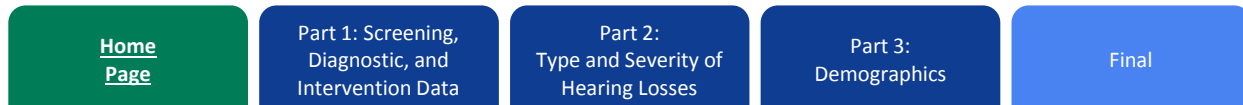


**2016 CDC EHDl  
Hearing Screening and Follow-up Survey (HSFS)**

Contact Information	
Name	Stacy Callender
E-mail	<a href="mailto:Stacy.Callender@msdh.ms.gov">Stacy.Callender@msdh.ms.gov</a>
Confirm E-mail	<a href="mailto:Stacy.Callender@msdh.ms.gov">Stacy.Callender@msdh.ms.gov</a>
State/Territory*	Mississippi

*\*Please use dropdown bar to select State/Territory.*

The following navigation bar is available on all worksheets. The underlined tab indicates the current sheet. Click on a tab to jump to the corresponding sheet.



**Directions:**

Please complete the following survey with only documented, non-estimated data for infants born between January 1, 2016 and December 31, 2016. Any comments and/or caveats about the reported data can be entered in the Final section at the end of the survey. If you have any questions about this survey, please refer to the Explanations document or contact both Suhana Alam (SAlam1@cdc.gov) and Kris Subbiah (KSubbiah@cdc.gov). Including both Suhana and Kris will help ensure a prompt response.

**Survey Notes:**

The survey is divided into three parts, which each have several different sections. These include Part 1 (Screening, Diagnostic, and Intervention Data), Part 2 (Type and Severity of Hearing Losses), and Part 3 (Demographics).

Data cannot be manually entered into fields highlighted in **green**. The totals for these green fields will be automatically calculated based on the data entered into the **yellow-highlighted** fields.

To navigate through the survey use the menu bar located near the top of each survey page and click on the desired section (e.g., "Diagnostic Data").

Public reporting burden of this collection of information is approximately 4 hours, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0010).

**Part 1: Screening, Diagnostic, and Intervention Data**

<a href="#">Screening Data</a>	<a href="#">Diagnostic Data</a>	<a href="#">Intervention Data</a>	<a href="#">Additional Cases Not Reported</a>
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Note: Please see the Home Page Tab for additional instructions on completing this tab.

<b>2016 Hearing Screening Data</b>	
<b>Total Occurrent Births***</b>	36,938
Total Occurrent Births According to Vital Records	36,938
<b>Optional:</b> Total Occurrent Births at Military Facilities According to Vital Records	371
<b>Optional:</b> Total Occurrent Homebirths	198
<b>Overall Documented Screening Results (Most Recent/Final Screen)</b>	
<b>Total Documented as Screened</b>	36,299
<b>Passed (most recent/final screen)</b>	
Total Passed (most recent / final screen)*	35,672
<i>Passed: Before 1 Month of Age</i>	34,923
<i>Passed: After 1 Month of Age</i>	687
<i>Passed: Age Unknown</i>	62
<b>Not Passed (most recent/final screen)</b>	
Total Not Passed (most recent / final screen)**	627
<i>Not Passed: Before 1 Month of Age</i>	436
<i>Not Passed: After 1 Month of Age</i>	191
<i>Not Passed: Age Unknown</i>	0
<b>Detailed Screening Results (if applicable)</b>	
<b>Passed (most recent/final screen)</b>	
<i>Passed initial / No outpatient</i> †	34,602
<i>No initial</i> ‡ / <i>Passed outpatient</i>	685
<i>Passed initial / Passed outpatient</i>	25
<i>Referred initial / Passed outpatient</i>	360
<b>Total Passed (most recent/final screen)*</b>	35,672
<b>Not Passed (most recent/final screen)</b>	
<i>Referred initial / No outpatient</i> †	0
<i>No initial</i> ‡ / <i>Referred outpatient</i>	0
<i>Passed initial / Referred outpatient</i>	0
<i>Referred initial / Referred outpatient</i>	286
<i>Referred initial / straight to diagnostic evaluation</i>	341
<b>Total Not Passed (most recent/final screen)**</b>	627
<b>No Documented Screening / Undetermined (Most Recent/Final Screen)</b>	
<b>Total Documented as Not Screened</b>	639
Infant Died	198
Non-resident	37
Unable to be Screened due to Medical Reasons	15
Parents / Family Declined Services	2
Infant Transferred and No Documentation of Screening	57
Infant Adopted	0
Homebirth	108
Parents / Family Contacted but Unresponsive	6
<b>Please use this dropdown box to indicate the Unresponsive Definition Used</b> †	Old Unresponsive Definition
Unable to Contact	4
Unknown	212
Other	0
<b>Total Occurrent Births***</b>	36,938

**Notes:**

† See the HSF5 Explanations document for the definitions.

