

## CHAPTER 19

## NEWBORN HEARING SCREENING PROGRAM

## Authority

N.J.S.A. 26:2-103.1 et seq., particularly 103.9.

## Source and Effective Date

R.2005 d.432, effective December 19, 2005.  
See: 36 N.J.R. 5058(a), 5639(a), 37 N.J.R. 4913(a).

## Chapter Expiration Date

In accordance with N.J.S.A. 52:14B-5.1c, Chapter 19, Newborn Hearing Screening Program, expires on June 17, 2011. See: 43 N.J.R. 105(a).

## Chapter Historical Note

Chapter 19, Newborn Screening Program, was adopted as R.1980 d.173, effective July 1, 1980. See: 12 N.J.R. 10(d), 12 N.J.R. 273(d).

Pursuant to Executive Order No. 66(1978), Chapter 19, Newborn Screening Program, was readopted as R.1985 d.380, effective June 28, 1985. See: 17 N.J.R. 869(a), 17 N.J.R. 1892(a).

Subchapter 2, Newborn Biochemical Screening, was adopted as R.1990 d.146, effective March 5, 1990. See: 21 N.J.R. 3633(b), 22 N.J.R. 844(a).

Pursuant to Executive Order No. 66(1978), Chapter 19, Newborn Screening Program, was readopted as R.1990 d.289, effective May 11, 1990. See: 22 N.J.R. 733(a), 22 N.J.R. 1764(a).

Pursuant to Executive Order No. 66(1978), Chapter 19, Newborn Screening Program, was readopted as R.1995 d.274, effective May 8, 1995. See: 27 N.J.R. 807(a), 27 N.J.R. 2213(a).

Pursuant to Executive Order No. 66(1978), Chapter 19, Newborn Screening Program, was readopted as R.2000 d.200, effective April 19, 2000. See: 31 N.J.R. 3943(b), 32 N.J.R. 1785(b).

Chapter 19, Newborn Hearing Screening Program, was readopted by R.2005 d.346, effective September 20, 2005. Chapter was "Newborn Screening Program". Subchapter 2, Newborn Biochemical Screening, was recodified as N.J.A.C. 8:18-1, effective October 17, 2005. See: 37 N.J.R. 1661(a), 37 N.J.R. 4018(a).

Chapter 19, Newborn Hearing Screening Program, was repealed and Chapter 19, Newborn Hearing Screening Program, was adopted as new rules by R.2005 d.432, effective December 19, 2005. See: 36 N.J.R. 5058(a), 36 N.J.R. 5639(a), 37 N.J.R. 4913(a).

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## SUBCHAPTER 1. NEWBORN HEARING SCREENING

## 8:19-1.1 Definitions

The following words and terms, when used in this subchapter, shall have the following meanings unless the context clearly indicates otherwise:

"Audiologic evaluation" means audiologic evaluation as that term is described in the JCIH Position Statement.

"Auditory Brainstem Response" or "ABR" means a physiologic measure used for detecting unilateral or bilateral hearing loss by measuring the activity of the cochlea, auditory nerve, and auditory brainstem pathways.

"Birth attendant" means a person who attends and assists during the birth of a child.

"Birthing center" means an ambulatory care facility or a distinct part of a facility that is separately licensed as an ambulatory care facility and provides routine prenatal and intrapartum care. These facilities provide care to low-risk maternity patients who are expected to deliver neonates of a weight greater than 2,499 grams and at least 37 weeks gestational age and who require a stay of less than 24 hours after birth.

"Birthing facility" means a health care facility that provides birthing and newborn care services and includes birthing centers.

"Commissioner" means the Commissioner of Health and Senior Services.

"Decibel" or "dB" means a unit of sound intensity, based on a logarithmic relationship of one intensity to a reference intensity.

"Decibels hearing level" or "dBHL" means decibel notation used on the audiogram that is referenced to audiometric zero.

"Decibels normalized hearing level" or "dBnHL" means decibel notation referenced to behavioral thresholds of a sample of normal hearing persons, used most often to describe the intensity level of click stimuli used in evoked potential audiometry.

"Department" means the Department of Health and Senior Services.

“Distortion product otoacoustic emissions” or “DPOAE” means responses generated in response to two continuous pure-tones, referred to as “primaries,” and occurring at frequencies that relate mathematically to the frequency of the primaries.

“EBC” means the Electronic Birth Certificate or the Electronic Birth Certificate Registration System.

