

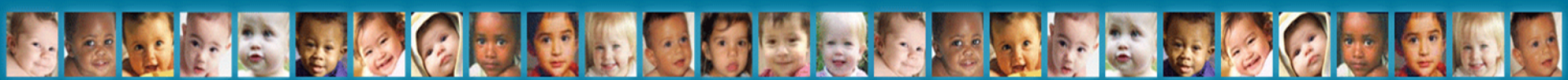
# The Newborn Hearing Screening Training Curriculum

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## Exciting Updates to the NHSTC

Randi Winston-Gerson, AuD, FAAA

The National Center for Hearing Assessment and Management  
at Utah State University (NCHAM)

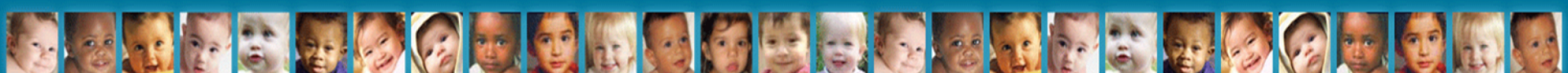


# Special Thanks

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To Will Christiansen, NCHAM webmaster, for his dedication and continued work in developing a variety of formats to facilitate online learning, creating a data collection mechanism and addressing ongoing technical assistance needs



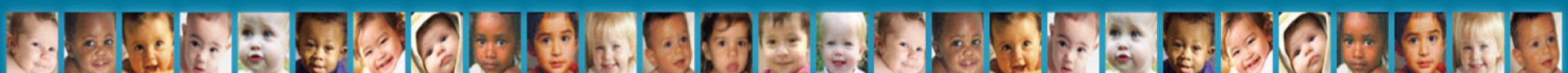


# Special Thanks

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Tyson Barrett @ USU for assisting with the data analysis

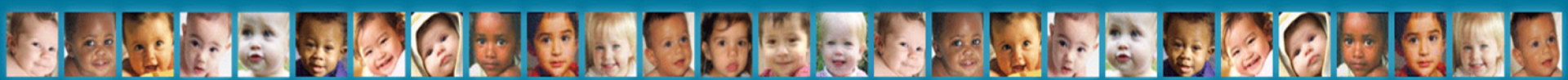
Melissa Tumblin, Executive Director of the Ear Community for assisting with the parent script on Atresia/Microtia



# Learning Objectives

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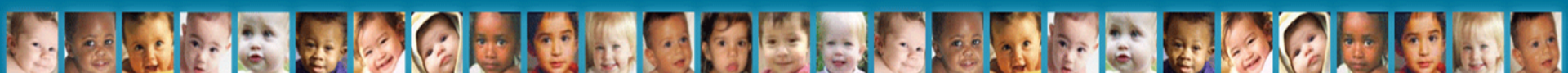
- Demonstrate how the NHSTC has benefited hospital screeners
- Describe recent and upcoming changes to the NHSTC
- Discuss how the NHSTC is being used as a quality improvement tool in EHDI programs



# NHSTC Objective

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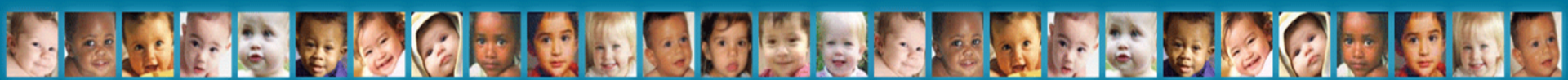
*To improve the standard of care to babies and families for screening and follow-up, through efficient practices resulting from quality, comprehensive, standardized training*



# Benefits to Screeners

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- Defines and reinforces NHS as a comprehensive program, comprised of many critical components
- Instills knowledge which is powerful for self confidence



# Benefits of State EHDIs Institutionalizing the NHSTC for Screener Training

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- Provide a consistent training solution for hospital and out-of-hospital screeners
  - Quality Assurance
  - Competency based training tools
  - Consistency in knowledge for all screeners
- Standardizes training procedures
  - Unconventional methods can lack standardization and continuity
  - Information gets lost in transition between trainers
  - Dilution of training quality over time
- Provides a mechanism for documentation of competencies



# NHSTC 12 year evolution

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# About the Process

EHDI 2006

- Developed outline
- Presented at EHDI 2006 Conference
  - Gathered feedback from attendees
- Pulled together team
- Conducted many weekly meetings, held face to face meetings whenever possible
- Sent out preliminary version for review
- Conducted pilot project with 8 states



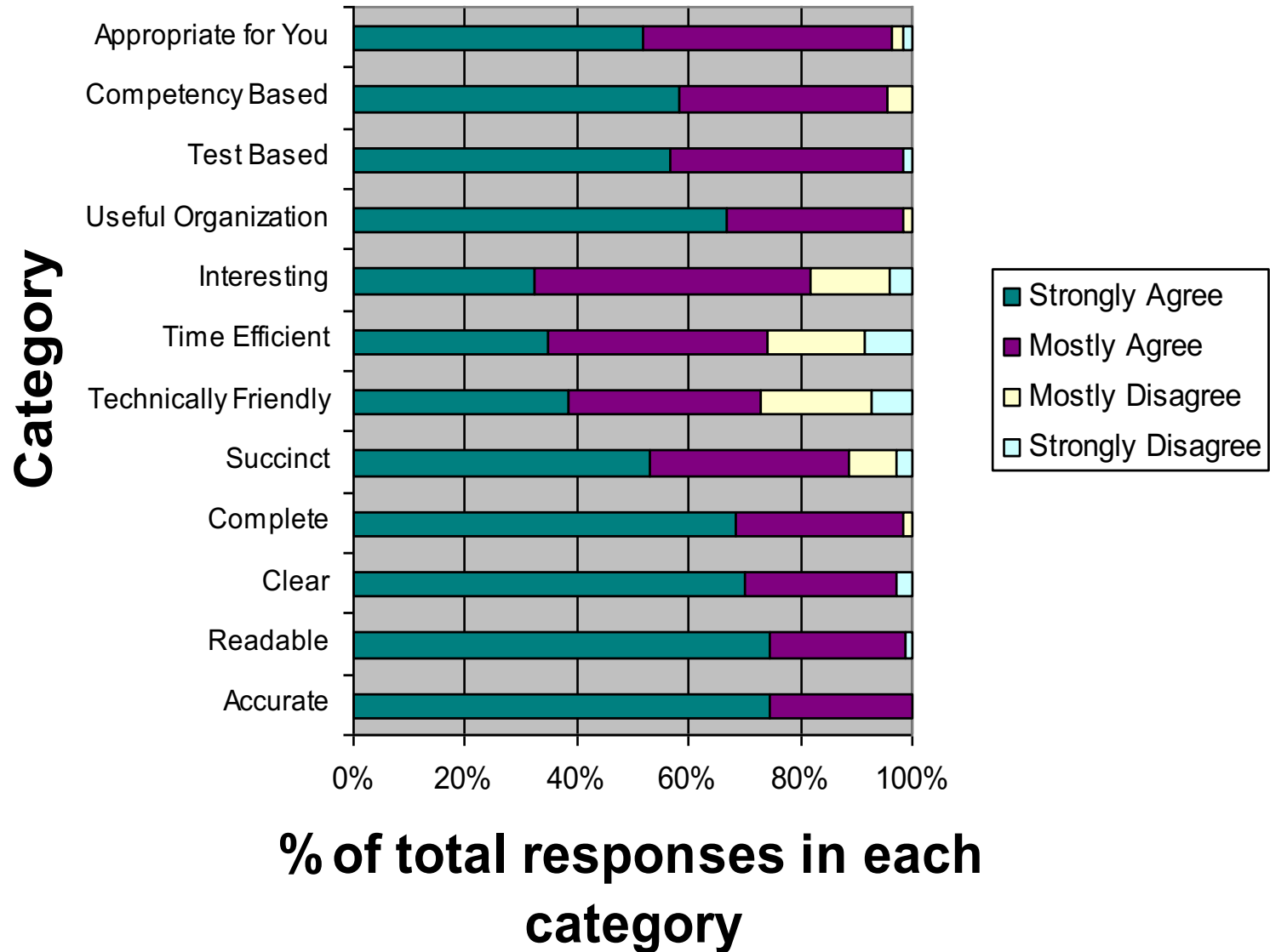
# The Pilot Project

DVDs and evaluation forms sent to 10 EHDI State Coordinators

- Each disseminated to 2 - 3 hospitals
- Received 73 evaluations
  - 18 hospitals
    - experienced and new screeners
    - program coordinators
  - EHDI Coordinators
  - audiologists

**EHDI 2008**

# Summary Review of Training



# Newborn Hearing Screening Training Module

Randi Winston, Au.D

Lylis Olsen, MS, MPH

Diane Sabo, Ph.D.

