

KIDSNET and RITRACK... Partnering for Audiological Reporting

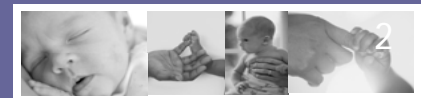
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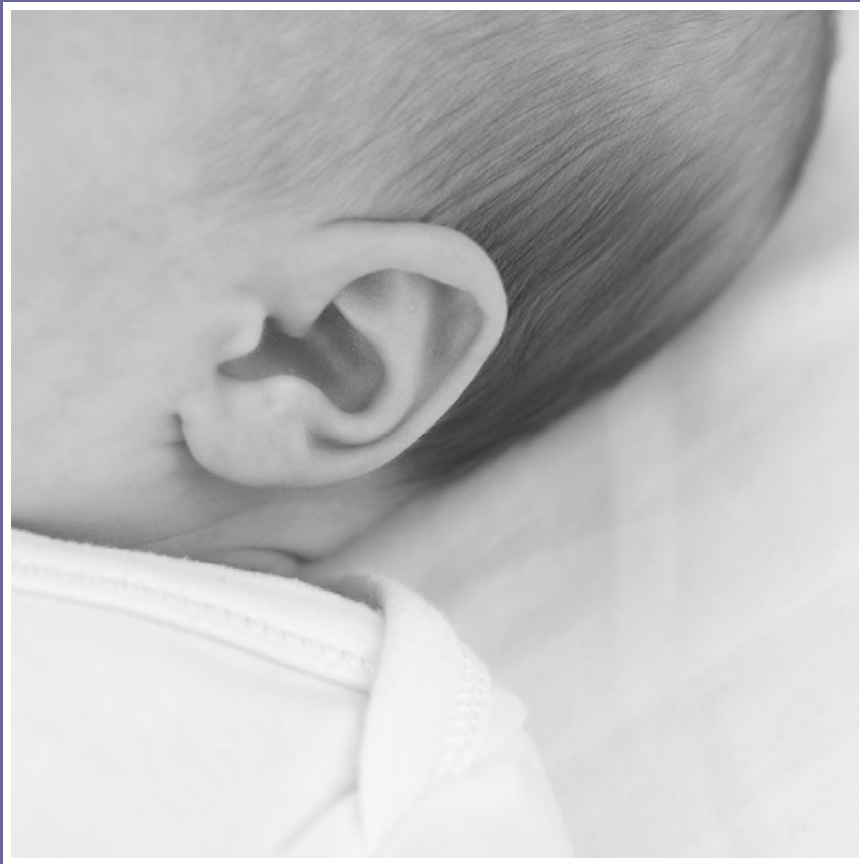
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- This presentation will (not) include discussion of pharmaceuticals or devices that have not been approved by the FDA or if you will be discussing unapproved or “off-label” uses of pharmaceuticals or devices.

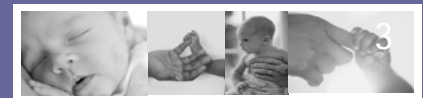


KIDSNET and RITRACK...

