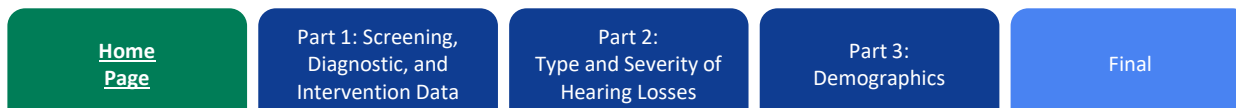


**2015 CDC EHDI
Hearing Screening and Follow-up Survey (HSFS)**

Contact Information	
Name	
E-mail	
Confirm E-mail	
State/Territory*	

**Please use dropdown bar to select State/Territory.*

The following navigation bar is available on all worksheets. The underline tab indicates the current sheet. Click on a tab to jump to the corresponding sheet.



Directions:

Please complete the following survey with only documented, non-estimated data for infants born between January 1, 2015 and December 31, 2015. Any comments and/or caveats about the reported data can be entered in the Final section at the end of the survey. If you have any questions about this survey, please refer to the Explanations document or contact both Suhana Alam (SAlam1@cdc.gov) and Kris Subbiah (KSubbiah@cdc.gov). Including both Suhana and Kris will help ensure a prompt response.

Survey Notes:

The survey is divided into three parts, which each have several different sections. These include Part 1 (Screening, Diagnostic, and Intervention Data), Part 2 (Type and Severity of Hearing Losses), and Part 3 (Demographics).

Data cannot be manually entered into fields highlighted in **green**. The totals for these green fields will be automatically calculated based on the data entered into the **yellow-highlighted** fields.

To navigate through the survey use the menu bar located near the top of each survey page and click on the desired section (e.g., "Diagnostic Data").

Public reporting burden of this collection of information is approximately 4 hours, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0010).

Part 1: Screening, Diagnostic, and Intervention Data

Screening Data	Diagnostic Data	Intervention Data	Additional Cases Not Reported
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Note: Please see the Home Page Tab for additional instructions on completing this tab

2015 Hearing Screening Data	
Total Occurrent Births***	
Total Occurrent Births According to Vital Records	
Optional: Total Occurrent Births at Military Facilities According to Vital Records	
Optional: Total Occurrent Homebirths	
Overall Documented Screening Results (Most Recent/Final Screen)	
Total Documented as Screened	0
Passed (most recent/final screen)	
Total Passed (most recent / final screen)*	
<i>Passed Before 1 Month of Age</i>	
Not Passed (most recent/final screen)	
Total Not Passed (most recent / final screen)**	
<i>Not Passed Before 1 Month of Age</i>	
Detailed Screening Results (if applicable)	
Passed (most recent/final screen)	
<i>Passed initial / No outpatient †</i>	
<i>No initial ‡ / Passed outpatient</i>	
<i>Passed initial / Passed outpatient</i>	
<i>Referred initial / Passed outpatient</i>	
Total Passed (most recent/final screen)†	0
Not Passed (most recent/final screen)	
<i>Referred initial / No outpatient †</i>	
<i>No initial ‡ / Referred outpatient</i>	
<i>Passed initial / Referred outpatient</i>	
<i>Referred initial / Referred outpatient</i>	
<i>Referred initial / straight to diagnostic evaluation</i>	
Total Not Passed (most recent/final screen)**	0
No Documented Screening / Undetermined (Most Recent/Final Screen)	
Total Documented as Not Screened	0
Infant Died	
Non-resident	
Unable to be Screened due to Medical Reasons	
Parents / Family Declined Services	
Infant Transferred and No Documentation of Screening	
Infant Adopted	
Homebirth	
Parents / Family Contacted but Unresponsive	
<i>Please use this dropdown box to indicate the Unresponsive Definition</i>	
Used †	
Unable to Contact	
Unknown	
Other	
Total Occurrent Births***	0

Notes:

- † See the HSF5 Explanations document for the definitions.
- ‡ "No initial" includes infants who did not received an initial screening, missed an initial screening or refused an initial screening. "No outpatient" includes infants who did not received an outpatient screening, missed an outpatient screening or refused an outpatient screening.
- * The value for the "Total Passed (most recent/final screen)" field in the Overall Documented Screening Results section must match the value for the "Total Passed (most recent/final screen)" field in the Detailed Screening Results section. If there is any difference you will receive a caution message.
- ** The value for the "Total Not Passed (most recent/final screen)" field in the Overall Documented Screening Results section must match the value for the "Total Not Passed (most recent/final screen)" field in the Detailed Screening Results section. If there is any difference you will receive a caution message.
- *** The value for the "Total Occurrent Births" field at the bottom of this table must match the value reported for the "Total Occurrent Births" field at the top of this table. If there is any difference you will receive an error message. If received, please make sure to correct this error before continuing to the next section.