Karen Ditty, Au.D.

Marlene Hesley, R.N.

Karen Munoz, Ed.D.,

Terry Foust, Au.D.

**EHDI 2007**



# Rationale for Developing Materials

- Large number of screeners nationally
- High turnover in staff
- Limited Resources (state and local)
- Current training procedures lack standardization
  - Information gets lost in transition between trainers
  - Dilution of training quality over time
- Hospital need for
  - Quality Assurance
  - Competency based training tools

# Final Product

- Power Point format
  - Easily incorporated into a hospital's intranet
  - Allows individual programs flexibility
- Video clips to enhance dialogue
- Linkages to equipment sites
- Competency tests
- Competency checklists

# 8 Sections

1. Introduction to Newborn Hearing Screening
2. About Ears and Hearing
3. Getting Ready to Screen
4. Screening with OAE
5. Screening with ABR
6. Communicating with Parents and the Medical Home
7. Completing the Screening Process
8. Screening Babies with Risk Indicators

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# Introduction to Universal Newborn Hearing Screening

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## Section 1



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# Learning Objectives

## **The screener will learn:**

- The definition of screening
  - The impact of screening
  - About the early hearing detection and intervention (EHDI) process
-

---

# What is a Screening?

Screening is the first step in finding the babies that need additional testing to identify a hearing loss



---

# Impact of Screening

- Critical period for developing speech and language is between birth and three years
  - Without newborn hearing screening, hearing loss is detected late, resulting in delayed speech and language development
-

---

# 1 - 3 - 6 National EHDI Goals

- **1** Screen for hearing loss before one month of age
  - **3** Diagnose hearing loss before three months of age
  - **6** Enroll in early intervention programs before six months of age
-

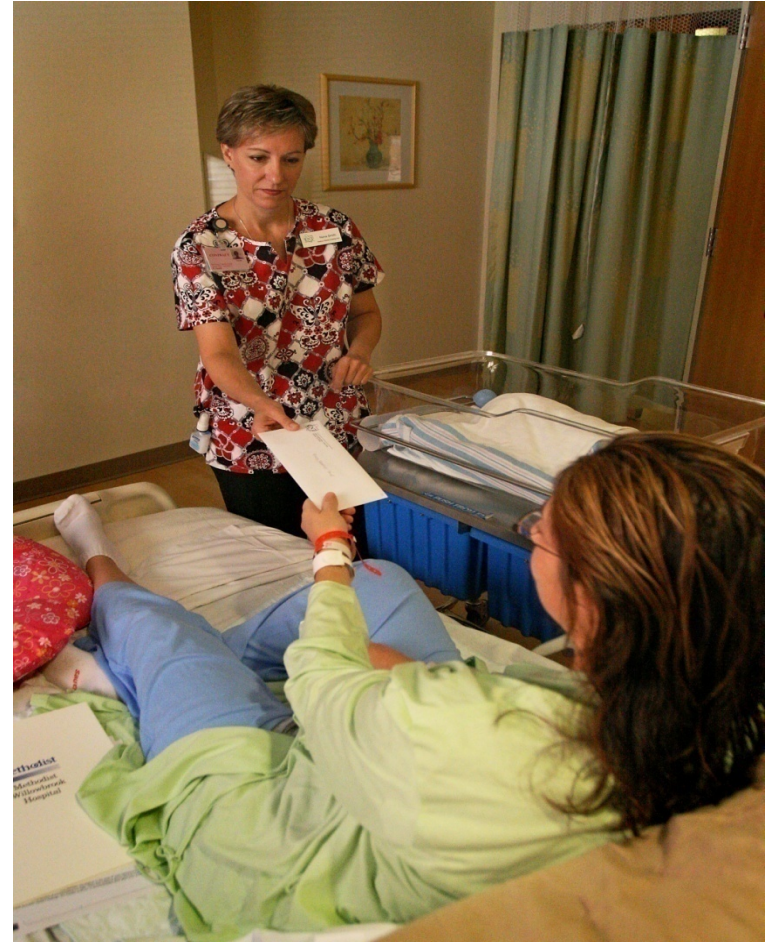
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# Section 1 - Test

- 5. In order to reach the EHDI National Goals, all babies must be screened by:**
- a) 1 month of age
  - b) 3 months of age
  - c) 6 months of age
  - d) None of the above
-

# Parent Notification

- Inform parents about the newborn hearing screening procedure
- Refer to your hospital guidelines regarding procedures



# Preparing Baby for Screening

- Optimal state for screening babies
  - Sleeping
  - Quiet
  - Well fed
  - Comfortable
- Swaddled
- Sucking on a pacifier





---

# Learning Objectives

## **The screener will learn:**

- About OAEs
  - How to screen accurately and efficiently with OAEs
  - How to troubleshoot
  - Special considerations for screening babies with OAEs
-

---

# Position of the Screener



Good Position



Bad Position

---

# Placing the Probe in the Baby's Ear



# Special Considerations

- NICU babies
- Screening babies re-admitted after discharge
- Follow-up testing



---

# Learning Objectives

## **The screener will learn:**

- About Auditory Brainstem Response (ABR)
  - How to screen accurately and efficiently with automated ABR
  - How to troubleshoot
  - Special considerations for screening babies with automated ABR
-

---

# ABR Screening Steps

- Baby should be sleeping or very quiet
  - Environment should be quiet
  - Inspect the ear
  - Carefully place electrodes
  - Ensure good impedance
  - Properly place the earphone or probe
-



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# Improving Impedance

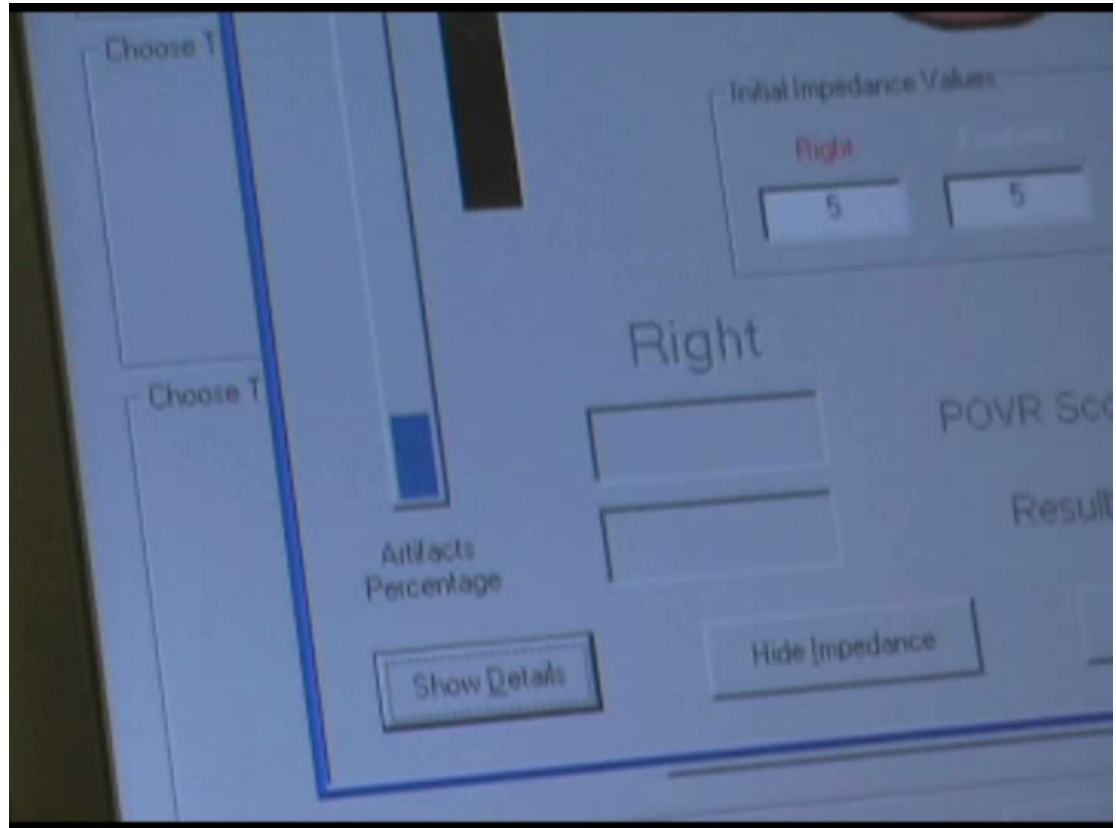
- Electrode placement on a scrubbed area
- Issues with electrodes sticking
- Apply electrode paste under electrode to reduce impedances





# Important Considerations to Reduce Myogenic Noise

- Baby fed prior to testing
- Baby swaddled and comfortable
- Use neck roll
- Baby sleeping
- If sucking, remove pacifier