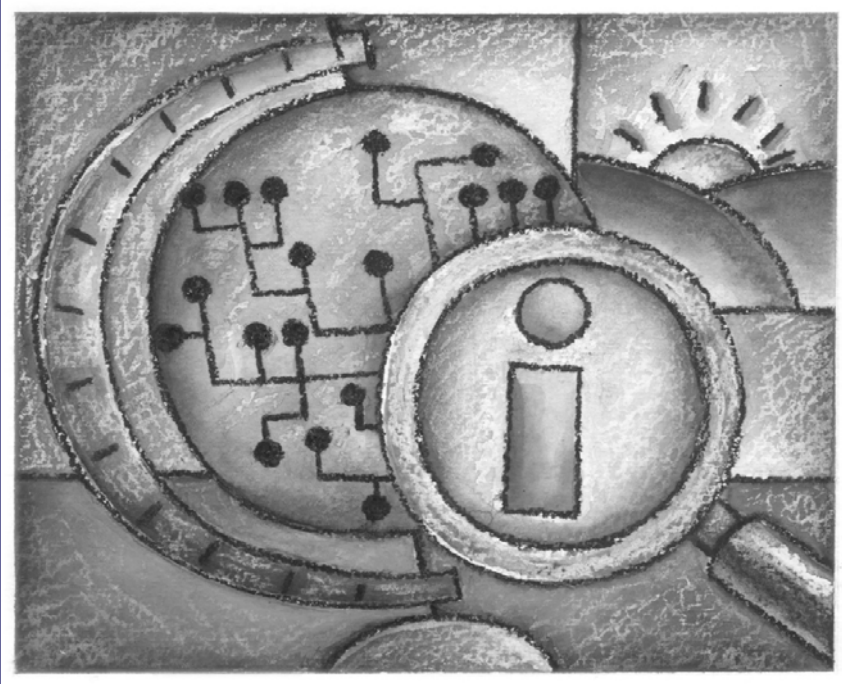
Partnering for Audiological Reporting



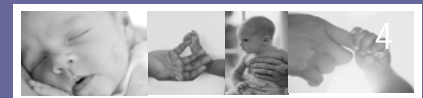
- RITRACK and KIDSNET
- Reporting of Audiological Data
- Capture of Audiological Data



RITRACK Components



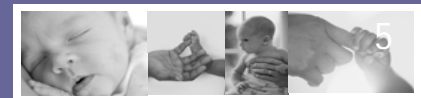
- Child Demographics
- Risk Factors
- Initial Screening
- Rescreening
- Electrophysiological Testing
- Behavioral Testing
- Calculated Results
- Reports and Correspondence



