

# Newborn Hearing Screening (NBHS) Scripts for Screeners

## This section is said to each family before starting the NBHS

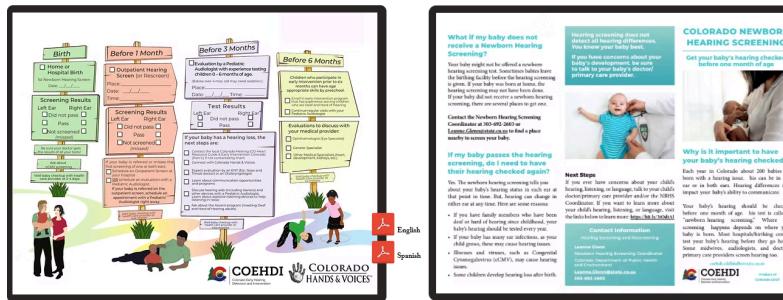
*Hi, congratulations on the birth of your baby! My name is \_\_\_\_\_.*

*I am here to screen your baby's hearing. This is part of your baby's regular newborn care. Hearing screening is safe and doesn't hurt. It takes just a few minutes. Most babies sleep through the screening. You will know the result as soon as the screening is complete. Sometimes the hearing screening cannot be completed on the first try. If that happens, we will simply come back to repeat the screen before you leave the hospital.*

*Before I begin, I'd like to ask you a couple questions:*

- *Is there anyone on either side of the family who was born with a hearing difference, or developed a permanent hearing difference in childhood?*
- *Do you have any questions about the hearing screening?*

These resources can be given to the parent(s)/caregiver(s): hospital/contracted company brochure, COEHDI NBHS brochure, and COH&V Roadmap For Families. These can be found here: <https://www.co-hv.org/vsv-program-1>



## Sharing a "Pass" Result

*We just completed the hearing screen. Your baby passed. It is important to pay close attention to your baby's hearing and speech development, because your baby's hearing could change. If you are ever worried about your child's hearing or speech, talk to your doctor right away and ask for a referral to an audiologist who is skilled at evaluating children.*

## Sharing a "Did Not Pass" Result

*We just completed your baby's hearing screening. They did not pass in (right/left/both) ear(s). This means another hearing screening is needed within the next 2 weeks. I cannot tell for sure whether your baby has a hearing difference. It is important to have your baby's hearing screened again, so if they have a hearing difference, they can access language as soon as possible.*

### **Screener Note- Do not give misleading messages or make statements intended to reassure parents.**

While it is tempting to give comforting statements to parents, they may prevent families from taking the necessary steps to determine if their child has a hearing difference. Some examples of **statements to avoid** are:

- ***The equipment is not working right.***
- ***It's just fluid or vernix.*** (We cannot assume this; most fluid is present for only a few hours following the birth).
- ***A c-section or water birth could impact the screening results.***
- ***The baby doesn't need follow-up testing.***
- ***Probably nothing is wrong.***
- ***A lot of babies don't pass.***
- ***The baby failed.***
- ***The baby has a hearing loss.***
- ***Or giving nonverbal messages of grief or worry.***

## **Next Steps after Inpatient “Did Not Pass” Results**

**If CMV testing for newborns who do not pass the hearing screening is not routine at your hospital:**

*“Ask your baby’s doctor about testing your baby for CMV, a virus that can cause hearing differences in newborns. This test should be done within the first 21 days of life. Here is a handout about CMV and hearing differences in newborns.”*

You can find the CMV handout by scanning the QR Code at the bottom of the page.

**If CMV testing for newborns who do not pass the hearing screening is routine at your hospital:**

*“At our hospital, we recommend that every baby who does not pass the newborn hearing screen be tested for CMV, a virus that can cause hearing differences in babies. This test should be done before your baby leaves the hospital. The test is simple and painless. To do the test, a nurse will collect a sample of your baby’s saliva or urine. The nurse can answer any questions you have about the test. Here is a handout about CMV and hearing differences in newborns.”*

You can find the CMV handout by scanning the QR Code at the bottom of the page.