---

# Troubleshooting Automated ABR

- Make sure baby is in a quiet state
  - Remove pacifier if baby is vigorously sucking
  - Make sure that the environment is quiet
  - Check placement and seal of earphones
  - Check probe fit
  - Ensure proper placement of electrodes
  - Check cable and cord connection
  - Check electrical noise
-

---

# Do NOT Screen Repeatedly

- Remember your goal is NOT to pass every baby
  - A baby with a hearing loss may falsely pass with multiple screenings
  - Screening repeatedly is not cost effective or an efficient use of time
-

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# Communicating with Parents and the Medical Home

## **Section 5**

---

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# Language and Culture

- Be sensitive to cultural differences when communicating with families
  - Use an interpreter to communicate with non or limited English speaking parents
-

# A Not Passing Result

- Simply and clearly convey results verbally
- Provide written communication regarding test results
  - Report
  - Letters
  - Brochures



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# Completing the Screening Process

The hearing screen is considered **incomplete** if the entire screening process is not completed prior to discharge



# Missed Babies

Babies that are discharged before screening is conducted or completed





# Good Record Keeping = Good Data

The screenshot displays a medical software window titled "Demographics for Jasper, BB". The window includes a top menu bar with options like "Letters", "Reports", "Merge", "Tools", "Settings", and "Log Out". The main content area is divided into two sections: "Baby" and "Primary Contact".

**Baby Section:**

- Medical ID: 2352349898
- Birth-Date: 2/ 7/2007
- Birth Facility: Green River Regional
- Name-Last: Jasper
- Time: 00 : 00
- Nursery: SPECIAL CARE - LEVEL II
- First: BB
- Order: Single
- Location: [blank]
- Middle: [blank]
- Weight: [blank] g
- Gender: -Blank-

**Primary Contact Section:**

- Insurance: [blank]
- Gest. Age: [blank]
- Physician: Shah, Karmen - Pediatricians
- Race: [blank]
- ICU Days: [blank]
- Alt. ID: [blank]
- Deceased:
- Mother requested follow-up visit for 4/1/2007...

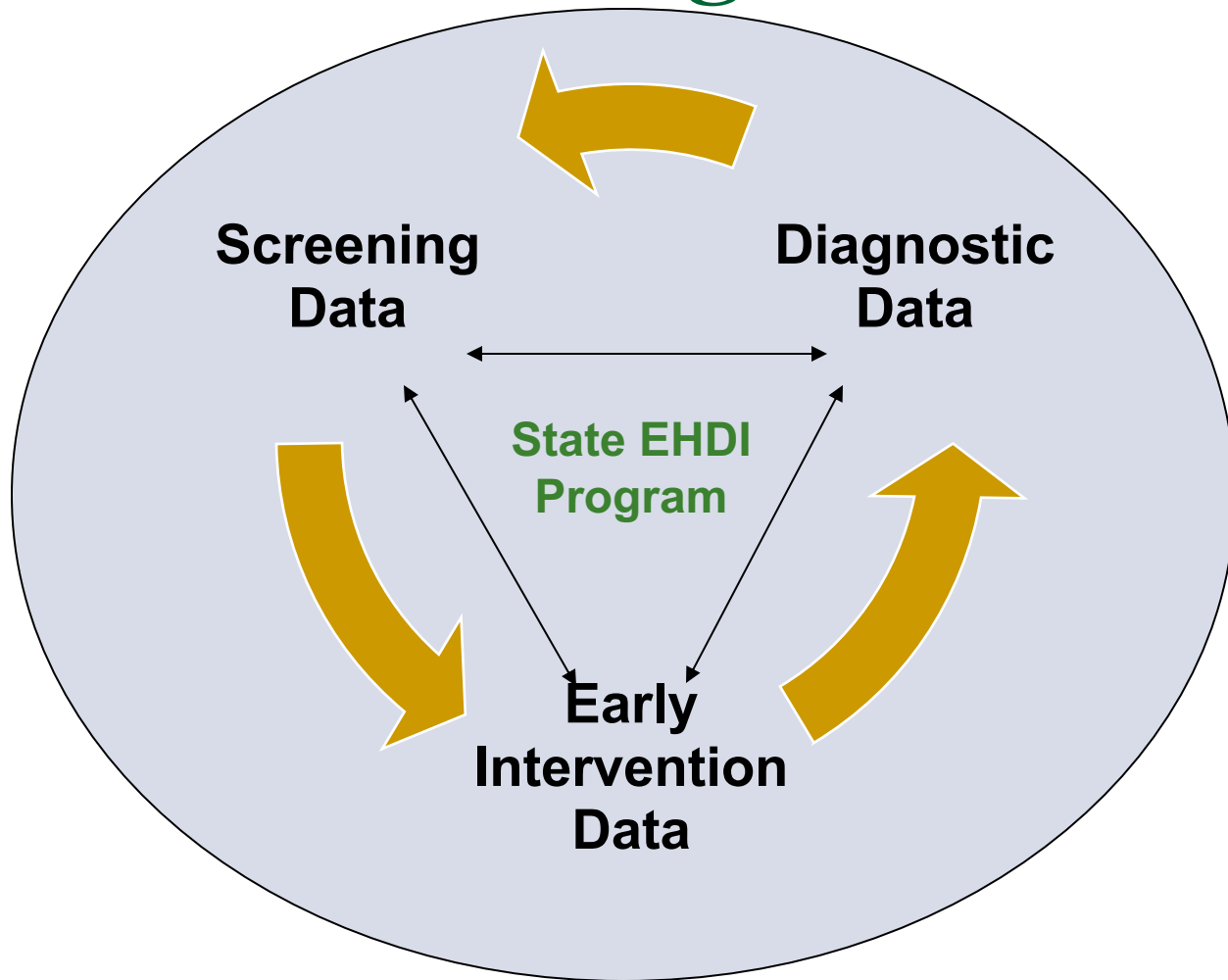
**Primary Contact Fields:**

- Name-Last: Jasper
- Address: [blank]
- Phone: 801-555-2311
- First: Cathy
- Ph 2: [blank]
- Middle: [blank]
- City/State/Zip: [blank]
- Email: [blank]
- Medical ID: [blank]
- County: [blank]
- Birth Mother:
- Birth Date: [blank]
- Language: [blank]
- Title/Suffix: [blank]
- Race: [blank]
- Gender: -Blank-
- Education: [blank]
- Ethnicity: [blank]
- Deceased:

A "Save" button is located at the bottom right of the form. The change date is 11/12/2007 2:10:28 PM.

Documentation is the printed, written and electronic record of each baby's screen and is part of that baby's medical record

# How Screening Data is Used by the State EHDI Program



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# Reducing Loss to Follow Up

- Use an interpreter when needed
  - Provide written materials in parent's language
  - Ensure an appointment for follow-up is made prior to discharge including:
    - Where they need to go for follow-up screening
    - Scheduling an outpatient screen within two weeks of discharge
  - Verify contact information and obtain an alternate contact name and phone number
  - Verify the Primary Care Provider (PCP) and communicate results to him or her
-

# Communication to Providers

- Ensure providers are immediately informed
  - Faxing
  - Letters
  - Phoning



# What is a Risk Indicator?

There are certain factors (indicators) that place children at risk for hearing loss that are either present at birth (congenital) or may develop in infancy, or later in childhood (late onset or progressive).



---

# What are the JCIH 2007 Risk Indicators?

- Parent concern
- Family history of permanent childhood hearing loss

For more information, visit <http://www.jcih.org>

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# What are the Risk Indicators?

If an infant has needed:

- Neonatal intensive care for more than 5 days
  - Assisted ventilation for 10 days or more
  - Ototoxic meds for 7 days or more
    - E.g: Gentamycin, Tobramycin, or loop diuretics (furosemide, Lasix)
-

---

# Outpatient Screening: Rescreening

## **Section 8**

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# Learning Objectives

## **The screener will learn about:**

- The critical timeframe for rescreening
  - Outpatient screening methods
  - Communication
  - Documentation
-

---



Re-screen Before One Month of Age

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# NHSTC Status

- **First release July 2008**
- **Sold out first cut: shipped over 1450 copies**
  - **All State EHDI Coordinators, AAP Chapter Champions**
  - **State orders: AZ, AR, CA, CO, GA, HI, IN, IL, KS, KY, MN, NB, ND, NJ, NH, PA, RI, UT, WA.**
  - **Ireland, Canada**
- **Recently Updated: 12-08**
  - **Fixed known technical glitches, Added scripts for high risk babies, added pictures**
- **2000 more copies produced**



**EHDI 2009**

# What Does the NHSTC Consist of?



- 1 - Introduction to Newborn Hearing Screening
- 2 - Getting Ready to Screen
- 3 - Screening with Otoacoustic Emissions
- 4 - Screening with Automated Auditory Brainstem Response
- 5 - Communicating with Parents and the Medical Providers
- 6 - Completing the Screening Process
- 7 - Screening Babies with Risk Indicators
- 8 - Outpatient Screening/Re-screening

# Resources Disc

## For Screeners

- Scripts for communicating with parents in both English and Spanish
- Frequently Asked Questions
- Links to related websites
- Glossary

## For Program Managers

- Competency checklists
- Test questions and answers
- JCIH 2007 Position Statement and Program Checklist

# Solution is a 2-Disk Set

## All the critical information for quality newborn hearing screening.

The Curriculum Disc will play on a standard movie DVD player or on a computer with DVD movie player software.

