

VISION AND HEARING SCREENING

TEXAS DEPARTMENT OF HEALTH

1100 WEST 49TH STREET

AUSTIN, TEXAS 78756

(512) 458-7420



TEXAS DEPARTMENT OF HEALTH

In accordance with the rules of the Texas Radiation Control Act Chapter 401 Texas Health and Safety Code

PRINTED NAME Your Name

is hereby registered to use audiometric equipment in the State of Texas.

Yearly Occupational Audiology Certificate of Registration Valid Through: Date

Registration as a user of an Audiometer DOES NOT fulfill all of the requirements to become certified as an Occupational Safety and Health Administration (OSHA) Screener

Employer

County:

SSA Registration # ... USE AS SOCIAL SECURITY NUMBER WHEN BE USED AS THEIR REGISTRATION NUMBER

Certificate of Registration is valid for a period of five years

If your employer changes, please notify this office as soon as possible so that current registration information can be maintained

Vision and Hearing Screening Bureau of Children's Health Texas Department of Health 1100 West 49th Street Austin, Texas 78756-3159 (512) 458-7420

TEXAS DEPARTMENT OF HEALTH AUDIOMETER USER REGISTRATION

1 Name Your Name LAST FIRST MIDDLE

2 Address Home Address STREET NUMBER CITY STATE ZIP

3 Home Phone: () Work Phone: ()

4 Employer/Organization: Place of Work 1 | School 2 | Child Care 3 | Health Facility 4 | Other

5 Address: Work Address

City R State ZIP

Applicant's Signature: Date Today's

11 Professional Title and License Number (if applicable)

1 | Audiologist 4 | Social Nurse

2 | Hearing Aid Dispenser 5 | Speech Pathologist

3 | Physician 6 | Other

Workshop: 12 City 13 County 15. Date

14 Instructor

16 This applicant has met the workshop requirements set by the Texas Department of Health, and is now certified to do hearing screening

17. This applicant will use audiometric equipment in

1 | Preschool/clinic 3 | Speech/hearing clinic 5 | Medical facility 7 | Other

2 | Health agency 4 | Hearing aid dispensary 6 | Embassy (USA)

SCREENING SCHEDULE AND REQUIREMENTS

Young children are more susceptible to transitory losses as a result of ear infections, colics, and allergies. Since early special education of hearing-impaired children is vital, hearing screening should be administered to children as early as possible.

The Special Senses and Communication Disorders Act, Chapter 36 of the Texas Health and Safety Code, requires that all children enrolled for the first time in any public, private, parochial, or denominational school or in a Texas Department of Protective and Regulatory Services licensed child-care facility in Texas, or who meet certain grade criteria (specified below), must be screened or have a professional examination for possible vision and hearing problems. The pure-tone screen is the only screening required for hearing. Impedance audiometry may be used to supplement screening, but this is not required.

<u>WHO MUST BE SCREENED</u>	<u>WHEN SCREENING MUST BE DONE</u>
4-year-olds Kindergartners Any other first-time entrants (4 years ¹ through 12th grade)	Within 120 days of admission -or- Before the end of the first semester
1st-, 3rd-, 5th-, 7th-, and 9th-graders	Anytime within the school year (preferably within the first semester)

To collect screening information for each child, a facility may use its own screening form or duplicate one provided by the Texas Department of Health upon request (M-40, M-60, or CH-20). In either case, there must be a screening record on file for each child enrolled. The following data must be recorded: **CHILD'S NAME, TYPE OF SCREENING, DATE, SCREENER, AND SCREENING RESULTS.**

¹ Although not required by Chapter 36, Texas Department of Protective and Regulatory Services licensed child-care facilities are encouraged to screen all children younger than 4 years of age who can reliably respond to the screening tests outlined in the Texas Department of Health's vision and hearing screening protocols.

VISION AND HEARING SCREENING

TRAINING in

Vision Screening
Hearing Screening

PRESENTATIONS in

Hearing Disorders
Audiometer Care & Maintenance
Trouble-Shooting Hearing Aids

AUDIOMETER LOAN to

Registered Users of Audiometers

PACT SERVICES for

Financially Eligible Children
Ages, Birth through 20 Years

- * Audiological evaluation
- * Otological Evaluation
- * Hearing Aid Evaluation
- * Provision of Hearing Aid(s)
- * Hearing Aid Check

Program for Amplification for Children of Texas (PACT)

WHO?