“Hearing loss” means a hearing loss of 30dB or greater in the frequency region important for speech recognition and comprehension in one or both ears, which is approximately 500 through 4,000 hertz (Hz).

“JCIH Position Statement” means the “Year 2000 Position Statement: Principles and Guidelines for Early Hearing Detection and Intervention Programs,” of the Joint Committee on Infant Hearing (JCIH), incorporated herein by reference, as amended and supplemented, published in *Pediatrics*, Vol. 106, No. 4, at 798 (October 2000), available by writing to the JCIH c/o American Academy of Pediatrics, 141 Northwest Point Blvd., Elk Grove Village, IL 60007-1098, telephone: (800) 433-9016, ext. 4917, e-mail: [screening@aap.org](mailto:screening@aap.org), and available for download in Adobe Acrobat format at <http://www.jcih.org/jcih2000.pdf>, and at <http://www.jcih.org/posstatemts.htm>, and available upon request to the Division of Family Health Services of the Department.

“Medical home” means an approach to providing health-care that is defined by care that is accessible, family-centered, continuous, comprehensive, coordinated, compassionate, and culturally competent.

“Midwife” means a person trained to assist a woman during childbirth.

“Newborn” means a child up to 28 days old.

“Newborn Hearing Follow-up Report” means Department form number SCH-2 with this title, used for reporting outpatient newborn hearing screening and audiologic exam results, which appears at chapter Appendix A, incorporated herein by reference. The form is available upon request from the EHDI, and can be downloaded from the Department website as a Word document at <http://www.state.nj.us/health/forms/sch-2.dot> or as an Adobe Acrobat file at <http://www.state.nj.us/health/forms/sch-2.pdf>.

“Newborn Hearing Lost to Follow-up form” means Department form number SCH-3 with this title that requires the submission of the child and parent names, date of birth, address, phone number, pediatrician name, and the reason the child is lost to follow-up. The form is available upon request from the EHDI, and can be downloaded from the Department website as a Word document at <http://www.state.nj.us/health/forms/sch-3.dot> or as an Adobe Acrobat file at <http://www.state.nj.us/health/forms/sch-2.pdf>.

“New Jersey Early Hearing Detection and Intervention Program” or “EHDI” means the program within the Department

that implements the Universal Newborn Hearing Screening program pursuant to P.L. 2001, c.373. The EHDI program may be contacted by mail at PO Box 364, Trenton, NJ 08625-0364, or by telephone at (609) 292-5676.

“Otoacoustic emissions” (OAE) means a physiologic measure used for detecting unilateral or bilateral hearing loss by measuring the responses generated within the cochlea by the outer hair cells, by means of either DPOAE or TEOAE. OAE evaluation does not detect neural dysfunction.

“Ototoxic drug monitoring procedures” means the procedures for monitoring patients who are treated with ototoxic medications.

“Ototoxic medication” means a medication that has a toxic action upon the ear resulting in possible hearing loss.

“Parent” means a biological parent, stepparent, adoptive parent, legal guardian or other legal custodian of the child.

“Physiologic hearing screening measure” means the electrical result of the application of physiologic agents by means of either ABR or OAE, and is also known as electrophysiologic hearing screening measure, as used in N.J.S.A. 26:2-103.2.

“Responsible physician” means the infant’s medical home or the physician that will be providing well child care for the infant.

“Special Child Health Services Registration” means Department form number SCH-0 with this title, used for reporting children with special health care needs, which appears at subchapter Appendix B, incorporated herein by reference. The form is also available upon request from the EHDI. The form can be downloaded from the Department website as a Word document at <http://www.state.nj.us/health/forms/sch-0.dot> or as an Adobe Acrobat file at <http://www.state.nj.us/health/forms/sch-0.pdf>.

“Transient Evoked Otoacoustic Emissions” or “TEOAE” means frequency-specific responses evoked by brief acoustic stimuli, such as clicks or tone bursts, that generally appear up to 20 milliseconds after stimuli are delivered to the ear.

### 8:19-1.2 Hearing development literature supplied to parents

(a) Upon or prior to the admission of a newborn to a birthing facility in the State, the birthing facility shall provide all parents of the newborn with literature provided by the Department describing the normal development of auditory function and the New Jersey Early Hearing Detection and Intervention Program.

(b) The literature will be designed to provide parents with an understanding of the implications of hearing loss on the