- Insert the DVD into the player and choose the section from the menu that you want to view.
- After choosing a section you can:
  - Play Automatically
  - Play Manually (pause after each slide)
  - Thumbnails (preview each slide)
- For Manual Play and Thumbnails, use the "Next Chapter" button on your remote to advance to the next slide.
- Use the pause button on your player to pause the playback at any time.

The Resources Disc is a computer data disc. It can be used with either a Windows or Macintosh computer. The files on the disc are in Microsoft Word (.DOC) and Adobe Acrobat (.PDF) format. You may need to install the Adobe Acrobat Reader program in order to view the Acrobat PDF files.



(C) 2008 National Center for Hearing Assessment & Management

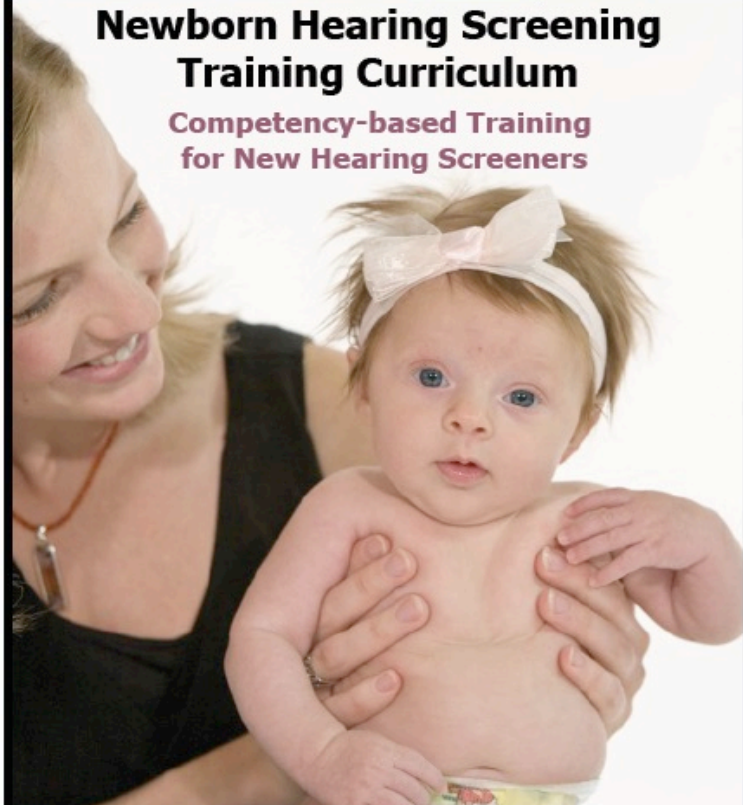
Newborn Hearing Screening Training Curriculum

2 Disc Set



## Newborn Hearing Screening Training Curriculum

Competency-based Training for New Hearing Screeners





# Streaming Video on infanthearing.org

The screenshot shows a web browser window with the URL [http://www.infanthearing.org/nhstc\\_dvd/index.html](http://www.infanthearing.org/nhstc_dvd/index.html). The browser's address bar also shows a search for "n hearing screening training curriculum". The website header features a navigation bar with "Home" and "Search" links, and a decorative banner of many baby faces. Below the banner is a search box and a navigation menu. The main content area displays the title "Newborn Hearing Screening Training Curriculum" and a breadcrumb trail "Home » Resources » NHSTC". A central image shows a DVD cover for the "Newborn Hearing Screening Training Curriculum" with the subtitle "Competency-based Training for New Hearing Screeners". To the right of the image is a button labeled "NHSTC Links" with sub-links for "Streaming Video" and "DVD Order Form". Below the image, there is a paragraph of text starting with "We are very pleased to announce our new Newborn Hearing Screening Training Curriculum (NHSTC) DVD..." followed by two paragraphs of descriptive text and two links: "Click here to watch the curriculum as streaming video" and "Click here to order the curriculum on DVD". The left sidebar contains a search box and a navigation menu with sections: "Who We Are", "EhDI Components", and "EhDI Resources".

SEARCH WEB SITE

NAVIGATION

- Who We Are
  - Our Background
  - EhDI National Resource Center
  - Research Projects
  - Contact Us
- EhDI Components
  - Newborn Hearing Screening
  - Early Childhood Hearing Screening
  - Diagnostic Audiology
  - Early Intervention
  - Family Support
  - Medical Home
  - EhDI Legislation
  - Data Management
  - Program Evaluation
  - Financing & Reimbursements
- EhDI Resources
  - Resource Center Home
  - Issues & Evidence
  - Addressing Privacy Regulations
  - 3CH 2007
  - EhDI/AHHS FAQ
  - Slideshow Presentations
  - Ed. & Training Videos
  - Fact Sheet [PDF](#)
  - Upcoming Events
  - Links
  - Even More...

Home » Resources » NHSTC

## Newborn Hearing Screening Training Curriculum

Last Modified: 11/04/2008

**Newborn Hearing Screening Training Curriculum**  
Competency-based Training for New Hearing Screeners

**NHSTC Links**

- Streaming Video
- DVD Order Form

We are very pleased to announce our new Newborn Hearing Screening Training Curriculum (NHSTC) DVD. This curriculum was developed to standardize the way that new hearing screeners are trained and to ensure that each screener receives the information that will enable them to provide high quality, efficient and effective newborn hearing screening. We feel confident that it will be a wonderful educational resource for your hospitals to use for training screeners.

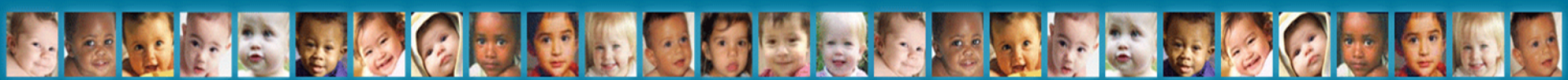
Although the NHSTC was developed to specifically address the training needs of the inexperienced screener, you may find it useful for other training or education needs; for instance, the first section contains materials that may be helpful in educating others about the importance of early hearing detection and intervention.

The package contains 2 discs; the first disc is the curriculum. It is formatted for DVD movie viewing. The DVD contains 8 sections; and covers all aspects of the newborn hearing screening and follow-up process. Each section has learning objectives and a test at the end of each section that can be used to fulfill hospital competencies. The second disc contains resources and includes items such as scripts and frequently asked questions for screeners to use with parents in Spanish and English, related websites, and test questions and answers.

We hope that you will find these materials useful in assisting newborn hearing screening programs improve their standard of care to the babies and families in your state through efficient, effective, and comprehensive screening practices.

[Click here to watch the curriculum as streaming video](#)

[Click here to order the curriculum on DVD](#)



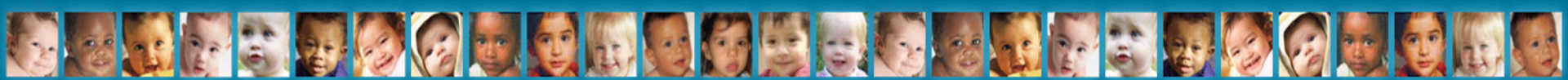
# Illinois EHDI Pilot Study

## *Background*

**EHDI 2011**

- Purpose
  - To investigate learning, screening and follow-up outcomes from the NHSTC
- Primary Goal of the study
  - To increase screener knowledge and confidence in all aspects of the NHS process
- Aim of the study
  - To increase the number of parents connected to the next step if baby fails the screening
  - To improve hospital NHS program outcomes



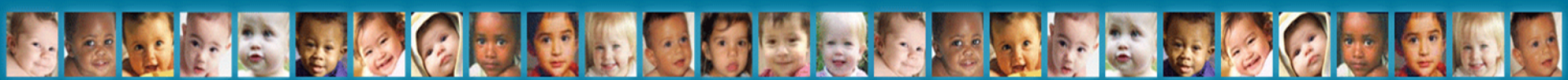


# Illinois EHDI Pilot Study

## *Instruments*

---

- Prior to the training screeners completed
  - Screener Information Questionnaire
  - Pre-test
- Following the training the screeners completed
  - Post Training Questionnaire
  - Post-test
- Parent Survey
- Hospital Screening Statistics Form

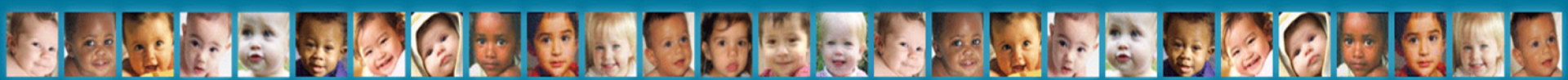


# NHSTC Web

(Funded by IL EHDI and NCHAM)

---

- Web format, accessible through the NCHAM Website....
- Designed to be a “One Stop Training Shop” for hospital screening programs
  - Screener training (based on initial product)
  - Hands on demonstration videos
  - Adult learning tools
  - Added Resources, a link to state specific information



# NHSTC Web

---

- Babies with Risk Indicators updated
- Parent Scripts Role Modeling
- Parent Videos
- Pre-tests
- Updated photos of different intervention options

# MAIN MENU



Use the drop down to go to a page.