‡ "No initial" includes infants who did not received an initial screening, missed an initial screening or refused an initial screening. "No outpatient" includes infants who did not received an outpatient screening, missed an outpatient screening or refused an outpatient screening.

\* The value for the "Total Passed (most recent/final screen)" field in the Overall Documented Screening Results section must match the value for the "Total Passed (most recent/final screen)" field in the Detailed Screening Results section. If there is any difference you will receive a caution message.

\*\* The value for the "Total Not Passed (most recent/final screen)" field in the Overall Documented Screening Results section must match the value for the "Total Not Passed (most recent/final screen)" field in the Detailed Screening Results section. If there is any difference you will receive a caution message.

\*\*\* The value for the "Total Occurrent Births" field at the bottom of this table must match the value reported for the "Total Occurrent Births" field at the top of this table. If there is any difference you will receive an error message. If received, please make sure to correct this error before continuing to the next section.

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[Part 1: Screening, Diagnostic, and Intervention Data](#)

Part 2: Type and Severity of Hearing Losses

Part 3: Demographics

Final

**Part 1: Screening, Diagnostic, and Intervention Data**

[Screening Data](#)

**[Diagnostic Data](#)**

[Intervention Data](#)

[Additional Cases Not Reported](#)

Note: Please see the Home Page Tab for additional instructions on completing this tab.

<b>2016 Diagnostic Data</b>	
<b>Total Not Passed (most recent/final screen)*</b>	627
<b>Documented Diagnostics</b>	
<b>Total with Documented Diagnosis</b>	368
<b>Diagnosed with No Hearing Loss</b>	
<b>Total with No Hearing Loss</b>	324
<i>No Hearing Loss: Before 3 Months of Age</i>	245
<i>No Hearing Loss: After 3 Months of Age</i>	57
<i>No Hearing Loss: Age Unknown</i>	22
<b>Diagnosed with Permanent Hearing Loss</b>	
<b>Total with Permanent Hearing Loss</b>	44
<i>Permanent Hearing Loss: Before 3 Months of Age</i>	11
<i>Permanent Hearing Loss: After 3 Months but Before 6 Months of Age</i>	16
<i>Permanent Hearing Loss: After 6 Months of Age</i>	17
<i>Permanent Hearing Loss: Age Unknown</i>	0
<b>No Documented Diagnostics / Undetermined</b>	
<b>Total with No Documented Diagnosis</b>	259
<i>Audiological Diagnosis in Process (Awaiting Diagnosis) Only applies to infants seen at least one time and have a follow-up appointment scheduled.</i>	167
<i>PCP/ENT did not Refer Infant for Diagnostic Testing</i>	0
<i>Infant Died</i>	38
<i>Non-resident</i>	1
<i>Unable to Receive Diagnostic Testing due to Medical Reasons</i>	7
<i>Parents / Family Declined Services</i>	1
<i>Moved out of Jurisdiction</i>	0
<i>Infant Adopted</i>	0
<i>Parent / Family Contacted but Unresponsive</i>	45
<b><i>Please use this dropdown box to indicate the Unresponsive Definition Used †</i></b>	Old Unresponsive Definition
<i>Unable to Contact</i>	0
<i>Unknown</i>	0
<i>Other</i>	0
<b>Total Diagnosed and Not Diagnosed*</b>	627

**Notes:**

† See the HSFS Explanations document for the definitions.

The value for the "Total Diagnosed and Not Diagnosed" field at the bottom of this table must match the value for the "Total Not Passed (most recent/final screen)" field at the top of this table. If there is any difference you will receive an error message. If received, please make sure to correct this error before continuing to the next section.

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**Part 1: Screening, Diagnostic, and Intervention Data**

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**[Intervention Data](#)**

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Note: Please see the Home Page Tab for additional instructions on completing this tab.

