

§2264. Identification of hearing impairment in infants

A. The office of public health in the Department of Health and Hospitals shall establish, in consultation with the advice of the Louisiana Commission for the Deaf and the advisory council created in R.S. 46:2265, a program for the early identification and follow-up of infants at risk, hearing impaired infants, and infants at risk of developing a progressive hearing impairment. That program shall, at a minimum:

- (1) Develop criteria or factors to identify those infants at risk for hearing impairment and infants at risk of developing a progressive hearing impairment, including the risk factors set forth in this Chapter, and develop an at-risk questionnaire for infant hearing loss.
- (2) Create an at-risk registry to include, but not be limited to, the identification of infants at risk for hearing impairment, hearing impaired infants, and infants at risk of developing a progressive hearing impairment.
- (3) Provide to the hospitals and other birthing sites the at-risk questionnaire for infant hearing loss and require that the form be completed for any newborn prior to discharge from the hospital or other birthing site. As to infants at risk, copies of the completed at-risk questionnaire shall be distributed to the at-risk registry of the office, the parent or guardian, and, if known, the infant's primary care physician and the provider of audiological services.
- (4) Require for all newborn infants that the hospital of birth or that hospital to which the newborn infant may be transferred provide screening for hearing impairment by auditory brainstem response (ABR) screening, or evoked otoacoustic emissions (EOAE) screening, or any other screening device approved by the office before discharge. The results of that screening for hearing impairment shall be provided to the at-risk registry of the office of public health, the parent or guardian, and if known, the primary care physician and the provider of audiological services.
- (5) Develop and provide to the hospitals or other birthing sites appropriate written materials regarding hearing impairment, and require that the hospitals or other birthing sites provide this written material to all parents or guardians of newborn infants.
- (6) Develop methods to contact parents or guardians of infants at risk, of hearing impaired infants, and of infants at risk of developing a progressive hearing impairment.
- (7) Establish a telephone hotline to communicate information about hearing impairment, hearing screening, audiological evaluation, and other services for hearing impaired infants.
- (8) Provide that when screening for hearing impairment indicates a hearing loss, audiological evaluation shall be done as soon as practical. The parents or guardians of the infant shall be provided with information on locations at which medical and audiological follow up can be obtained.

B. The office shall consult with the advisory council and implement the program.

C. The office shall develop a system for the collection of data, determine the cost-effectiveness of the program and disseminate statistical reports to the Louisiana Commission for the Deaf.

D. The office, in cooperation with the state Department of Education, shall develop a plan to coordinate early educational and audiological services for infants identified as hearing impaired.

E. The office shall follow current practices and applicable guidelines that are currently utilized in Louisiana and will consider practices and guidelines that may be established by the National Institute on Deafness and other Communication Disorders (NIDCD).

Acts 1992, No. 417, §1; Acts 1999, No. 653, §1.

§2266. Powers, duties, functions of the advisory council

The advisory council shall:

- (1) Advise and recommend risk factors or criteria for infants who are at risk of hearing impairments and infants at risk of developing a progressive hearing impairment.
- (2) Advise the office as to hearing screening, setting standards for the program, monitoring and reviewing the program, and providing quality assurance for the program.
- (3) Advise the office as to integrating the program for early identification of hearing impaired infants with existing medical, audiological, and early infant education programs.
- (4) Advise the office as to materials to be distributed to the public concerning hearing impaired infants.
- (5) Advise the office on the implementation of the program for early identification and follow up of infants at risk, hearing impaired infants, and infants who are at risk of developing a progressive hearing impairment.

Acts 1992, No. 417, §1.