Kansas Administrative Regulations

Department of Health and Environment

Article 4.—Maternal and Child Health—Newborn Infant Hearing Screening Act.

28-4-600. Definitions.

(a) "Accepted medical practices" means the following:

(1) Physiologic hearing screening of all newborns;

(2) follow-up hearing assessment before three months of age for those newborns and infants who did not pass the hearing screening;

(3) follow-up medical evaluation for those newborns and infants with confirmed hearing loss; and

(4) follow-up early intervention services to meet the needs of each newborn and infant with hearing loss and each parent before the child reaches six months of age.

(b) "Audiologic assessment" means the physiological tests required to evaluate and describe hearing status.

(c) "Audiologist" has the meaning specified in K.S.A. 65-6501, and amendments thereto.

(d) "Auditory brainstem response" and "ABR" mean an objective, electrophysiologic measurement of the brainstem's response to acoustic stimulation of the ear.

(e) "Automated auditory brainstem response" and "AABR" mean an objective, electrophysiologic measurement of the brainstem's response to acoustic stimulation of the ear, obtained with equipment that automatically indicates whether the child has passed the hearing screening.

(f) "Automated otoacoustic emissions" and "AOAE" mean an objective, physiologic response from the cochlea, obtained with equipment that automatically indicates whether the child has passed the hearing screening.

(g) "Department" means the Kansas department of health and environment.

(h) "Discharge" means a newborn's or infant's release from the premises of a medical care facility and into the care of the parent of the newborn or infant. This term shall not include transporting the newborn or infant between medical care facilities.

(i) "Early intervention services" has the meaning specified in K.S.A. 75-5648, and amendments thereto.

(j) "Follow-up" means the following:

(1) Referring newborns and infants for further hearing testing if these children either missed or did not pass the initial hearing screening;

(2) referring newborns and infants with confirmed hearing loss for ongoing audiologic services to monitor hearing;

(3) referring newborns and infants with confirmed hearing loss for speech, language, and aural habilitation services; and

(4) referring newborns and infants with confirmed hearing loss for other early intervention services, as needed by these children and their parents.

(k) "Hearing screening" means the following:

(1) The completion of an objective, physiological test or battery of tests on newborns and infants by using instrumentation and procedures specified by the department; and

(2) for other than pass results, referring the newborn or infant to an audiologist for audiologic assessment.

(l) "Hearing screening state program coordinator" means the audiologist in the department who is designated to coordinate the statewide "sound beginnings" activities.

(m) "Infant" means a child from 30 days through 12 months of age.

(n) "Initial hearing screening" means the procedure or procedures employed for the purpose of screening hearing before discharge.

(o) "Medical care facility" means a hospital, birthing center, or other licensed facility that provides obstetrical and newborn services.

(p) "Newborn" means a child through 29 days of age.

(q) "Otoacoustic emissions" and "OAE" mean an objective, physiologic response from the cochlea. This term may include transient evoked otoacoustic emissions and distortion product otoacoustic emissions.

(r) "Parent" means a natural parent, adoptive parent, stepparent, foster parent, legal guardian, or other legal custodian of a child.

(s) "Primary medical care provider" means the physician or health care agent who provides the newborn's or infant's routine medical care in the locale where the child resides after discharge.

(t) "Protocol" means the guidelines followed to conduct hearing screening.

(u) "Receiving agency" means the facility that agrees to provide hearing screening for sending agencies.

(v) "Risk indicator" means a factor known to place a newborn or an infant at risk for being born with or developing a hearing loss.

(w) "Sending agency" means a hospital with fewer than 75 births averaged over three years that chooses not to do hearing screening. Each sending agency shall arrange for hearing screening to be performed at another facility.

(x) "Sound beginnings" means the Kansas program consisting of hearing screening, tracking, and follow-up for newborns and infants.

(y) "Tracking" means using information about the newborn's or infant's hearing screening status to ensure that the newborn or infant receives timely and appropriate services to complete the screening and referral process.

(Authorized by and implementing K.S.A. 65-1,157a; effective July 2, 2004.)

***** Authenticated Kansas Administrative Regulation *****