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**If the hospital schedules the outpatient rescreening for the family:**

*“The appointment for another hearing screening will be made before you and your baby leave the hospital. This appointment should be completed within the next two weeks because any hearing differences need to be caught as soon as possible. Any delay in identifying hearing differences can impact your child’s language development.”*

**If the hospital does not schedule the outpatient rescreening for the family:**

*“Please be sure your baby is scheduled for another hearing screening. Please call as soon as possible to schedule the appointment. This appointment should be completed within the next two weeks.”*

## **Sharing a “Did Not Pass” Outpatient Rescreening Result**

*Your baby did not pass this additional hearing screen. This means your baby may have a hearing difference. The next step is to schedule an appointment with an audiologist who has experience testing infants. This next step is very important because this test will give more information about your baby’s hearing. It is important to find out early if there is a hearing difference so your baby has access to language as soon as possible.*

*For a list of pediatric audiologists in your area, see the COH&V Roadmap for Families. (Hand the family the Roadmap which can be found by scanning the QR Code at the bottom of the page.) Or make an appointment in house with our pediatric audiologists (if your hospital provides one).*

*It is important to schedule the test right away so it can occur within the next month. After the test, the audiologist will share more information about your baby’s hearing and next steps.*

*Early testing is important. If your baby does have a hearing difference, there is a lot of help available in Colorado. Your audiologist can connect you with resources to support you and your family during your journey.*

*Please tell your baby’s healthcare provider that your baby did not pass the hearing screening, and you will be taking your baby to see an audiologist for further testing. If your baby has not yet been tested for CMV, a virus that can cause hearing difference in newborns, ask the doctor to order that test. The CMV test should be done within the first 21 days of life. Please visit the CDC website for more information about CMV and hearing differences in newborns.*

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In addition to your hospital/contracted company brochures, it’s helpful to provide the family the resources below.

They can be found on the Colorado Hands & Voices website under the VSV tab: <https://www.co-hv.org/vsv-program-1> or scan the QR Code.



A live list monitored  
and updated by  
COH&V

[See our Pediatric Audiologist Near You Tab](#)

A voluntary listing  
sponsored by  
NCHAM

<https://www.ehdi-pals.org/default.aspx>

Why is my baby being tested for  
congenital CMV infection?

Your baby's doctor has recommended your baby be tested for a virus, or germ, called CMV. This stands for "cytomegalovirus." CMV is a common virus which is usually harmless, but can cause serious problems for newborns and young children. If a baby catches this virus before being born, it is called **congenital CMV**.

There are several reasons why a baby should be tested for CMV. The most common reasons are that: (1) the baby is small; or (2) the baby might have hearing loss.

This is the reason your baby is being tested:

The test for CMV should be done within the first 3 weeks of life. The test is easy and painless, using either saliva or urine. The sample is collected in a small tube and sent to a lab to be analyzed in a plastic bag. The test result comes back in 3-7 days. The result is sent to the doctor who ordered the test, the hospital and the doctor who will be seeing your baby after you go home from the hospital.

Your baby's doctor is:

That doctor's phone number is:

If you have not been told the result of this test by the time your baby is 10 days old, call your doctor to ask about the result. If the test shows your baby has congenital CMV infection, your baby's doctor will order more tests and talk to an expert about what to do next.

To learn more about CMV in newborns, you can look at these websites:

Centers for Disease Control: [www.cdc.gov/congenitalcmv](http://www.cdc.gov/congenitalcmv)

National CMV Foundation: [www.cdc.gov/congenitalcmv](http://www.cdc.gov/congenitalcmv)

If you want to talk with a family that has a child with congenital CMV, send an email to the Colorado CMV Family Network at [CMV@co-hv.org](mailto:CMV@co-hv.org)

Colorado Chapter  
Family Network

American Academy of Pediatrics  
DEDICATED TO THE HEALTH OF ALL CHILDREN



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COEHDI Scripts

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