

## Speech and language skills a baby with normal hearing should be able to do:

Birth to 3  
Months of Age



Startles to loud sounds.  
Blinks or jumps when there is a sudden, loud noise.

3 to 6  
Months of Age



Looks for sounds with their eyes.  
Uses a variety of sounds: squeals, whimpers, and/or chuckles.  
Enjoys rattles and toys that make sounds.

Around 6  
Months of Age



Turns head toward sound.  
Begins to imitate speech sounds.  
Babbles, "ma-ma", "ga-ga", "da-da".

Around 9  
Months of Age



Turns head toward soft sounds.  
Understands "no-no" or "bye-bye".  
Imitates speech sounds of others

Around 12  
Months of Age



Correctly uses "ma-ma" or "da-da".



MISSOURI DEPARTMENT OF  
**HEALTH &  
SENIOR SERVICES**

Newborn Hearing Screening Program  
PO Box 570  
Jefferson City, MO 65102  
800-877-6246

[Health.Mo.Gov/newbornhearingscreening](https://www.health.mo.gov/newbornhearingscreening)

For information regarding other maternal and child health services, call or text 800-TEL-LINK (800-835-5465)  
[Health.Mo.Gov/tellink](https://www.health.mo.gov/tellink)

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# YOUR BABY'S FIRST HEARING TEST



**NEWBORN  
HEARING  
SCREENING  
PROGRAM**



MISSOURI DEPARTMENT OF  
**HEALTH &  
SENIOR SERVICES**

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## Why should my infant's hearing be screened?



Hearing loss is one of the most common conditions present at birth.



It is important to diagnose hearing problems early. The first six months of a baby's life are critical for learning speech and language. If your baby has an undetected hearing loss, important learning experiences will be missed.



Babies cannot tell us if they cannot hear, and screening is the only way to know.

## What should I know about the hearing screening?

- Screening is safe, painless, and can be done in about 10 minutes.
- Hearing screenings are performed in the hospital just hours after your baby is born.
- Most babies sleep through the screening.
- You will get screening results before you leave the hospital.
- The results will either be "pass" or "refer."
- In Missouri, all babies are screened for possible hearing loss.

Be sure to tell the hospital the name of your baby's health professional or clinic so the results can be sent to them.

## Why do some babies need another hearing screening ("refer")?

- Some babies may need another screening because:
  - Fluid is in the ear,
  - The baby was moving a lot,
  - The testing room was noisy, or
  - The baby has a hearing loss.
- If your baby does not pass the hearing screening, make sure his or her hearing is screened again or tested by an audiologist as soon as possible.
- Most babies who need another screening have normal hearing. Some will have hearing loss.



## Can a newborn baby pass the hearing screening and still have hearing loss?

- Yes, some babies hear well enough to pass the first test, but lose their hearing later because of:
  - Some illnesses,
  - Some injuries,
  - Some medicines
  - A family history of childhood hearing loss.
- Use the list of normal hearing development skills on the back cover as a guide. Infants and children with concerns may be eligible for services.

## Is my child at risk for developing hearing loss at a later age?

Your baby may be at risk for late-onset hearing loss if the following risk factors exist:

- A family member has been deaf or hard-of-hearing since birth or lost their hearing early in childhood.
- Child stayed in the neonatal intensive care unit for more than 5 days.
- Child received antibiotics that can damage the ear (such as gentamicin, streptomycin, tobramycin, amikacin, and netilmicin).
- The birth mother had an infection while pregnant (such as rubella, syphilis, herpes, CMV, Zika, or toxoplasmosis).
- Child has craniofacial anomalies such as an under-developed outer ear, absent ear canal, or an abnormally small head.
- Child has had a head injury, especially with basal or temporal bone fracture.
- Child had neonatal difficulties at birth such as mechanical ventilation, ECMO, or hyperbilirubinemia (bad jaundice) with blood transfusion.
- The birth mother or child experienced a bacterial or viral infection such as meningitis or encephalitis during pregnancy or soon after birth.
- Child has a syndrome associated with late-onset hearing loss.
- Child received chemotherapy, especially when administered in conjunction with radiation.
- The caregiver has concern regarding hearing, speech, language, developmental delay, and/or developmental regression.