- children who have permanent hearing loss
- children you think may have a hearing loss
- children ages birth through 20 years
- children who are Medicaid eligible or live at 150% of the federal poverty guideline

WHAT?

- PACT pays for the following
 - hearing evaluation
 - medical evaluation by ear doctor
 - hearing aid evaluation
 - earmolds
 - hearing aids
 - follow-up visits with family/child to help learn how to use the hearing aids
 - repairs to the hearing aid

WHEN?

- when children qualify financially and have hearing loss that impacts their language and learning

WHERE?

- all services must be done by a PACT service contractor
- applications should be sent through a PACT contractor
- call PACT for a listing of the contractors in your area
- there are providers across the state

SOME POSSIBLE LOCAL RESOURCES FOR REFERRAL /FOLLOW-UP EVALUATION

RESOURCES FOR EVALUATION OF HEARING LOSS OR MIDDLE EAR DISORDERS:

PHYSICIANS

- *OTOLOGISTS OR OTOLARYNGOLOGISTS*
- *PEDIATRICIANS*
- *FAMILY PRACTITIONERS*

AUDIOLOGISTS IN:

- *PHYSICIANS' OFFICES*
- *PRIVATE PRACTICE*
- *REGIONAL PROGRAMS FOR THE DEAF*
- *COMMUNITY SPEECH, LANGUAGE & HEARING CENTERS*
- *REHABILITATION CENTERS*
- *EASTER SEAL REHABILITATION CENTERS*
- *SERTOMA CENTERS FOR COMMUNICATION DISORDERS*
- *DEPARTMENT OF COMMUNICATION DISORDERS
(FOUND IN SOME HOSPITALS OR UNIVERSITY PROGRAMS)*
- *SCHOOL DISTRICT PROGRAMS*
- *MH/MR FACILITIES*
- *EDUCATION SERVICE CENTERS*

HEARING

DEFINITION OF HEARING SCREENING

SCREENING IS BRIEF TESTING DESIGNED TO DETERMINE IF A PERSON'S HEARING FALLS WITHIN THE NORMAL RANGE.

SCREENING IS DESIGNED TO ANSWER ONLY ONE QUESTION

DOES AN INDIVIDUAL CHILD (PERSON) SHOW POSSIBLE PROBLEMS THAT INDICATE THE NEED FOR FURTHER ASSESSMENT?

REGULATIONS REQUIRE

REGISTRATION OF:

- **ALL AUDIOMETERS**
- **ALL USERS**
- **ALL CALIBRATION FIRMS**

QUALITY OF PROGRAM

ENVIRONMENT

CONDITION OF AUDIOMETER

PROPER TECHNIQUES

REFERRAL-FOLLOW-UP

OBJECTIVES OF A HEARING SCREENING PROGRAM

THERE ARE FOUR OBJECTIVES IN A HEARING SCREENING PROGRAM:

- 1. TO IDENTIFY CHILDREN WHO INDICATE A NEED FOR FURTHER EXAMINATION IN ORDER TO DETERMINE THE EXTENT OF THE APPARENT HEARING DIFFICULTY.*
- 2. TO REFER THOSE CHILDREN FOR PROFESSIONAL EXAMINATION AND NEEDED HEALTH SERVICES THROUGH THEIR FAMILY PHYSICIAN.*
- 3. TO INSURE THAT PROFESSIONAL AND MEDICAL RECOMMENDATIONS ARE FOLLOWED, AND*
- 4. TO ACQUAINT THE EDUCATIONAL STAFF WITH THE CHILD'S HEARING DIFFICULTY, AS DETERMINED BY PROFESSIONAL PERSONNEL, SO ADJUSTMENTS CAN BE MADE IN THE EDUCATIONAL PROGRAM AS NEEDED.*