Splash Page



## Module 1

[Introduction to Screening](#)

## Module 2

[Preparing to Screen](#)

## Module 3

[Screening with OAE/A-ABR](#)

[Screening with OAE](#)

[Screening with A-ABR](#)

## Module 4

[Communicating with Parents & Providers](#)

## Module 5

[Completing the Screening Process](#)

## Module 6

[Screening Babies with Risk Indicators](#)

## Module 7

[Outpatient Screening & Re-screening](#)

[Resources](#)

[Back](#)

[Next](#)



# Introduction to Newborn Hearing Screening



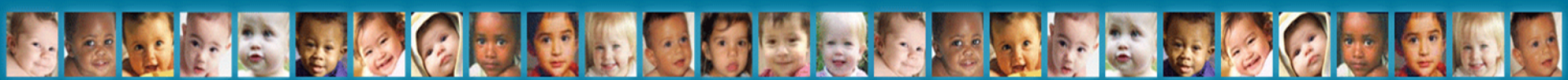
## Module Introduction



### Module Introduction

In this module we'll discuss the definition of screening, the impact of screening and about the early hearing detection and intervention or EHDI, process. To better demonstrate the importance of training let's listen in on pediatric audiologist Beth. She's just started to train Jordan on how to



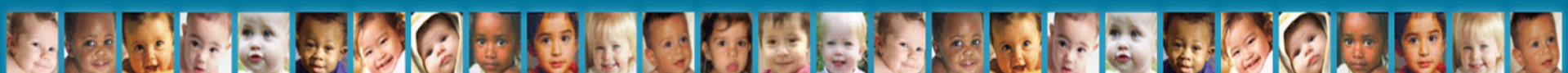


# Overview of Webpage and Other Features

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[www.infanthearing.org](http://www.infanthearing.org)

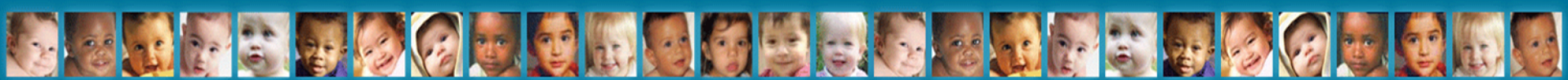
- HTML Course
  - Simple viewing
  - No registration
  - No tracking of outcomes
  - No certificate or CEUs



# Overview of Webpage and Other Features

---

- Moodle course
  - An elearning management system
  - Registration required
  - Allows for competency based learning and tracking of outcomes
    - pre and post tests
    - pre and post self assessment survey
    - CEUs (AAA and NAP NAP)
    - NCHAM Certificate of Completion

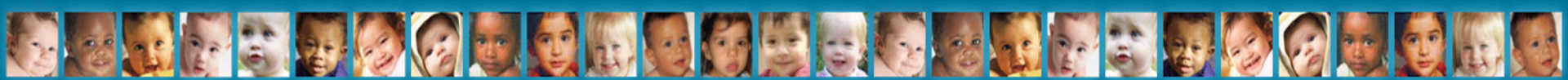


# Certificate of Completion and CEUs

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- NCHAM Certificate of Completion upon obtaining a score of 80% or better on the Moodle course posttest
- .2 CEU Credits
  - American Academy of Audiology (AAA)
  - National Association of Pediatric Nurse Practitioners (NAPNAP)





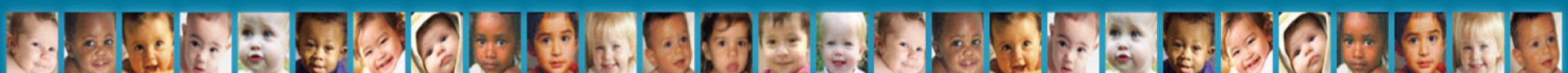
Data Analysis 2015 N=1,200

**Data Analysis 2018 N=5,904**

---

Measures:

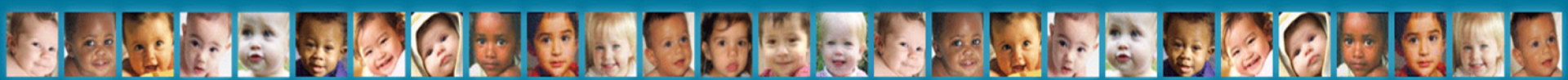
1. Did participants show an improvement in pre-test versus post-test knowledge?
2. Did participants feel increased confidence as a result of taking the NHSTC?
3. What is the frequency of use by state?



# Covariates for Consideration

---

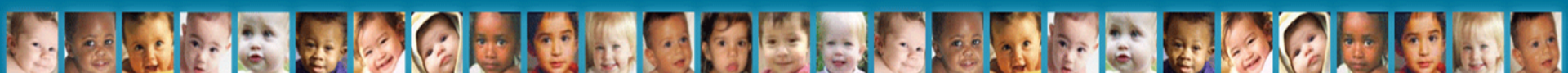
1. What job position do they hold?
2. Did their scores vary based on discipline?



# Data Analysis Measures

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- Self Assessment Pre-Training
- Self Assessment Post-Training
- NHSTC Pretest
- NHSTC Posttest



# Measures 1

## Self- Assessment Pre-training Tool

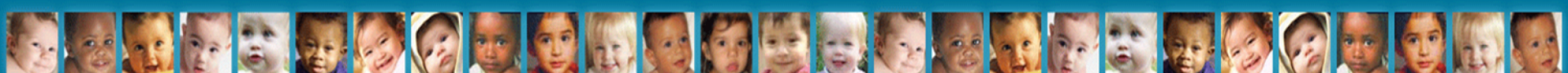
---

Rate the extent to which you agree or disagree with the statements using the following scale:

1 = Strongly Disagree 2 = Disagree 3 = Not sure 4 = Agree 5 = Strongly Agree

I am confident in my ability to:

- Educate parents about the importance of newborn hearing screening
- Conduct an OAE screening
- Perform OAE troubleshooting
- Conduct an A-ABR screening
- Conduct A-ABR troubleshooting
- Conduct screening on NICU Babies and babies with risk factors
- Tell parents the results when the baby passes the screening
- Tell the parents the results when the baby fails the screening
- Connect parents to outpatient testing when needed



# Self- Assessment Post-Training Tool

---

Rate the extent to which you agree or disagree with the statements using the following scale:

1 = Strongly Disagree 2 = Disagree 3 = Not sure 4 = Agree 5 = Strongly Agree

This training section provided me with useful information that increased my confidence in the following areas of newborn hearing screening:

- The Benefits of Newborn Hearing Screening
- Getting Ready to Screen
- Screening with Otoacoustic Emissions (OAEs)
- Screening with Automated Auditory Brainstem Response (A-ABR)
- Communicating with Parents and the Medical Providers
- Completing the Screening Process
- Screening Babies in the NICU and with Risk Indicators
- Outpatient Screening: Rescreening



