

Newborn Hearing Screening

This survey is sent to parents of infants who passed their newborn hearing screening after they went home from the hospital. Please respond to the questions that you can answer. Only parents of infants who have received hearing re-testing are asked to respond to questions 12-20.

- 1) Your relationship to baby: _____
(Example: mother, father, grandmother, grandfather, foster parent, etc.)

- 2) When did you first learn that your baby's hearing would be screened or needed to be screened?
 Before hospital admission
 While in the hospital
 After hospital discharge
 Not sure
 Other: _____

- 3) How did you feel when you first learned that your baby would have his or her hearing screened?
 Not at all anxious or worried
 Somewhat anxious or worried
 Anxious or worried
 Very anxious or worried

4) How were you **first** told about the **results** of your baby's hearing screening? (Please check one)

The **staff** at the hospital or office where my baby's hearing was screened told me **before** I went home.

The **doctor** told me **before** I went home from the hospital or office where my baby's screening was done.

I received a card or note **before** I went home.

The **staff** at the hospital or office where my baby's hearing was screened told me **after** I went home.

The **doctor** told me **after** I went home from the hospital or office where my baby's screening was done.

I got a letter with the results mailed to my home.

I was never told the results.



GO to 8

Other: _____

5) What were the results of your baby's hearing screening?

Passed

Referred for more testing

Not sure

6) Please mark the sentence below that best describes how you understood the results of the hearing screening your baby had.

My baby did not have a hearing loss.

It was possible, but rather unlikely, that my baby had a hearing loss.

It was possible that my baby had a hearing loss.

It was very likely that my baby had a hearing loss.

My baby had a hearing loss.

I did not understand the results.

7) When you learned the **results** of your baby's hearing screening, how did you feel?

Not at all anxious or worried

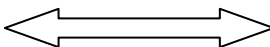
Somewhat anxious or worried

Anxious or worried

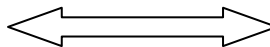
Very anxious or worried

8) Thinking back on your baby's hearing screening, please circle the number that shows how you felt for each statement.

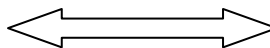
The people doing the screening were experienced with the equipment...

Definitely yes  Definitely no Not sure
1 2 3 4 5

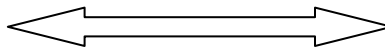
The people doing the screening seemed to have lots of experience working with infants...

Definitely yes  Definitely no Not sure
1 2 3 4 5

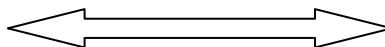
The test and explanations were done...

Professionally  Unprofessionally Not sure
1 2 3 4 5

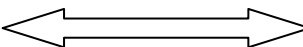
Explanations and answers to your questions were...

Clear  Confusing Not sure
1 2 3 4 5

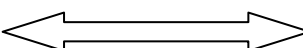
What you were told to do next was...

Clear  Confusing Not sure
1 2 3 4 5

The time from start to finish was...

About right  Too long Not sure
1 2 3 4 5

Your opinions and suggestions were...

Listened to  Not listened to Not sure
1 2 3 4 5

9) Overall, how satisfied were you with the **people** who provided hearing screening services to your baby?

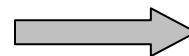
- Very satisfied
- Satisfied
- Somewhat satisfied
- Not very satisfied
- Not at all satisfied

10) Overall, how satisfied were you with the hearing screening **services** provided to your baby and family?

- Very satisfied
- Satisfied
- Somewhat satisfied
- Not very satisfied
- Not at all satisfied

11) After your baby's hearing screening, what happened next?

- We returned to the hospital for another screen.
- We were referred to the hospital audiology department for re-testing.
- We were referred to an audiologist outside of the hospital for re-testing.
- My baby's doctor re-tested my baby's hearing in his or her office.
- My baby was not re-tested after the first hearing screen.



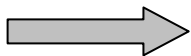
GO to 21

12) How did you feel when you first learned that your baby needed his or her hearing **re-tested**?

- Not at all anxious or worried
- Somewhat anxious or worried
- Anxious or worried
- Very anxious or worried

13) Did you have any problems making and/or getting the **outpatient hearing re-testing** appointment(s)?

- Yes
- No



GO to 13a



GO to 13b

- 13a) What problems did you have with the outpatient re-testing appointment?
(Please check all that apply)

Difficulty making the appointment

- The hospital made the appointment for me but it was not convenient.
 I did not know where to call to make the appointment.
 There were no appointments available for a time that I could be there.
 Making phone calls for the appointment was difficult.

Difficulty with transportation

- It took too long to travel to the appointment.
 It was difficult to get transportation to go to the appointment.

Other responsibilities

- My baby was frequently sick.
 It was difficult to take time off work.
 It was hard to find someone to care for my other children while I went to the appointment.



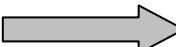
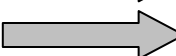
Paying for the appointment

- The re-testing was not covered by my baby's health plan.
 The re-testing was too expensive.
 Other: _____

- 13b) Approximately how long was it from the time you or the hospital first tried to make an outpatient re-testing appointment until the time your baby had that appointment?