<b>2016 Early Intervention (EI) Data</b>	
<b>Total with Permanent Hearing Loss*</b>	44
<b>Total with Referral Status</b>	44
Referred to Part C EI	44
Referred to Part C EI: Before 6 Months of Age	29
Referred to Part C EI: After 6 Months of Age	15
Referred to Part C EI: Age Unknown	0
Not Referred to Part C EI	0
Unknown Referral Status	0
<b>Documented EI Services</b>	
<b>Total Enrolled in Part C EI Services</b>	37
Signed IFSP: Before 6 Months of Age	22
Signed IFSP: After 6 Months of Age	15
Signed IFSP: Age Unknown	0
<b>Total Received Part C EI Services</b>	37
Received Part C EI Services: Before 6 Months of Age	18
Received Part C EI Services: After 6 Months of Age	19
Received Part C EI Services: After 6 Months of Age, Due to Family Initially Declining Services	0
Received Part C EI Services: Age Unknown	0
<b>Total from Non-Part C EI Services Only</b>	0
Received Non-Part C EI Services: Before 6 Months of Age	0
Received Non-Part C EI Services: After 6 Months of Age	0
Received Non-Part C EI Services: Age Unknown	0
<b>Monitoring Services Only</b>	
Received Only Monitoring Services	0
<b>No Documented EI Services/ Undetermined</b>	
<b>Total with No Documented EI Services</b>	7
Not Eligible for Part C Services	
Infant Died	
Non-resident	
Unable to Receive EI due to Medical Reasons	
Parents / Family Declined Services	3
Moved Out of Jurisdiction	
Infant Adopted	
Parent / Family Contacted but Unresponsive	1
<b>Please use this dropdown box to indicate the Unresponsive Definition Used<sup>†</sup></b>	Old Unresponsive Definition
Unable to Contact	3
Unknown	
Other	
<b>Total with EI Services &amp; No EI Services*</b>	44

Notes:

**Part 1: Screening, Diagnostic, and Intervention Data**[Screening Data](#)[Diagnostic Data](#)[Intervention Data](#)**[Additional Cases  
Not Reported](#)**

Note: Please see the Home Page Tab for additional instructions on completing this tab.

**2016 Additional Cases Not Reported****Cases of Hearing Loss not included in the "Diagnostic Data" section\***

<b>Total Additional Cases of Hearing Loss not included in Diagnostic Data</b>	0
Additional Cases of Non-permanent, Transient Hearing Loss	0
Additional Cases of Permanent Hearing Loss (e.g., late onset)	0

**Cases of Hearing Loss not included in the "Intervention Data" section\*\***

<b>Total Additional Cases of Hearing Loss not included in Intervention Data</b>	0
Additional Cases Enrolled in EI (Part C or non-Part C)	0
Additional Cases Not Receiving Intervention: Monitoring Only	0
Additional Cases Not Receiving Intervention: Unknown	0
Additional Cases Not Receiving Intervention: Other	0

**Cases Enrolled in EI without a Confirmed Diagnosis\*\*\***

<b>Total Additional Cases Enrolled in EI without Confirmed Diagnosis</b>	0
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**Notes:**

- \* Only cases of hearing loss not reported in the previous "Diagnostic Data" section should be reported in this "Cases of Hearing Loss not included in the 'Diagnostic Data'" section.
- \*\* Only cases of hearing loss not reported in the previous "Intervention Data" section should be reported in this "Cases of Hearing Loss not included in the 'Intervention Data'" section.
- \*\*\* Only cases who did not pass hearing screening, have no confirmed diagnosis, but were enrolled in early intervention services should be reported in this "Cases Enrolled in EI without a Confirmed Diagnosis" section.

**Part 2: Type and Severity of Hearing Losses (By Ear)**

<b>Total Cases of Permanent Hearing Loss (from Part 1)*</b>	44
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		BILATERAL			UNILATERAL			LATERALITY UNKNOWN <i>(for Cases where it is unknown if the loss is unilateral or bilateral)</i>	
		RIGHT EAR	LEFT EAR	UNKNOWN EAR <i>(Note: record degree of loss for <u>each</u> ear)</i>	RIGHT EAR	LEFT EAR	UNKNOWN EAR		
<b>Sensorineural</b>	Slight								
	Mild	3	1			2			
	Moderate	8	10		2	1			
	Moderately Severe								
	Severe		1						
	Profound	7	7		5				
	Unknown Severity								
<b>Conductive</b>	Slight								
	Mild								
	Moderate								
	Moderately Severe								
	Severe								
	Unknown Severity								
<b>Mixed</b>	Slight								
	Mild	1	1						
	Moderate	1	1		1				
	Moderately Severe								
	Severe	2							
	Profound	1	2						
	Unknown Severity								
<b>Type Unknown</b>	Slight								
	Mild								
	Moderate	2	2			3			
	Moderately Severe								
	Severe								
	Profound					2			
	Unknown Severity								
<b>Auditory Neuropathy</b>	Slight								
	Mild					1			
	Moderate				1				
	Moderately Severe								
	Severe								
	Profound				1				
	Unknown Severity								
<b>Totals by Ear</b>		25	25	0	0	10	9	0	0
<b>Totals by Child</b>		25		0		10	9	0	0
		Total Cases Resolved <i>(i.e., change from hearing loss to no hearing loss)</i>							
		<b>Overall Total*</b>					44		

**Note:**  
 \* The value for the "Overall Total" field at the bottom of this table must match the value for the "Total Cases of Permanent Hearing Loss" field at the top of this table. If there is any difference you will receive an error message. If received, please make sure to correct this error before submitting the survey.

