



Making the Difference ... in Hearing Screening

The following changes have been made:

Screening Procedure for Hearing Screening	
<i>Hearing Guidelines February 1992</i>	<i>Updated Hearing Guidelines Draft 2008</i>
II. Hearing screening must be administered at least annually to students in grades K - 7 and 10, and to all new entrants.	II. Hearing screening must be administered to all students within six months of admission to the school, in Kindergarten, and in grades 1, 3, 5, 7 and 10.
II. B. Hearing <i>Did not appear in the February 1992 Guidelines</i>	III. A. Hearing screening may be done at any time deemed necessary by professional registered nurse (school nurse). Such occasions involve: f. Students exposed on a regular basis to excessive noise levels such as power equipment, motorcycles, snowmobiles, guns, band participation, and other noise pollutants. h. Students who experience unconsciousness or head trauma (this could be during a sporting event or any other cause).
III.C. 1. Students using hearing aids. 2. Students with known hearing loss...	B. (1. Students using hearing aids.) omitted 1. Students with known hearing loss...
IV. Head trauma <i>Did not appear in the February 1992 Guidelines</i>	IV. Indicators of suspicion include: Head trauma
V. A. Mild hearing loss (20 – 40db) 3. May benefit from hearing aid.	V. A. Mild hearing loss (21- 40 db) 3. May benefit from hearing aid or educational amplification, e.g., FM Assistive Listening Device
B. Moderate hearing loss 1. Use of hearing aid, auditory training, lip reading, favorable seating.	B. Moderate hearing loss 1. Use of hearing aid , auditory training, lip reading, favorable seating, educational amplification, e.g., FM auditory training 2. Language therapy to aid the student in communication skills
C. Severe hearing loss 1. Use of hearing aid in conjunction with language therapy to aid the student with communication skills.	C. Severe hearing loss Use of hearing aid, cochlear implant and or educational amplification in conjunction with language therapy to aid the student with communication skills.
D. Profound hearing loss 2. Use of amplification, plus all of the above mentioned services, if needed, but may be less successful in producing adequate speech and language. 3. Special education services are required.	D. Profound hearing loss The student does not rely on hearing as the primary channel for communications, therefore use of amplification hearing aids, cochlear implant, educational amplifications, sign language interpreter, translator and/or note taker may be appropriate and necessary.

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VI.A. The primary goal of identification audiometry and threshold air conduction screening is to identify persons who have hearing impairments that interfere with, or that have the potential to interfere with, communication.	VI.A. The primary goal of air conduction threshold audiometry is to identify students who might present with hearing loss which could potentially interfere with communication and learning, and assist in making the appropriate referral.
<i>Did not appear in the February 1992 Guidelines</i>	B. Basic infection control procedures should be followed: <ul style="list-style-type: none"> • Use a disinfectant wipe on head phones and band prior to use (Disposable covers are available). • Disinfect any reusable immitance probe tips or otoscopic speculums or use disposable ones. • Wash hands thoroughly if ear drainage is visible or suspected.
VI. B. 1. Acoustic environment – numerous changes, please review.	VI. C. 1. Acoustic environment – numerous changes, please review.
<i>Did not appear in the February 1992 Guidelines</i>	VI. C. 2.d. Standard TDH 39/41 headphones are recommended.
<i>Did not appear in the February 1992 Guidelines</i>	VI. C. 2.k. Once it is established that the student knows to raise their hand when a tone is presented, start the screening protocol.
VI. B. 2.kl. Reduce intensity to 20db. Test at 1000, 2000 and 4000 Hz.	VI. C. 2.l. Set the audiometer to 20 db. Test at 1000, 2000 and 4000 Hz. Elicit 2 positive responses at each frequency. Change to the other ear and repeat.
VI. B. 3.a. Failure to respond to any recommended frequency in either ear at 20dB shall constitute failure of pure tone air conduction screening and student should be rescreened.	VI. C. 3.a. Failure to respond to any recommended frequency in either ear at 30dB shall constitute failure of the air conduction screening. The student should be rescreened during the same session or within one week.
VI. B. 3. b. Failure criteria (con't): Inability to comply with screening procedure.	VI. C. 3. b. Failure criteria (con't): Inability to comply with screening protocol. Students with disabilities are sometimes unable to follow the recommended screening protocol or are reluctant to have the headphones placed. These children will require an alternate protocol conducted in an audiometric booth by an audiologist.

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VI. C. 2. Those students who have failed the pure tone screening should be tested.	VI. C. 3. Students who have failed the 20 db pure tone screen should have the air conduction threshold screen the same day or within one week of the failed 20db screen.
D. 3.a. Acoustic immitance screening - Failure criteria: a. A tympanogram (Type B) that indicates no pressure peak in either ear as air pressure changes from +200 mm to -300 mm H ₂ O.	E. 3.a. Acoustic immitance screening - Failure criteria: A tympanogram (type B) that indicates no pressure peak or movement of the drum. (A flat line or slightly domes shape will be drawn on the graph).
<i>Did not appear in the February 1992 Guidelines</i>	VII.B. Notification of teachers – 4. Noisy learning environments should be avoided or minimized.
<i>Did not appear in the February 1992 Guidelines</i>	K. Religious Exemption Hearing screening will not be required where a student, the parent or person in parental relationship to the student objects to the screening on the grounds that the screening conflicts with their genuine and sincere religious beliefs. A written and signed statement from the student, parent or person in parental relationship to the student that they hold such beliefs must be submitted to the principal or the principal's designee and will constitute sufficient proof of such beliefs.