
   *(At birth or before 1 month of age)*
   - **Pass**: Routine Screening with PCP *(Per AAP guidelines)*
   - **Refer**: Outpatient Screen at Birth Facility or Medical Home *(By 1 month of age)*

2. **Routine Screening with PCP** *(Per AAP guidelines)*
   - **Pass**: Typical Hearing
   - **Refer**: Appropriate Medical & Rehabilitative Intervention *(by 6 months of age)*

3. **Appropriate Medical & Rehabilitative Intervention** *(by 6 months of age)*
   - **Refer**: Diagnostic Audiological Assessment *(by 3 months of age)*

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**Resources**

- Texas newborn hearing screening database access, general questions, or training
  - 1.888.727.3366, opt 3
  - ozhelp@oz-systems.com

- Early Hearing Detection & Intervention
  - General information: [infanthearing.org](http://infanthearing.org)
  - For a list of pediatric audiology providers: [ehdi-pals.org](http://ehdi-pals.org)

- If you have any questions or would like more information, contact our pediatric audiologist at Stephanie.Williams@utdallas.edu.