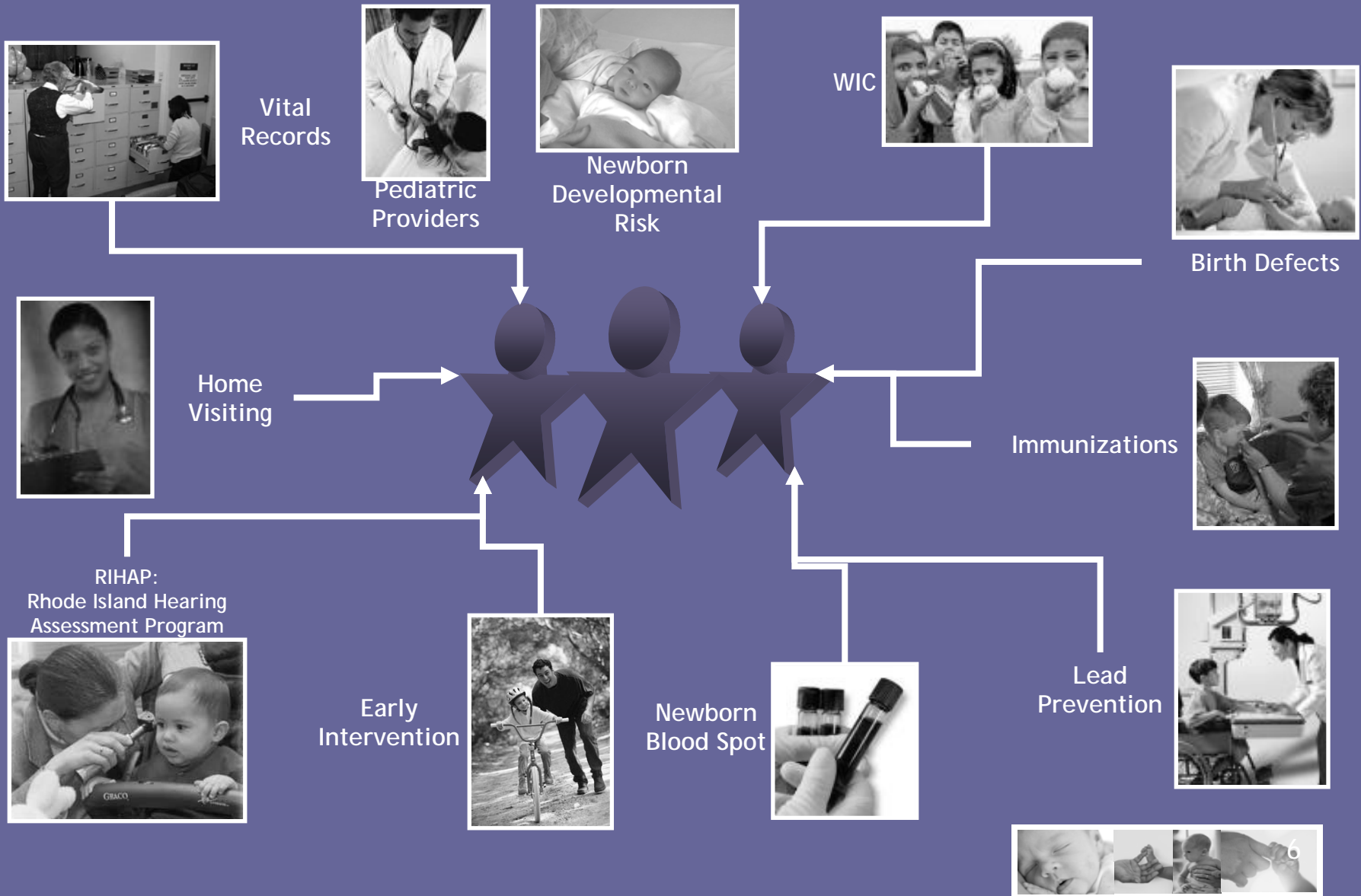
RITRACK Strengths



- Comprehensive EHDI Data Model
- Powerful EHDI-specific reporting and analysis capability
- Designed for small number of EHDI-trained specialists
- Highly flexible to meet evolving EHDI needs



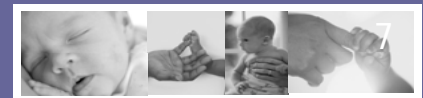
KIDSNET Components



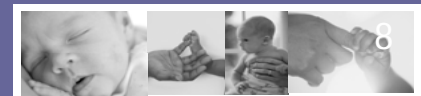
KIDSNET Strengths



- User-friendly and secure web-based access
- Broad user base
- Integrated across numerous programs
- End-user support infrastructure
- Role-based security and privacy controls
- Variety of data exchange interfaces



KIDSNET And RITRACK Reporting of Audiological Data



Diagnostic Evaluations.... Data Collection for RIHAP



Data Collection Process

- 1) RIHAP receives report from community audiologist
- 2) Report Coded by RIHAP Audiologist
- 3) Coded results entered by Data/Follow-Up Staff



Patient Name: _____ DOB: 1/12/2006 RITRACK ID: 128282

BEHAVIORAL ASSESSMENT RESULTS CODING FORM

Date of Assessment: 1/12/2007 Facility: _____

Audiologist: W. Chung C. O'Neil M. Chiappinelli H. Taylor Other (Please Specify) _____

Interpreter Used: Yes No Language (Please Specify): _____ Reliability: FAIR Word Recog Score: _____

Behavioral Testing: VRA Headphones Play Standard BOA

Frequency	Right	Left
250 Hz	1	1
500 Hz	15	10
1K Hz	15	10
2K Hz	15	10
4K Hz	15	10
8K Hz	15	10
Speech	15	10

Diagnosis: Type Degree 1st Diagnosis of PHL Add or Delete to PHL Cohort for Year of Birth

Technology Utilized: Make & Model Algorithm/Map Type Funding Source

Audiological Recommendation / Referrals: Discharge Hearing Aids Medical Monitoring for Hearing Loss Early Intervention Family Guidance Program Genetic Testing/Counseling ENT Other

Comments: _____

Reviewed 12/15/2005 4:24 PM

Child Summary | Risk Factors | Initial Screen | Rescreen | Electrophysiological | Behavioral Audiology | Audiology Refs

Date: 01/12/07 Audiologist: CHUNG, WINNIE Facility: WUMEN INFANT Interpreter: _____ Reliability: FAIR Outcome: _____

Behavioral Testing: VRA Play Standard BOA

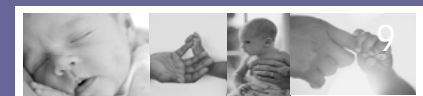
Frequency	Right	Left
250 Hz	NT	NT
500 Hz	NT	NT
1 kHz	NT	NT
2 kHz	NT	NT
4 kHz	NT	NT
6 kHz	NT	NT
8 kHz	NT	NT
Speech	NT	NT