**PHYSICAL
CHARACTERISTICS:**

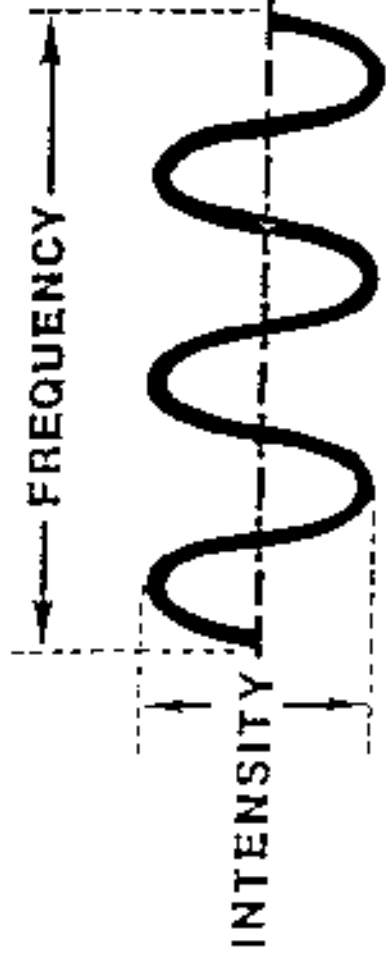
FREQUENCY

**PSYCHOLOGICAL
CORRELATES:**

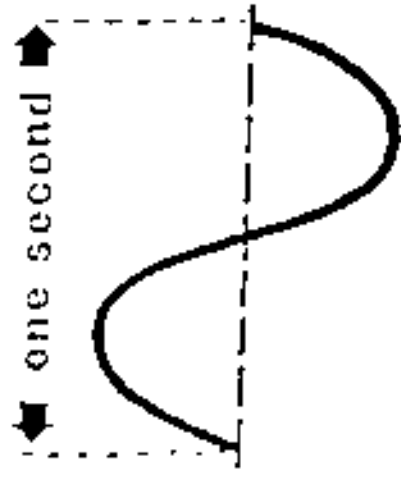
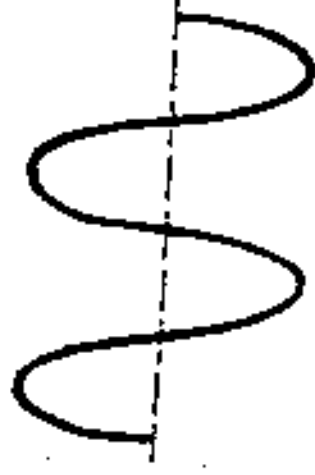
PITCH

PURE-TONE AUDIOOMETRY

Physical Attributes:

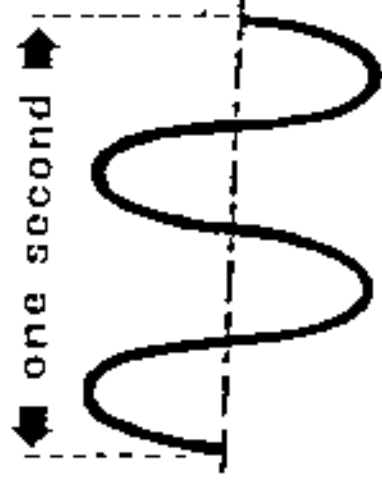


INTENSITY **dB**



FREQUENCY

Hz

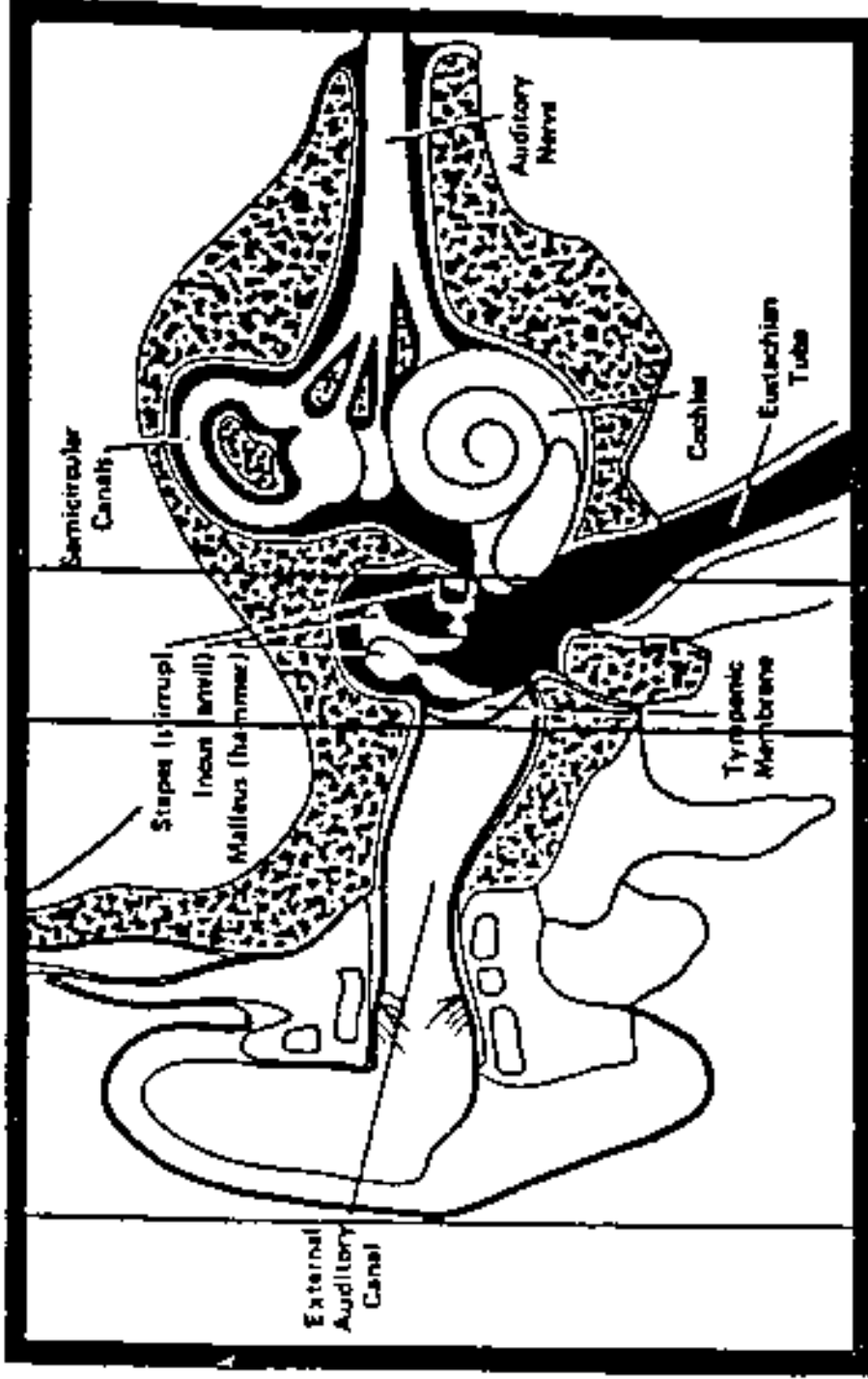


20 Hz ----- 20,000 Hz

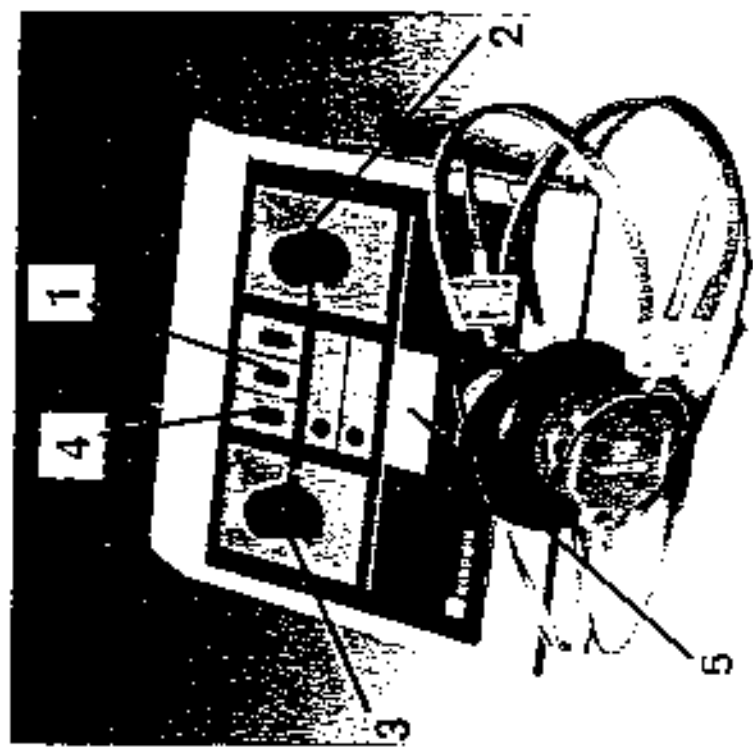
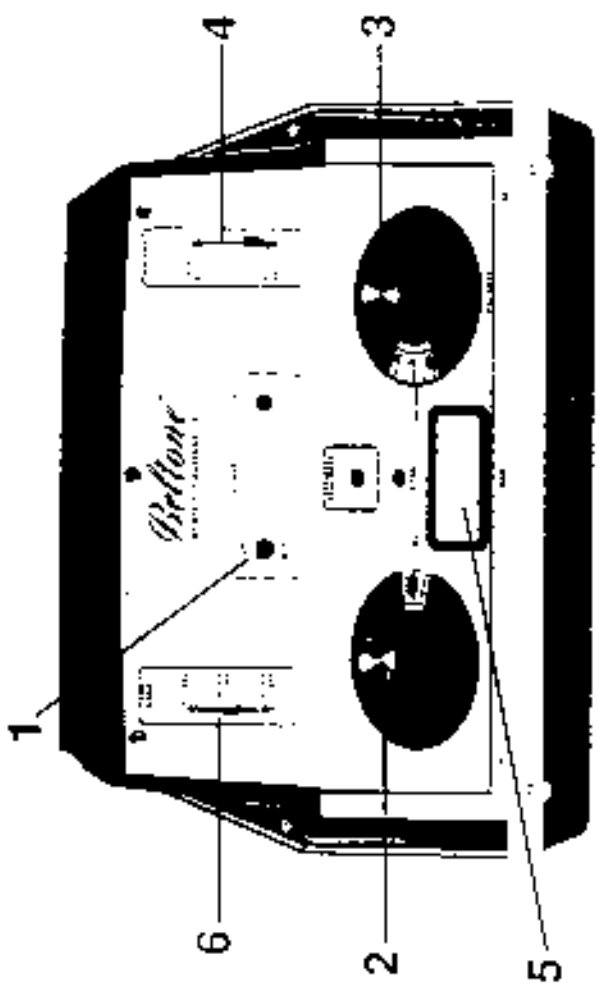
NORMAL SPEECH RANGE

125 Hz TO 8000 Hz

1000 2000 4000



OUTER	MIDDLE	INNER
CONDUCTIVE		SENSORINEURAL
MIXED		



AUDIOMETER REGULATIONS

- **CALIBRATED TO ANSI 69, 89, OR 96 STANDARDS**
- **MONTHLY - BIOLOGICAL CHECKS**
- **YEARLY - ELECTRONIC CALIBRATION**

CARE & MAINTENANCE

AUDIOMETERS

EARPHONES

- **HANDLING**
- **CUSHIONS**
- **TRANSPORTING**
- **DIAPHRAGMS**
- **STORING**
- **PLUGS & CORDS**

AUDIOMETER MONTHLY BIOLOGICAL CALIBRATION CHECK

Mfg.	Model Serial #	Owner
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Date last calibrated:	Assigned to:
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HEARING SCREENING REFERENCE DATA OBTAIN AFTER CALIBRATION								
NAMES OF THREE INDIVIDUALS	EAR	6	5	4	3	2	1	DATE
		250	500	1000	2000	4000	6000	
1.	R							
	L							
2.	R							
	L							
3.	R							
	L							

RECORD MONTHLY RESULTS ON ONE OF THE ABOVE

	R							
	L							
	R							
	L							
	R							
	L							
	R							
	L							
	R							
	L							
	R							
	L							
	R							
	L							

Each month an audiometer is in use, a biological calibration is required. This consists of testing a person having a known stable audiometric curve that does not exceed 25 dB @ any frequency between 250 and 6000 Hz and comparing the test results with the object's recorded hearing screening reference data. If the results of a biological calibration indicate HL differences greater than 5 dB at any frequency, if the signal is distorted, or there are attenuator or tone switch transients, then the audiometer shall be subjected to a sonic electronic calibration. (Chapter 401 of the Texas Health and Safety Code.) A copy of this form should be kept with the audiometer.

TEXAS DEPARTMENT OF HEALTH

AUDIOMETER MONTHLY BIOLOGICAL CALIBRATION CHECK PROCEDURE

All individuals must be able to hear all frequencies at 25 dB or better.