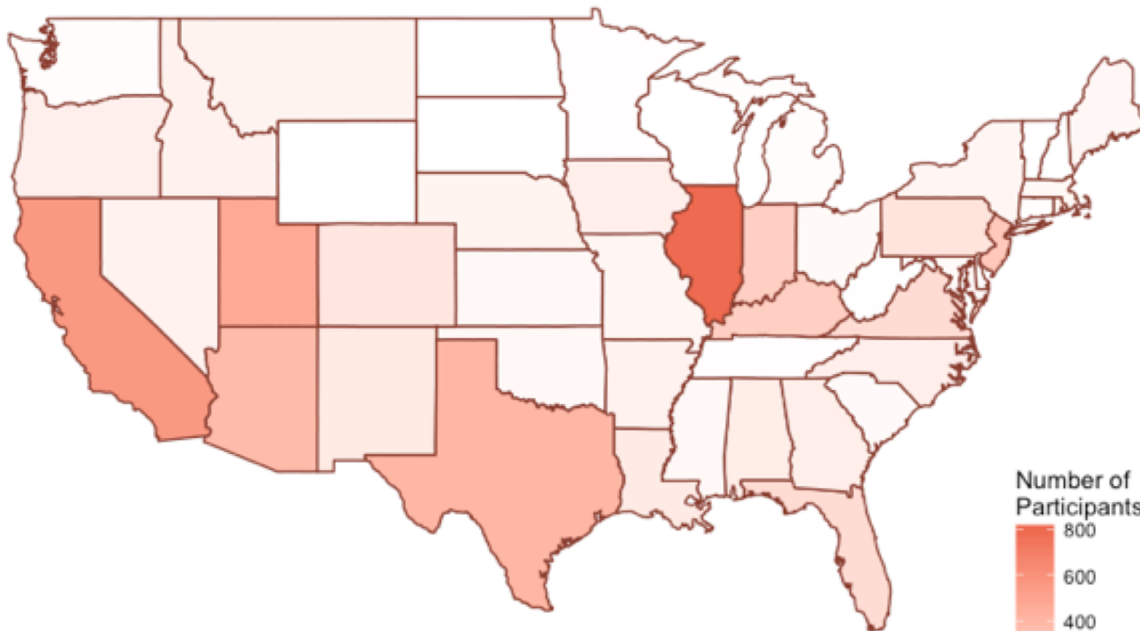
# Distribution of NHSTC Graduates

From August 2015 through January 2018  
**5,904** people completed the curriculum

**# of graduates**

**from:**

Illinois	807
California	563
Utah	476
Texas	398
Arizona	376
New Jersey	304

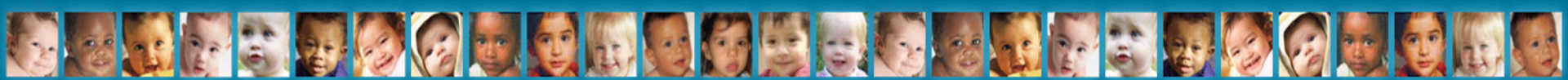


**The NHSTC has been complete by people from 14 foreign countries:**

**(Australia, Cambodia, Canada, East Africa, England, India, Korea, Lebanon, Mexico, Pakistan, Qatar, Saudi Arabia, Singapore, and South Africa)**

[\(\(\( infanthearing.org](http://infanthearing.org)

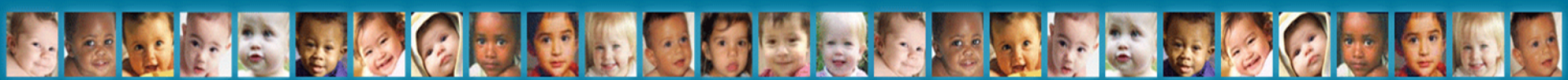




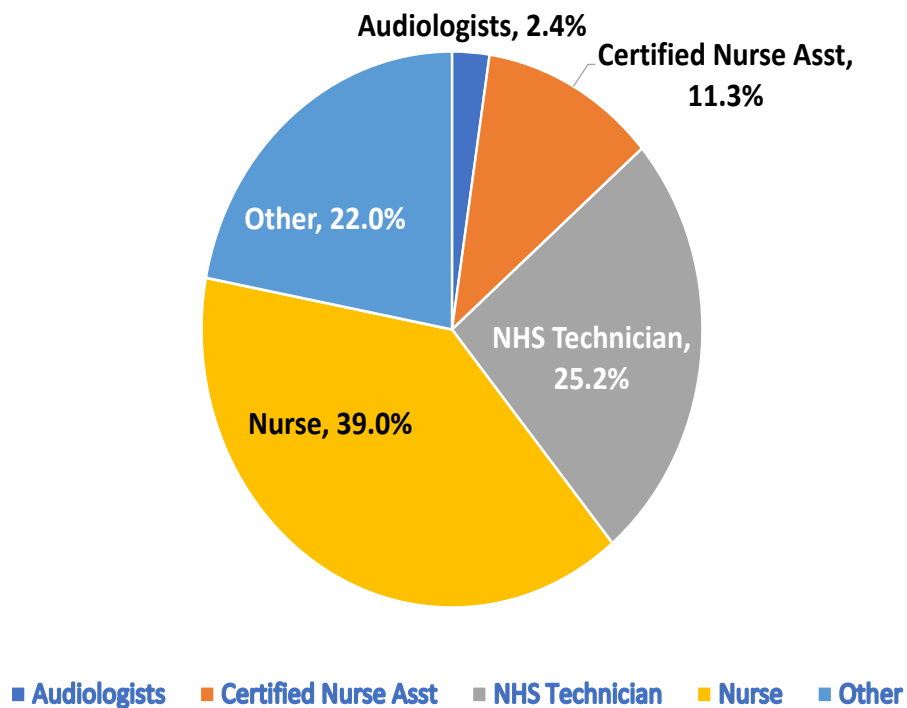
# Data Analysis 2018 – State Distribution

1	alabama	99
2	arizona	376
3	arkansas	71
4	california	563
5	colorado	136
6	connecticut	7
7	district of columbia	3
8	florida	193
9	georgia	94
10	idaho	72
11	illinois	807
12	indiana	263
13	iowa	92
14	kansas	37
15	kentucky	263
16	louisiana	111
17	maine	42
18	maryland	33
19	massachusetts	41
20	michigan	11
21	minnesota	10
22	mississippi	37
23	missouri	51
24	montana	64

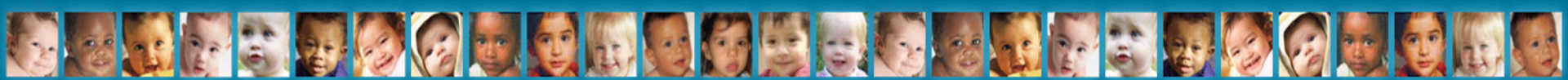
25	nebraska	63
26	nevada	71
27	new hampshire	1
28	new jersey	304
29	new mexico	115
30	new york	49
31	north carolina	91
32	north dakota	1
33	ohio	29
34	oklahoma	38
35	oregon	84
36	pennsylvania	150
37	rhode island	76
38	south carolina	27
39	south dakota	1
40	tennessee	10
41	texas	398
42	utah	476
43	virginia	193
44	washington	17
45	west virginia	4



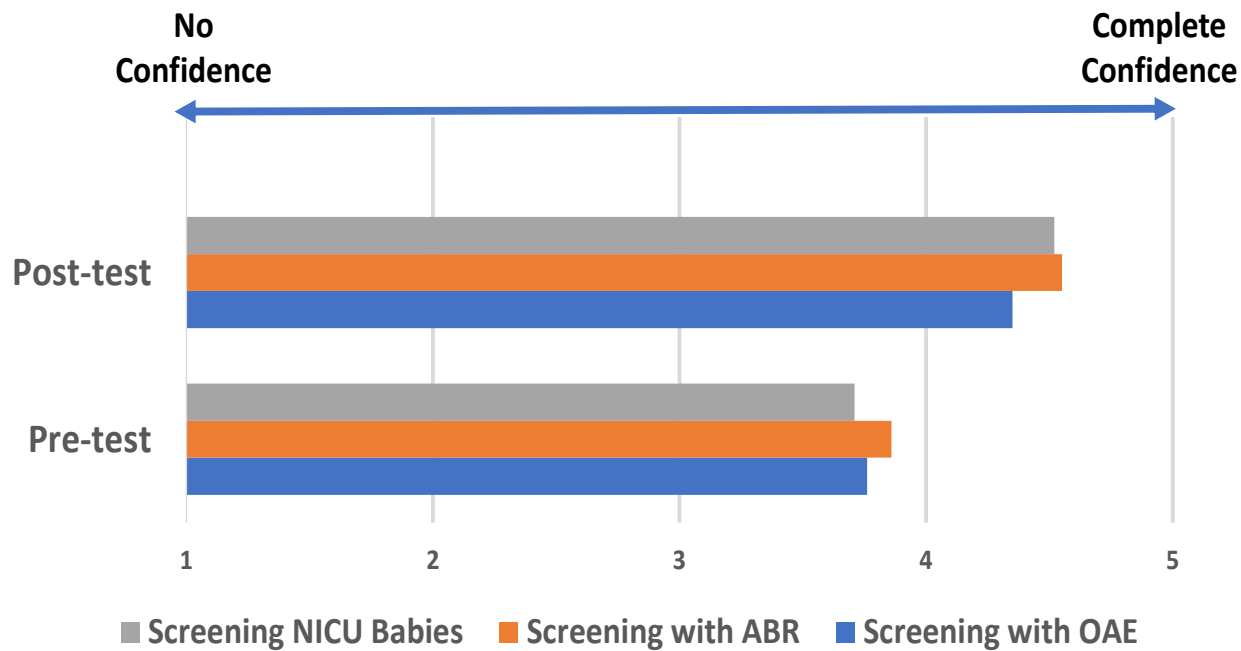
# Participants in the Newborn Hearing Screening Training Curriculum