Diagnosis: Normal w/ Conductive Incl

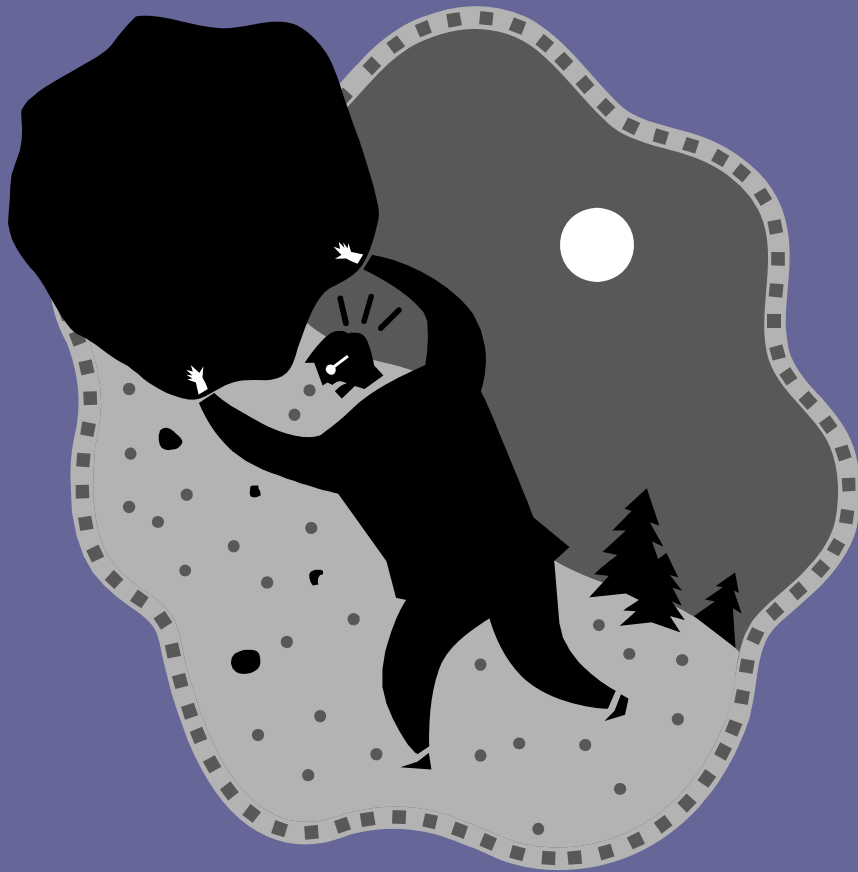
Technology Used (if applicable): Hearing Aid FM System Cochlear Implant

Audiological Recommendation/Referrals: Discharge Hearing Aids Medical Monitoring Early Intervention Family Guidance Genetic Testing ENT Other

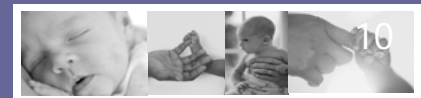
Date: 11/7/07 Audiologist: CHUNG, WINNIE Facility: WUMEN INFANT



Data Collection Challenges



- Reporting of Results, not mandated in RI
- Data collection per child not always a complete history
- Opportunity for coding and data entry error (3 people per event)
- Possible reinterpretation of results based on RIHAP audiologist's review



Diagnostic Evaluations.... Data Collection for KIDSNET

Data Collection Process

- 1) Audiologist performs assessment on child.
- 2) Minimum results entered by audiologist



Add New Audiological Evaluation Information

Date: (mm/dd/yyyy) Audiologist: Mary Catherine Hess

Tests Performed:

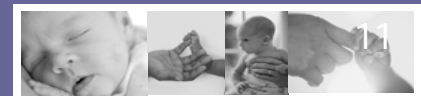
<input type="checkbox"/> Sedated ABR	<input type="checkbox"/> DPOAE
<input type="checkbox"/> ABR	<input type="checkbox"/> TEOAE
<input type="checkbox"/> Behavioral Testing - VRA	<input type="checkbox"/> Tympanometry
<input type="checkbox"/> Behavioral Testing - Standard	<input type="checkbox"/> Otoscopy
<input type="checkbox"/> Behavioral Testing - Play	<input type="checkbox"/> Bone Conduction
<input type="checkbox"/> Behavioral Testing - BOA	<input type="checkbox"/> IPSI Reflex

ICD-9:

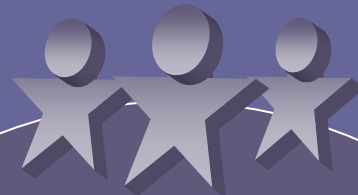
Diagnosis Left: **Diagnosis Right:**

Risk Factors:

Comments:



Capture of Audiological Data



KIDSNET

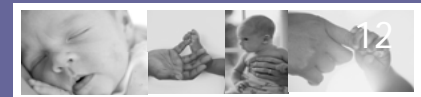
- Tests performed
- Risk Factors
- ICD-9
- Audit data