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Part 1: Screening, Diagnostic, and Intervention Data

Part 2: Type and Severity of Hearing Losses

Part 3: Demographics

Final

Part 1: Screening, Diagnostic, and Intervention Data

[Screening Data](#)

[Diagnostic Data](#)

[Intervention Data](#)

[Additional Cases Not Reported](#)

Note: Please see the Home Page Tab for additional instructions on completing this tab.

2015 Diagnostic Data	
Total Not Passed (most recent/final screen)*	0
Documented Diagnostics	
Total with Documented Diagnosis	0
Diagnosed with No Hearing Loss	
Total with No Hearing Loss	
No Hearing Loss: Before 3 Months of Age	
Diagnosed with Permanent Hearing Loss	
Total with Permanent Hearing Loss	
Permanent Hearing Loss: Before 3 Months of Age	
Permanent Hearing Loss: After 3 Months but Before 6 Months of Age	
No Documented Diagnostics / Undetermined	
Total with No Documented Diagnosis	0
Audiological Diagnosis in Process (Awaiting Diagnosis) <i>Only applies to infants seen at least one time and have a follow-up appointment scheduled.</i>	
PCP/ENT did not Refer Infant for Diagnostic Testing	
Infant Died	
Non-resident	
Unable to Receive Diagnostic Testing due to Medical Reasons	
Parents / Family Declined Services	
Moved out of Jurisdiction	
Infant Adopted	
Parent / Family Contacted but Unresponsive	
Please use this dropdown box to indicate the Unresponsive Definition Used [†]	
Unable to Contact	
Unknown	
Other	
Total Diagnosed and Not Diagnosed *	0

Notes:

[†] See the HSFS Explanations document for the definitions.

The value for the "Total Diagnosed and Not Diagnosed" field at the bottom of this table must match the value for the "Total Not Passed (most recent/final screen)" field at the top of this table. If there is any difference you will receive an error message. If received, please make sure to correct this error before continuing.

Error: Please select Unresponsive Definition Used

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Part 1: Screening,
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Part 2:
Type and Severity of
Hearing Losses

Part 3:
Demographics

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Part 1: Screening, Diagnostic, and Intervention Data

[Screening Data](#)

[Diagnostic Data](#)

[Intervention Data](#)

[Additional Cases
Not Reported](#)

Note: Please see the Home Page Tab for additional instructions on completing this tab.

2015 Early Intervention (EI) Data	
Total with Permanent Hearing Loss*	0
Total Documented Referral Status	0
Referred to Part C EI	
Referred to Part C EI Before Six Months of Age	
Not Referred to Part C EI	
Unknown	
Documented Intervention Services	
Total Enrolled in Part C Services	0
Signed IFSP Before 6 Months of Age	
Signed IFSP After 6 Months of Age	
Total Received Part C EI Services	0
Received Services Before 6 Months of Age	
Received Services After 6 Months of Age	
Received Services After 6 Months of Age, Due to Family Initially Declining Services	
Total from Non-Part C EI Services Only	0
Received Services Before 6 Months of Age	
Received Services After 6 Months of Age	
Monitoring Services Only	
Received Only Monitoring Services	
No Documented Intervention Services/ Undetermined	
Total with No Documented EI Services	0
Not Eligible for Part C Services	
Infant Died	
Non-resident	
Unable to Receive EI due to Medical Reasons	
Parents / Family Declined Services	
Moved Out of Jurisdiction	
Infant Adopted	
Parent / Family Contacted but Unresponsive	
Please use this dropdown box to indicate the Unresponsive Definition Used †	
Unable to Contact	
Unknown	
Other	
Total Enrolled in Intervention & No Intervention Services*	0

Notes:

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Hearing Losses

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Part 1: Screening, Diagnostic, and Intervention Data

[Screening Data](#)

[Diagnostic Data](#)

[Intervention Data](#)

[Additional Cases
Not Reported](#)

Note: Please see the Home Page Tab for additional instructions on completing this tab.