1. Screen the individual at an intensity of 25 dB HL in both ears at the following frequencies: 1000, 2000, 4000, 6000, 500, and 250 Hz in that order. This is to rule out those individuals that cannot be used.
2. Start with the right ear and set the frequency dial at 1000 Hz.
3. Set the HL dial at 40 dB HL and present the tone for one to two seconds.
4. If the individual responds, lower the intensity by 10 dB HL (to 30 dB HL on the HL dial) and present the tone again.
5. Continue to lower the HL dial in 10 dB steps until no response is obtained or until 20 dB is reached.
6. If no response is obtained, increase the HL dial setting in 5 dB steps until the individual again signals that the tone is heard and Record this numeric HL setting at 1000 Hz for the right ear.
7. Reset the HL dial at 40 dB HL, and turn the frequency control dial to 2000 Hz.
8. Repeat the sequence (steps number 3 - 6) until you establish the numeric HL setting for 2000 Hz and record it.
9. Continue in this manner for each of the frequencies in the following sequence: 4000, 6000, 500, and 250 Hz. Remember, each time you begin screening a new frequency, return the HL dial to 40 dB and begin the sequences of down 10 until the individual does not respond and up 5 until the individual responds or 20 dB is reached.
10. Establish and record the numeric HL setting for all six frequencies in the right ear.
11. Set the output selector to the left ear and begin the procedure on that ear at 1000 Hz. The sequence remains the same for the left ear: 1000, 2000, 4000, 6000, 500, and 250 Hz. Numeric HL settings are recorded in the same manner as for the right ear.
12. Once the numeric HL settings for all frequencies in the right and left ears have been recorded, the procedure is complete.

NOTE

If the listener responds to a frequency at 20 dB, record the numeric HL setting as 20 dB for that frequency.

(Revised 7/95)

CALIBRATE

TO GRADUATE, CORRECT OR ADJUST THE SCALE (OF A MEASURING INSTRUMENT) INTO APPROPRIATE UNITS.

CALIBRATION CHECK

RECALIBRATION

PLACEMENT OF EARPHONES

- 1. REMOVE GLASSES, EARRINGS, ETC.**
- 2. BRUSH HAIR BACK OFF EARS**
- 3. BRING BAND OVER TOP OF HEAD**
- 4. LINE-UP CENTER WITH CANAL.**
- 5. RIGHT/RED > > LEFT/BLUE**



AVOID CLUES!!!!

LOOKING UP AT SUBJECT

REFLECTIONS -

MIRROR WINDOW SHADOW EYEGLASSES

MOVEMENT -

HEAD ARM HAND BODY

RHYTHM -

**dash dash dash dash dash
dash dash dash dash dash**

STUDENT'S NAME: _____ BIRTHDATE: _____

SCHOOL: _____ GRADE: _____ TEACHER: _____

THE INFORMATION ENTERED ON THIS FORM IS A RECORD OF SCREENING RESULTS AND IS NOT TO BE USED FOR DIAGNOSTIC PURPOSES.

SWEEP-CHECK SCREENING

1. Instruct and condition each child appropriately for age/grade.
2. Screen 3 frequencies @ 25 dB HL; begin screening @ 1000 Hz.
3. Identify responses with a "+"; identifying no response with a "-".
4. Sequence of tone presentations is numbered 1-3 below.

	EAR	1 1000Hz	2 2000Hz	3 4000Hz	RESULTS
First Screen	R				____ Pass
Date:	L				____ Rescreen w/Sweep Check

COMMENTS: _____

Screener: _____

Children failing to respond to ONE (of the three) frequencies in EITHER EAR should be re-screened with another Sweep-Check within 3 to 4 weeks. (Signs or symptoms alone would be sufficient for referral.) Failure of ONE frequency in either ear on the second sweep check screen requires a referral or Extended Recheck. If a failure of one frequency occurs when performing the extended recheck, a referral is required.

	EAR	1 1000Hz	2 2000Hz	3 4000Hz	RESULTS
Second Screen	R				____ Pass
Date:	L				____ Fail

COMMENTS: _____

Screener: _____

EXTENDED RECHECK RESULTS

For each of the three frequencies listed, record the lowest level in decibels (dB) at which the child responds. Record the findings for both the right and left ears. A child should be referred to an appropriately licensed professional if any one of the three frequencies are recorded as greater than 25 dB HL in either ear.

