

Ensuring Current Standard of Practice in Infant Diagnosis

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Case Scenario 1

- Inpatient screen: refer right, pass left
- Outpatient screen: refer right, pass left
- Diagnostic, 3 months old: Tympanometry, OAEs and behavioral soundfield attempts.
- Results: “Inconclusive” in soundfield, absent OAEs and flat tympanograms. Follow-up testing scheduled.

Case Scenario 1

- Diagnostic, 9 months old: Tympanometry, OAEs and repeated behavioral soundfield attempts.
- Results: “Inconclusive” results behaviorally. Tympanometry results indicated middle ear effusion bilaterally. OAEs were absent.
- Recommendations: No ABR or follow-up was recommended in the reports.

Case Scenario 1

- Outcome:
 - Parents later concerned with speech and language, initiated referral to other facility.
 - Diagnosed with bilateral, profound sensorineural hearing loss at age 2.

Case Scenario 2

- History: Age –7 month old, Treacher Collins syndrome with bilateral microtia and atresia.
- Screening: Referred directly for diagnostic evaluation.
- Diagnostic: ABR air conduction clicks. No other testing completed.
- Results: Bilateral severe to profound hearing loss.
- Recommendations: BAHA

Case Scenario 3

- History: Referred by family practitioner to ENT at 13 months old because of parent concern of speech delay and no response to loud sounds.
- Treatment: PET tubes placed 6 weeks after initial appointment.
- Diagnostic: First Behavioral testing 4 months after PET placement, 18 months old.
- Results: Reported “inconsistent responses at 55 dB with patent PETs.”
- Recommendation: ENT recommended speech therapy, noting he was “confident his language will develop normally and his hearing will end up being normal.”

Case Scenario 3

- Diagnostic: 8 months after first evaluation, sedated ABR was performed in a different facility
- Results: Bilateral profound hearing loss.
- Diagnostic: Behavioral evaluation one month later confirmed bilateral profound SNHL.
- Recommendation: Hearing aids, fit at 29 months.

Case Scenario 3

- Outcome: At 37 months old, the child was referred for a cochlear implant evaluation, having only been diagnosed for 11 months and amplified for 8 months.

Case Scenario 4

- Inpatient screen: Refer bilaterally
- Outpatient screen: Refer bilaterally
- Diagnostic: Type of testing not available.
- Results: Moderate and mild undetermined hearing loss
- Recommendations: ENT evaluation to determine type of hearing loss. No follow-up appointments were scheduled with the audiologist.

Case Scenario 5

- History: Older child, developmentally delayed
- Diagnostic: Soundfield, no other specifics noted.
- Results: Report indicated the patient “quieted numerous times from 70-90 dB presentations”, but there is no indication what was presented.
- Recommendations: Digital hearing aids and FM system.