RITRACK

- Date
- Audiologist
- Loss Type
- Loss Degree
- Comments

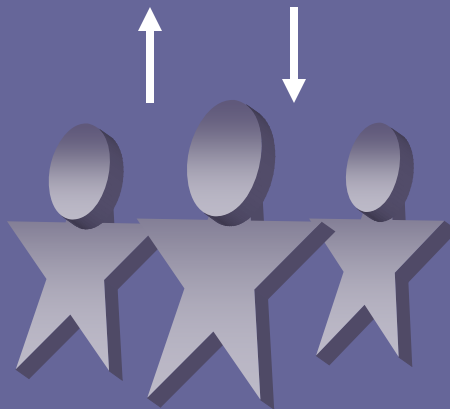
- Detailed results:
 - ABR, IPSI Reflex, DPOAE, TEOAE, Bone Conduction, Tympanometry, etc.
- Outcome
- Technology Used
- Audiological Recommendation
- Referrals and Follow-up



Capture of Audiological Data



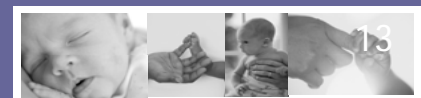
RITRACK



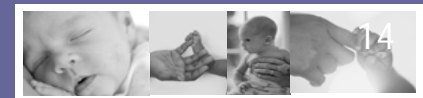
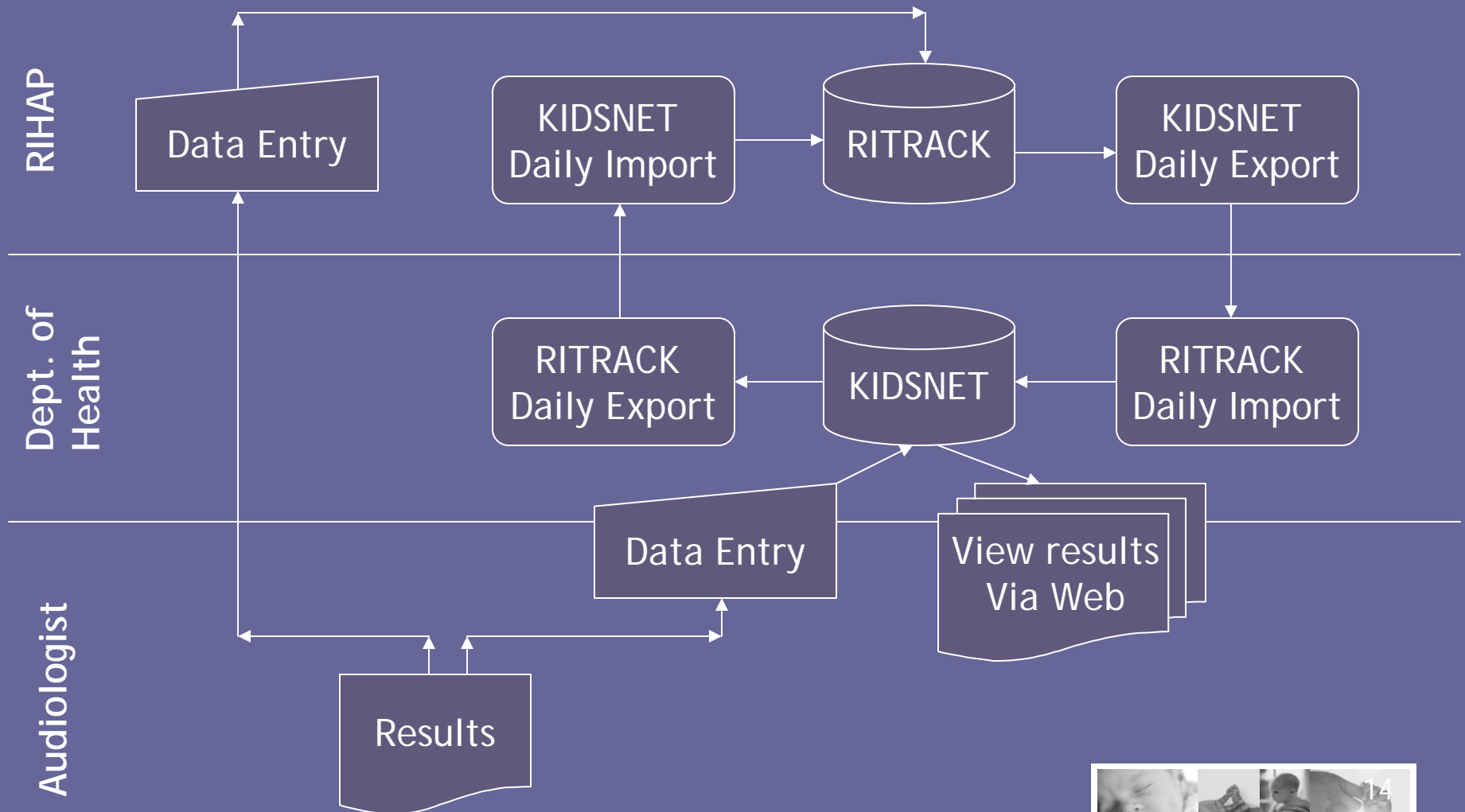
KIDSNET