**Part 3: Demographics**

	Screening			Diagnostics		Intervention
	Total Occurrent Births	Total Pass	Total Not Pass	Total with No Hearing Loss	Total with Permanent Hearing Loss	Total Enrolled in Part C EI
<b>Totals (from Part 1)*</b>	<b>36,938</b>	<b>35,672</b>	<b>627</b>	<b>324</b>	<b>44</b>	<b>37</b>
<b>Sex</b>						
Male	346		346	174	25	18
Female	273		273	147	19	19
Unknown	36,319	35,672	8	3		
<b>Totals*</b>	<b>36,938</b>	<b>35,672</b>	<b>627</b>	<b>324</b>	<b>44</b>	<b>37</b>

<b>Maternal Age</b>						
<15 years						
15-19 years	44		44	22	3	1
20 – 24 years	183		183	95	10	8
25-34 years	244		244	135	21	18
35 – 50 years	54		54	26	5	5
> 50 years						
Unknown	36,413	35,672	102	46	5	5
<b>Totals*</b>	<b>36,938</b>	<b>35,672</b>	<b>627</b>	<b>324</b>	<b>44</b>	<b>37</b>

<b>Maternal Education</b>						
Less than High School	8		8	3		
High School Graduate or GED	45		45	18	4	2
Some College or AA/AS degree	21		21	11	2	2
College Graduate or above	28		28	20	1	1
Unknown	36,836	35,672	525	272	37	32
<b>Totals*</b>	<b>36,938</b>	<b>35,672</b>	<b>627</b>	<b>324</b>	<b>44</b>	<b>37</b>

<b>Maternal Ethnicity</b>						
Hispanic or Latino	21		21	10	2	1
Not Hispanic or Latino	498		498	264	32	26
Unknown	36,419	35,672	108	50	10	10
<b>Totals*</b>	<b>36,938</b>	<b>35,672</b>	<b>627</b>	<b>324</b>	<b>44</b>	<b>37</b>

<b>Maternal Race</b>						
White (Not Hispanic)						
White (Hispanic)						
White (Ethnicity Unknown)	222		222	116	18	14
Black or African American (Not Hispanic)						
Black or African American (Hispanic)						
Black or African American (Ethnicity Unknown)	314		314	171	15	14
Asian	3		3		2	2
Native Hawaiian or Pacific Islander	7		7	3	2	1
American Indian or Alaskan Native	3		3			
Unknown	36,389	35,672	78	34	7	6
<b>Totals*</b>	<b>36,938</b>	<b>35,672</b>	<b>627</b>	<b>324</b>	<b>44</b>	<b>37</b>

**Notes:**  
 \* The row values reported for the "Totals (from Part 1)" fields at the top of this table must match the row values reported for the "Totals\*" fields, for each demographic variable. If there is any difference you will receive an error message. Red shading will indicate the cell(s) with an error. If received, please make sure to correct the error(s) before submitting the survey.

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Part 1: Screening, Diagnostic,  
and Intervention Data

Part 2:  
Type and Severity of Hearing  
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Final

## Contact Information

### Comments:

Please use this section to enter any comments and/or caveats about the reported data (2,500 character limit).

During 2016, Mississippi collected severity of hearing loss using the DSHPSHWA classification rather than the ASHA classification system (which was not implemented).

### Check for Errors:

Please refer to the list below to check for outstanding errors in the survey. If there are any red fields, please navigate to the appropriate tab and fix the error before submitting.

Part 1: Screening Data

No errors

Part 1: Diagnostic Data

No errors

Part 1: Intervention Data

No errors

Part 2: Type and Severity of Hearing Losses

No errors

Part 3: Demographics

No errors

### Directions for Submitting the Survey:

Thank you for completing the survey.

Please save this file and name it using the following format: "2016 EHDH HSFS\_State/Territory Name.xlsx"

To submit the survey to CDC, send the completed Excel file as an attachment to [SAlam1@cdc.gov](mailto:SAlam1@cdc.gov) and [KSubbiah@cdc.gov](mailto:KSubbiah@cdc.gov) with the subject line "CDC EHDH HSFS 2016 – State/Territory Name."

Substitute your state or territory name for "State/Territory Name" for the Excel attachment and email subject line.

### Printing Instructions:

In Microsoft Office 2017, select "File," "Export," and then "Create PDF/XPS Document." Once the Publish dialog appears, press the "Options..." button and select the option to publish the "Entire Workbook." Close the "Options" dialog, and choose a location to save the pdf file. Microsoft Office 2007, 2010 and 2013 have similar capabilities. If you do not have access to these programs, you can select from a variety of free or paid programs that allow you to create PDF documents from Excel files.