

# UNIVERSAL NEWBORN HEARING SCREENING

## 2010 Hospital Report Form

Date: \_\_\_\_\_ Hospital Code: \_\_\_\_\_ Facility Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name/Title of Person Completing Report \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

**Reporting Schedule: January 1, 2010 12:01 AM - December 31, 2010 12:00 PM (Indicate Reporting Period)**

X	Reporting Period - Calendar Year 2010	Deadline for Submission
	January 1, 2010- March 31, 2010	April 15, 2010
	April 1, 2010 - June 30, 2010	July 15, 2010
	July 1, 2010 - September 30, 2010	October 15, 2010
	October 1, 2010 - December 31, 2010	January 15, 2011

# of Live Births	# of Newborn Deaths	# of Newborns Refused Screening	# of Newborns Transferred to Another Hospital w/o Screening
# of Newborns Transferred Into Hospital w/o Screening	# of Newborns Who Passed the Screening		# of Newborns Who Did Not Pass the Screening
# of Newborns Born in this Quarter but in NICU and not yet Screened	# of Newborns Born in this Quarter but Referred to Private Practice for Initial Screening	# of Newborns Discharged without Screening	
<b>Reason for not Screening:</b>			

### **DEFINITIONS**

**# of Live Births** = The number of live births occurring in reporting period which begins at 12:01 AM of the first day of the quarter and ends at 12:00 PM the last day of the quarter. A live birth is defined as the complete expulsion or extraction of a product of conception from its mother, irrespective of the duration of the pregnancy, which after such separation, breathes or shows any other evidence of life; beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscle, whether or not the umbilical cord has been cut or the placenta is attached. GA Code (31-10)

**# of Newborn Deaths** = The number of newborns who die before hospital discharge and therefore are not eligible for screening during the reporting period.

**# of Newborns Refused Screening** = The number of newborns who are not screened because of parent refusal during reporting period; documentation of the parent's refusal should be in newborn's birth file.

**# of Newborns Transferred to Another Hospital Without Screening** = The number of newborns transferred to another facility before hearing screening is completed, during the reporting period.

**# of Newborns Transferred into Hospital Without Screening** = The number of newborns transferred into your hospital from another facility that have not been screened at the previous hospital, during the reporting period.

**# of Hearing Screenings Conducted** = The number of hearing screenings performed in the reporting period prior to hospital discharge (non-duplicated count; only count each newborn once regardless of the number of screening attempts).

**# of Newborns who PASSED the Screening** = The number of newborns in the reporting period whose last screening was a "PASS", regardless of the number of times screened.

**# of Newborns who DID NOT PASS the Screening** = The number of newborns in the reporting period whose last screening before discharge was a "DID NOT PASS", regardless of the number of times screened.

**# of Newborns Born in this Quarter but in NICU and Not yet Screened** – List number newborns born in this reporting period who are in the NICU and will not receive a hearing screen until discharge.

**# of Newborns Born in this Quarter but Referred to Private Practice for Initial Screening** – List number of newborns that are referred to a private pediatrician or ENT for their initial or first screening.

**# of Newborns Discharged without Screening** – List newborns not screened before discharge for any reason excluding NICU or referred to a physician for initial or first screening.