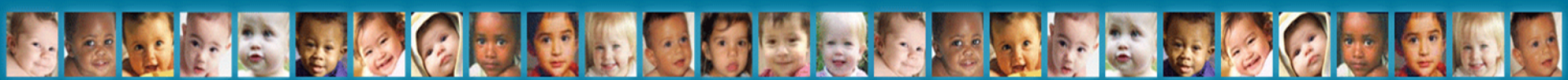






# Increased Confidence After Completing NHSTC



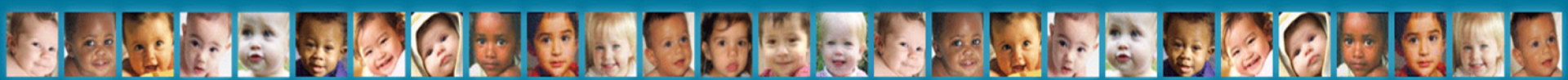


# Overall Pre and Post Test Comparison by Percent

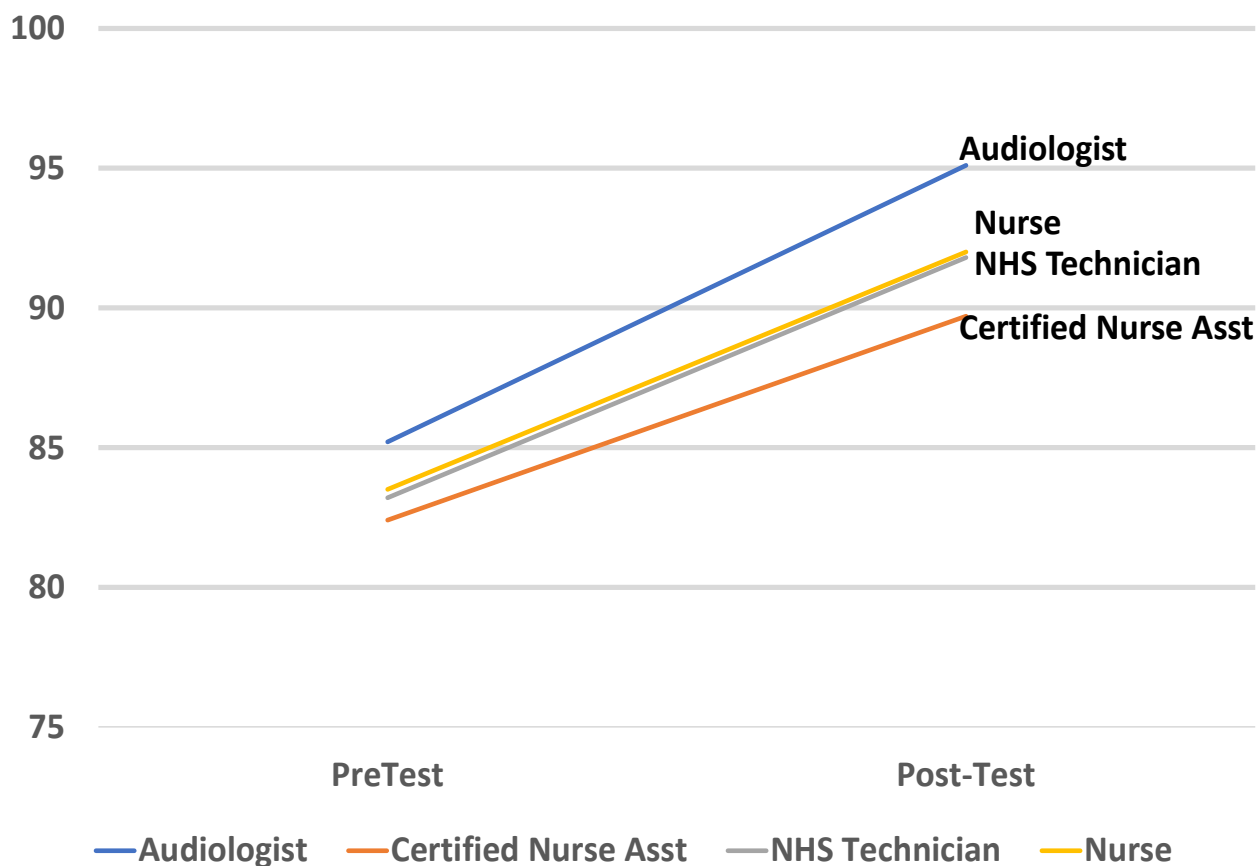
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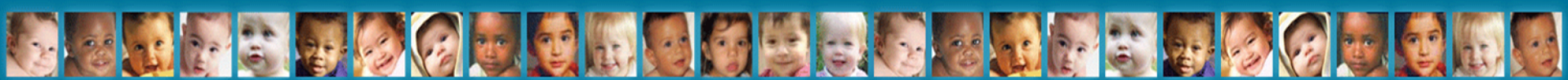
<b>2012</b>	<b>MEAN</b>	<b>N</b>
Pretest	75.9	1006
Posttest	92.6	1006

<b>2018</b>	<b>MEAN</b>	<b>N</b>
Pretest	82.8	5904
Posttest	91.5	5904

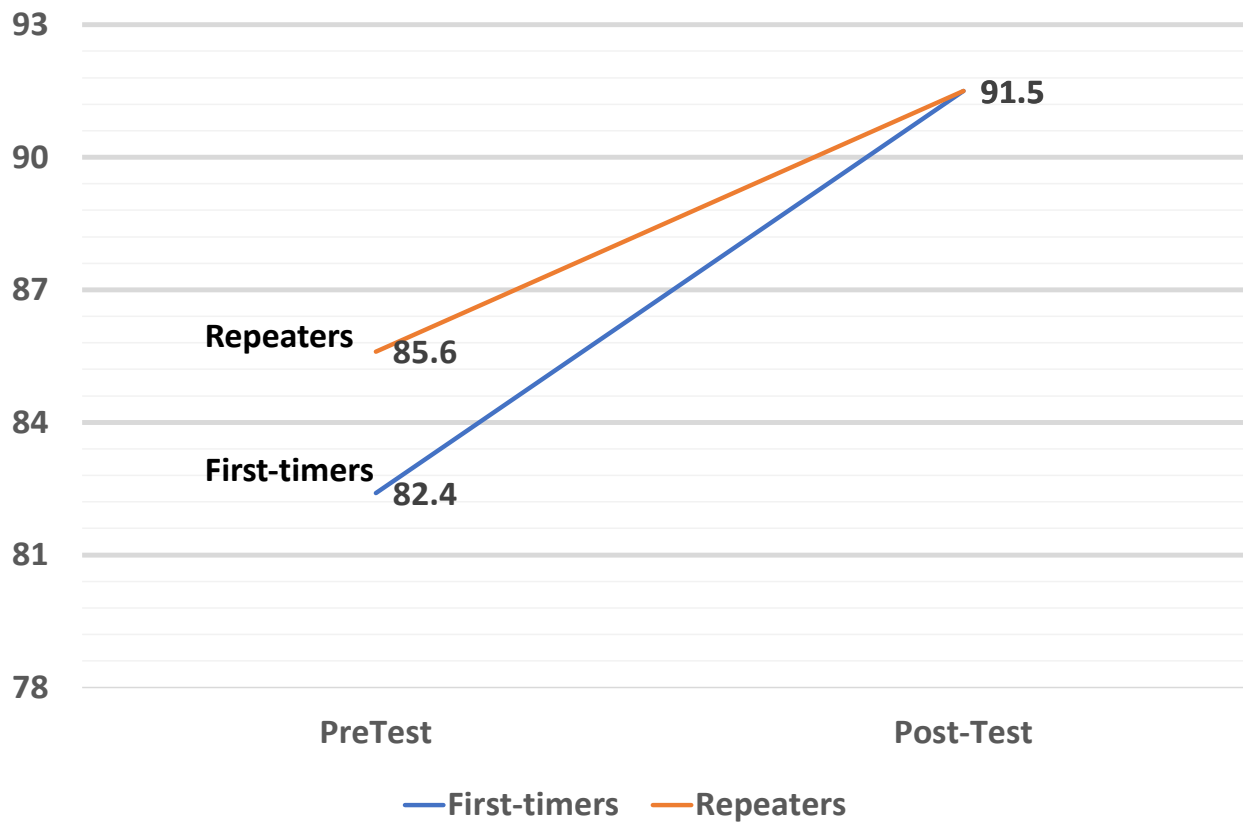


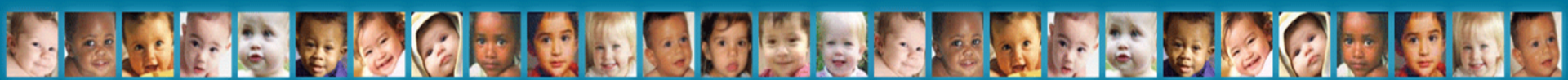
# Improvement from Pre-Test to Post-Test by Type of Screener