Community
Audiologists



The Data Flow Illustrated



Audiology Data Entry with KIDSNET



- [Search](#)
- [Recently Viewed](#)
- [Demographics](#)
- [Child Summary](#)
- [Personal School Form](#)
- [Lead Poisoning](#)
- [Early Intervention](#)
- [Immunization](#)
- [WIC](#)
- Hearing Assessment**
- [Newborn Developmental Risk Assessment](#)
- [Home Visit](#)
- [Newborn Bloodspot](#)
- [Level 1 Screening](#)
- [Vision](#)

Hearing Assessment

Child Information -02/20/2008

Name: **JANE M DOE**

KIDSNET ID: **123456**

Detailed Audiological Diagnostic Information

Date:	02/20/2008	Audiologist:	Mary Catherine Hess
Diagnosis Left:	CONDUCTIVE FLUCTUATING	Diagnosis Right:	CONDUCTIVE FLUCTUATING
Degree Left:	MILD	Degree:	MILD

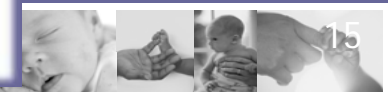
Risk Factors: **Meningitis**

Comments: **Referred by RIHAP**

[Delete Evaluation](#)

Audiological Recommendation: **Discharge**
Risk Factors: **Low Birth Weight**

Comments:



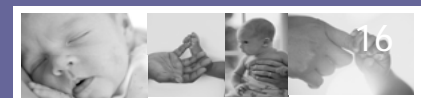
Advantages and Disadvantages of this Approach

Pros

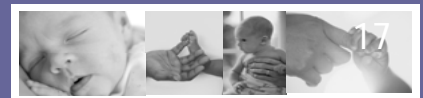
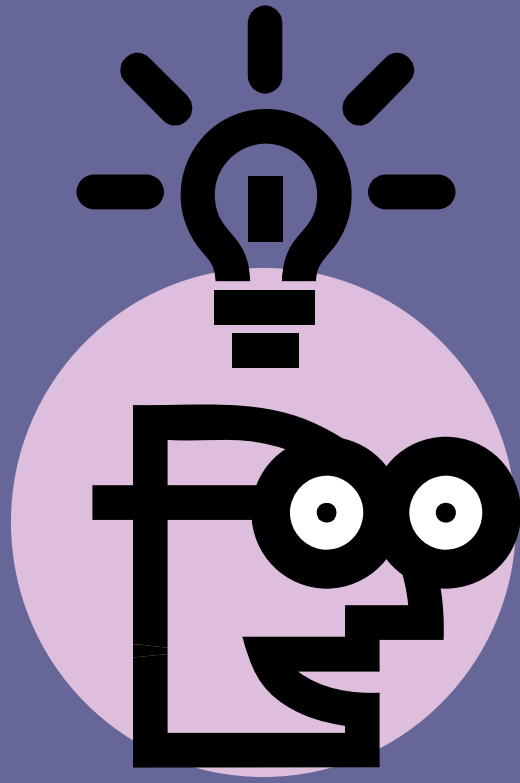
- *Leverages strengths of two types of child health information systems*
- *Provides common interface to providers*
- *Offers audiologists choice in data submission*
- *Helps promote follow up*
- *Provides platform for further enhancements*

Cons

- *Non-standard data exchange format*
- *Complexity of data flow*
- *Limited data model*



Questions



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