2015 Additional Cases Not Reported

Cases of Hearing Loss not included in the "Diagnostic Data" section*

Total Additional Cases of Hearing Loss not included in Diagnostic Data	0
Additional Cases of Non-permanent, Transient Hearing Loss	
Additional Cases of Permanent Hearing Loss (e.g., late onset)	

Cases of Hearing Loss not included in the "Intervention Data" section**

Total Additional Cases of Hearing Loss not included in Intervention Data	0
Additional Cases Enrolled in EI (Part C or non-Part C)	
Additional Cases Not Receiving Intervention: Monitoring Only	
Additional Cases Not Receiving Intervention: Unknown	
Additional Cases Not Receiving Intervention: Other	

Cases Enrolled in EI without a Confirmed Diagnosis***

Total Additional Cases Enrolled in EI without Confirmed Diagnosis	
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Notes:

- * Only cases of hearing loss not reported in the previous "Diagnostic Data" section should be reported in this "Cases of Hearing Loss not included in the 'Diagnostic Data'" section.
- ** Only cases of hearing loss not reported in the previous "Intervention Data" section should be reported in this "Cases of Hearing Loss not included in the 'Intervention Data'" section.
- *** Only cases who did not pass hearing screening, have no confirmed diagnosis, but were enrolled in early intervention services should be reported in this "Cases Enrolled in EI without a Confirmed Diagnosis" section.

Part 2: Type and Severity of Hearing Losses (By Ear)

Total Cases of Permanent Hearing Loss (from Part 1)* 0

		BILATERAL			UNILATERAL			LATERALITY UNKNOWN <i>(for Cases where it is unknown if the loss is unilateral or bilateral)</i>
		RIGHT EAR	LEFT EAR	UNKNOWN EAR <i>(Note: record degree of loss for <u>each</u> ear)</i>	RIGHT EAR	LEFT EAR	UNKNOWN EAR	
Sensorineural	Slight							
	Mild							
	Moderate							
	Moderately Severe							
	Severe							
	Profound							
	Unknown Severity							
Conductive	Slight							
	Mild							
	Moderate							
	Moderately Severe							
	Severe							
	Unknown Severity							
	Mixed	Slight						
Mild								
Moderate								
Moderately Severe								
Severe								
Profound								
Unknown Severity								
Type Unknown	Slight							
	Mild							
	Moderate							
	Moderately Severe							
	Severe							
	Profound							
	Unknown Severity							
Auditory Neuropathy	Slight							
	Mild							
	Moderate							
	Moderately Severe							
	Severe							
	Profound							
	Unknown Severity							
Totals by Ear	0	0	0	0	0	0	0	
Totals by Child	0		0		0	0	0	
Total Cases Resolved <i>(i.e., change from hearing loss to no hearing loss)</i>								
Overall Total*							0	

Note:
* The value for the "Overall Total" field at the bottom of this table must match the value for the "Total Cases of Permanent Hearing Loss" field at the top of this table. If there is any difference you will receive an error message. If received, please make sure to correct this error before submitting the survey.

Part 3: Demographics

	Screening			Diagnostics		Intervention
	Total Occurrent Births	Total Pass	Total Not Pass	Total with No Hearing Loss	Total with Permanent Hearing Loss	Total Enrolled in Part C EI
Totals (from Part 1)*	0	0	0	0	0	0
Sex						
Male						
Female						
Unknown						
Totals*	0	0	0	0	0	0

Maternal Age						
<15 years						
15-19 years						
20 – 24 years						
25-34 years						
35 – 50 years						
> 50 years						
Unknown						
Totals*	0	0	0	0	0	0

Maternal Education						
Less than High School						
High School Graduate or GED						
Some College or AA/AS degree						
College Graduate or above						
Unknown						
Totals*	0	0	0	0	0	0

Maternal Ethnicity						
Hispanic or Latino						
Not Hispanic or Latino						
Unknown						
Totals*	0	0	0	0	0	0

Maternal Race						
White (Not Hispanic)						
White (Hispanic)						
White (Ethnicity Unknown)						
Black or African American (Not Hispanic)						
Black or African American (Hispanic)						
Black or African American (Ethnicity Unknown)						
Asian						
Native Hawaiian or Pacific Islander						
American Indian or Alaskan Native						
Unknown						
Other						
Totals*	0	0	0	0	0	0

Notes:
 * The row values reported for the "Totals (from Part 1)" fields at the top of this table must match the row values reported for the "Totals*" fields, for each demographic variable. If there is any difference you will receive an error message. Red shading will indicate the cell(s) with an error. If received, please make sure to correct the error(s) before submitting the survey.

Comments:

Please use this section to enter any comments and/or caveats about the reported data (2,500 character limit)

Check for Errors:

Please refer to the list below to check for outstanding errors in the survey. If there are any red fields, please navigate to the appropriate tab and fix the error before submitting.

Part 1: Screening Data

Error: Please go to Screening tab to resolve the error.

Part 1: Diagnostic Data

Error: Please go to Diagnostic tab to resolve the error.

Part 1: Intervention Data

Error: Please for to Intervention tab to resolve the error.

Part 2: Type and Severity of Hearing Losses

No errors

Part 3: Demographics

No errors