## Improvement for “First-timers” Compared to “Repeaters”





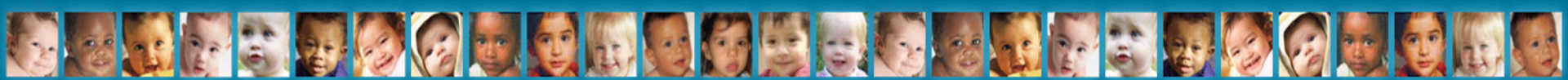
# Statistical Analysis 2015 and 2018

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## Summary Confidence and Knowledge

- Overall the NHSTC increases individual confidence and knowledge
- Some people know know more about performing the screenings prior to taking the training course, and some feel more confident than others, but in general, the majority of people are fairly similar in knowledge and confidence after finishing the training.





# NHSTC Web Version II



Newborn Hearing Screening Training

Resources

**Menu** **Transcript**

- 1. Module 1: What is Screening?
  - 1.1. Welcome
  - 1.2. Module 1 Introduction
  - 1.3. What is a Screening?
  - 1.4. Conditions at Birth
  - 1.5. Impact of Screening
  - 1.6. Late and Early Diagnosis
  - 1.7. Late and Early Diagnosis, Continue
  - 1.8. Parents Make the Best Choice for Child
  - 1.9. 1-3-6 National ELDI Goals
  - 1.10. Self-Check 1-1
  - 1.11. Self-Check 1-2
  - 1.12. Self-Check 1-3
  - 1.13. Self-Check 1-4
  - 1.14. Self-Check 1-5
  - 1.15. Self-Check 1-6
  - 1.16. Module 1 Summary
- 2. Module 2: Preparing to Screen
  - 2.1. Module 2 Introduction
  - 2.2. Terms for Baby's Doctor
  - 2.3. Parental Notification
  - 2.4. Frequently Asked Questions
  - 2.5. What to Say to Parents
  - 2.6. What to Say to Parents if they Refuse
  - 2.7. Accurate Personal Information

Welcome to the

## Newborn Hearing Screening Training Curriculum

((( [infanthearing.org](http://infanthearing.org)



Menu **Transcript**

- 7.17. Self-Check 7-5
- 7.18. Self-Check 7-6
- 7.19. Module 7 Summary
- ▼ 8. Module 8: Outpatient Re-screening
  - 8.1. Module 8 Introduction
  - 8.2. Conduct Before One Month
  - 8.3. Set up Follow-up Appointment
  - 8.4. If No Outpatient Re-Screens
  - 8.5. Preparing for Outpatient Re-Screen
  - 8.6. Outpatient Screening Methods
  - 8.7. Outpatient Results
  - 8.8. Communication to Medical Home Providers
  - 8.9. Documentation
  - 8.10. Outpatient Activity
  - 8.11. All Finished
  - 8.12. Self-Check 8-1
  - 8.13. Self-Check 8-2
  - 8.14. Self-Check 8-3
  - 8.15. Self-Check 8-4
  - 8.16. Self-Check 8-5
  - 8.17. Self-Check 8-6
  - 8.18. Module 8 Summary
  - 8.19. Resource Introduction
  - 8.20. Newborn Hearing Screening Process Video
  - 8.21. Course Credits

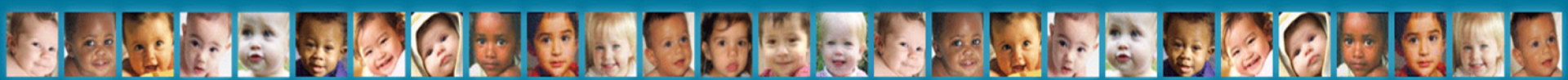
## Credits

- ❖ NHSTC Web is a collaborative project between the National Center for Hearing Assessment and Management (NCHAM), Illinois EHDI, the Maternal Child Bureau (MCHB) and the Arizona Department of Health Services Office for Children with Special Healthcare Needs
- ❖ Project Lead: Randi Winston-Gerson, AuD, CCC-A
- ❖ Project Contributors: Patricia Burk, MS, CCC-SLP, LSLC Cert. AVT, Karen Markuson Ditty, AuD, FAA, CCC-A, Colleen Green, Marlene Hesley, LPN, Jeanne Hollabaugh, MA, Michelle King, AuD, CCC-A, Stacy Jordan, MA, CCC-A, Karen Muñoz, Ed.D., Lylis Olsen, MS, MPH, CCC-A, Diane Sabo, PhD.
- ❖ Special thanks to: Ginger Mullin, AuD and the Illinois Early Hearing Detection and Intervention Program at the University of Illinois Chicago Division of Specialized Care for Children

Developed by: [Cine Learning Productions](#).

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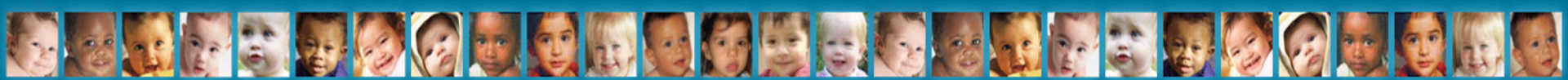


# Project Contributors

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- Patricia Burk
- Karen Ditty
- Stacy Jordan
- Michelle King
- Angie Mister

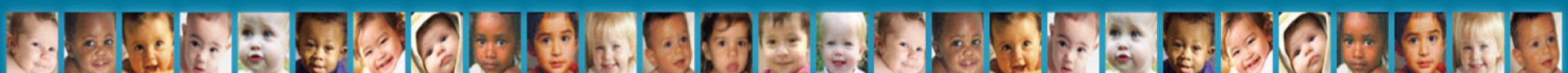




# Updates and Changes

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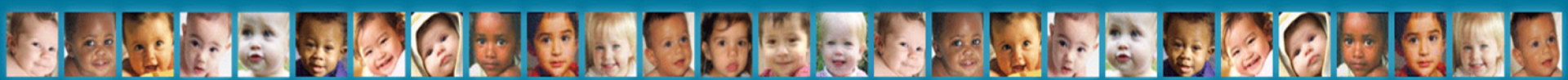
- Content updates
  - Separated OAE and ABR sections
  - Complete review, overhaul and best practice updates
  - Require both ears pass during same screening session
  - No more than 2 inpatient screens in optimal conditions



# Updates and Changes Cont.

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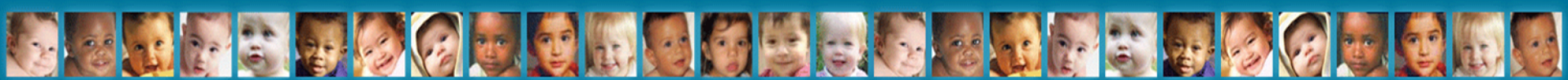
- Switched ears considerations
- Bed side screening practices
- Script for parents of babies with atresia/microtia
- Babies transferred from other hospitals
- Importance of screening in optimal conditions



# Updates and Changes Cont.

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- Brand new Format
  - From Flash to Storyline
  - Ease of navigation within the course
  - Course accessibility from smartphone or ipad
  - New photos and videos
- Recertification Section
  - 40 test questions covering details from all course aspects

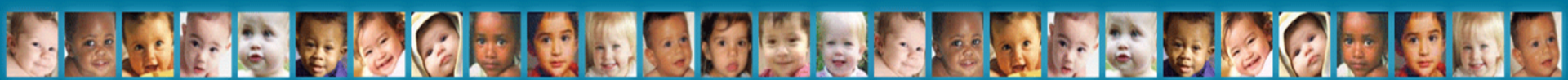


# Updates and Changes Cont.

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## New Module

- Midwife
- Out-of-hospital
- Outpatient



- 
- New NHSTC Version (non-Moodle):  
[http://www.infanthearing.org/nhstc-2018/NewbornHearingScreeningTraining/story\\_html5.html](http://www.infanthearing.org/nhstc-2018/NewbornHearingScreeningTraining/story_html5.html)
  - NHSTC Re-Certification Test (in Moodle):  
<https://ncham-moodle.eej.usu.edu/moodle/mod/quiz/view.php?id=627>
  - Password to Access the Test: **recertification4NHSTC**



# Questions?

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