- Less than 1 week
 1 to 2 weeks
 2 weeks to 1 month
 1 to 2 months
 More than 2 months

- 14) How many different times did you take your baby to an outpatient re-testing site before all the testing was completed?

- One time 
 Two times 
 Three times 
 More than three times 

GO to 15

GO to 14a

GO to 14a

GO to 14a

14a) If it took more than one appointment to complete the re-testing, what was the reason(s)?
(Please check all that apply)

- My baby was fussy.
- The equipment didn't work right.
- Not enough time was scheduled for the appointment.
- The audiologist or person who tested my baby's hearing was running late.
- I was running late.
- The results were unclear or inconclusive.
- Other: _____

15) How were you **first** told about the **results** of your baby's **outpatient hearing re-testing**?
(Please check one)

- The **staff** at the hospital or office where my baby's hearing was re-tested told me **before** I went home.
- The **staff** at the hospital or office where my baby's hearing was re-tested told me **after** I went home.
- The **doctor** told me **after** I went home from the hospital or office where my baby's hearing was re-tested.
- I got a letter with the results mailed to my home.
- I was never told the results.
- Other: _____



GO to 18

16) Please mark the sentence below that best describes how you understood the results of the **outpatient hearing re-testing** your child had.

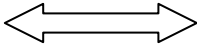
- My baby did not have a hearing loss.
- It was possible, but rather unlikely, that my baby had a hearing loss.
- It was possible that my baby had a hearing loss.
- It was very likely that my baby had a hearing loss.
- My baby had a hearing loss.
- I did not understand the results.

17) When you found out about the **results** of your baby's **outpatient hearing re-testing** how did you feel?

- Not at all anxious or worried
- Somewhat anxious or worried
- Anxious or worried
- Very anxious or worried

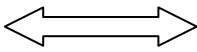
18) Thinking back on when your baby's hearing was **re-tested as an outpatient**, please circle the number that shows how you felt for each statement.

The people doing the re-testing were experienced with the equipment...

Definitely yes  Definitely no
1 2 3 4 5

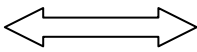
Not sure

The people doing the re-testing seemed to have lots of experience working with infants...

Definitely yes  Definitely no
1 2 3 4 5

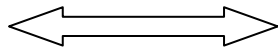
Not sure

The tests and explanations were done...

Professionally  Unprofessionally
1 2 3 4 5

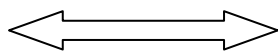
Not sure

Explanations and answers to your questions were...

Clear  Confusing
1 2 3 4 5

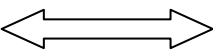
Not sure

What you were told to do next was...

Clear  Confusing
1 2 3 4 5

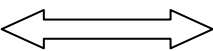
Not sure

The time from start to finish was...

About right  Too long
1 2 3 4 5

Not sure

Your opinions and suggestions were...

Listened to  Not listened to
1 2 3 4 5

Not sure

19) Overall, how satisfied were you with the **people** who provided hearing re-testing services to your baby?

- Very satisfied
- Satisfied
- Somewhat satisfied
- Not very satisfied
- Not at all satisfied

20) Overall, how satisfied were you with the hearing re-testing **services** provided to your baby and family?

- Very satisfied
- Satisfied
- Somewhat satisfied
- Not very satisfied
- Not at all satisfied



21) How often did people at the hospital or office where you received services communicate with you in a language you use at home?

- Always
- Most of the time
- Sometimes
- Rarely
- Never

22) Were you informed that hearing loss can develop at any time and that concerns should be discussed with your doctor?

- Yes
- No

23) Do any of your baby's family members have a hearing loss that began during childhood?

- Yes  **GO to 23a**
- No  **GO to 24**

23a) If yes, which ones?

- Mother Grandmother Sister Aunt Cousin
- Father Grandfather Brother Uncle Other: _____

24) We would like to know about your baby's overall health. Please choose the word that you think best describes your baby's overall health.

- Excellent
- Very Good
- Good
- Fair
- Poor

25) Does your baby have any health problems or special needs?

- Yes, please specify _____
- No

26) Do you agree or disagree with the following statements about newborn hearing screening?

Agree **Disagree**

- Screening allows parents to do something positive if their baby has a hearing loss.
- Screening leads to early diagnosis if the baby has a hearing loss.
- Screening leads to early treatment if it is needed.
- Screening makes parents worry unnecessarily.
- Screening takes too much effort.
- Screening wakes or upsets the baby.

27) If you had another baby would you want him or her to have his or her hearing screened?

- Yes
- No

28) How are your baby's medical expenses paid?

- Medicaid
- Medicaid HMO
- Private
- Other HMO
- Self pay
- Other: _____

29) Please list any suggestions you have for improving the newborn hearing screening and re-testing process:

Thank you for your help with this survey. Your responses will be used to help improve the hearing screening process for all families.