	EAR	1 1000Hz	2 2000Hz	3 4000Hz	RESULTS
Date:	R	____ dB	____ dB	____ dB	____ Pass
	L	____ dB	____ dB	____ dB	____ Fail

COMMENTS: _____

Screener: _____

SWEEP CHECK SCREENING

1. BEGIN SCREENING THE RIGHT EAR (RED EARPHONE).
2. SET OUTPUT SELECTOR SWITCH TO THE RIGHT EAR.
3. SET HEARING LEVEL (HL) DIAL ON 25 dB, DURING THE ENTIRE SWEEP CHECK SCREEN. DO NOT MOVE THE HL DIAL FROM 25 dB.
4. SET FREQUENCY SELECTOR ON 1000 Hz.
5. INTRODUCE THE TONE FOR 2 TO 3 SECONDS, THEN RECORD THE CHILD'S RESPONSE.
6. MOVE FREQUENCY SELECTOR TO 2000 Hz, AND REPEAT PRESENTATION OF TONE AND RECORDING OF RESPONSE.
7. CONTINUE IN SAME MANNER WITH 4000 Hz.
8. REPEAT PROCEDURE FOR LEFT EAR.

Extended recheck-Starting at 40 dB and going down by 10 dB until no response is obtained or until 20 dB is reached and then up by 5 dB until a response is obtained. The frequencies to be evaluated are 1000, 2000, and 4000 hertz (Hz).

NOTE

If a response occurs at 20 dB, record 20 dB for that frequency.



FOR INSTRUCTIONS
SEE BACK OF FORM

MAIL TO
Vision and Hearing Screening
Texas Department of Health
1100 West 49th Street
Austin, Texas 78756-3125

HEARING SCREENING REPORT
JUNE THROUGH MAY

SIGNATURE _____ DATE _____

SCHOOL DISTRICT PRIVATE SCHOOL OR CHILD CARE FACILITY

NUMBER _____ NAME _____

CITY _____ COUNTY _____

SCREENING PERFORMED BY:

Preschool School Volunteers: (organization) Health Dept. Clinic Other (organization)

GRADE	LATE EXAM RESULTS FROM LAST YEAR	
	SPECIAL ST EXAM	
	E NO PROBLEM	F TREATMENT
0		
5		
K		
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
T	E	F

GRADES	A	B	C	D	SPECIALIST EXAM		G
	TOTAL NUMBER SCREENED	NUMBER FAILED	NUMBER REFERRED	NUMBER TRANSFERRED	E	F	REFERRED NOT EXAMINED
					NO PROBLEM	TREATMENT	
PRE SCH							
SPEC ED							
K							
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
TOTALS	A	B	C	D	E	F	G

$B \geq C$ $C = D + E + F + G$

SUBMIT BY: **JUNE 30,**

Instructions for Completing the Hearing Screening Report Form (M-52)

1. SIGNATURE SUPERINTENDENT
2. SCHOOL DISTRICT NUMBER: Assigned by Texas Education Agency
3. DATE: Date this report is sent to the Texas Department of Health.
4. SCHOOL DISTRICT NAME: Name of the school district where the children are attending classes.
5. CITY: Self-explanatory.
6. COUNTY: Self-explanatory.
7. SCREENING PERFORMED BY: Self-explanatory. any or all may be checked if applicable.

FILLING IN COLUMNS APPROPRIATELY: EACH COLUMN IS LISTED BY THE GRADE IN WHICH THE CHILD IS ENROLLED. PRE SCH means all preschool children of all ages. SPEC ED means students that have been determined eligible for special educational services.

LATE EXAM RESULTS FROM LAST YEAR: Number of children who were referred the year before this report and who were examined by a hearing specialist, an otologist or an audiologist, during the current school year. (Refer to instructions for Columns E and F.)

Column A: Number of children screened for hearing problems. This number should include those children screened by physicians or hearing specialists.

Column B: Number of children who failed the pure-tone screen or any other screen for a hearing problem, e.g., signs and symptoms, impedance test, etc.

Column C: Number of children who were referred to a hearing specialist. (To get this number, subtract those children who were under a hearing specialist's care at the time of screening failure from the number in Column B.)

Column D: Number of children who were referred but are no longer enrolled in this facility.

Column E: Number of children who were referred and had no problem upon examination by a hearing specialist.

Column F: Number of children who were referred and received treatment or are under observation for a condition found upon examination by a hearing specialist.

Column G: Number of children who were referred and were not examined by a hearing specialist or that information is not known.

NOTE:

Column C = Columns D + E + F + G

Column B ≥ Column C