

To the Parents of ______

Please follow these instructions carefully

Title of Test: Newborn Hearing Screening

Location: 33 Research Way East Setauket

Appointment Date and Time: _____

Your baby is scheduled to have a two-part newborn hearing screening. The first test is called an Otoacoustic Emission, which assesses the hearing of the inner ear. The second test is an Auditory Brainstem Response, screening which assesses the response of the hearing nerve. Your baby may require one or both tests.

Your appointment will take 15-45 minutes. Your baby must sleep for a minimum of 15-40 minutes for the tests to be completed. Bring a bottle and/or pacifier. Wake your baby early and do not allow him/her to sleep in the car. The tests will not cause your baby any discomfort.

If your baby does not pass either of the tests, he/she will be scheduled for a full hearing evaluation on another day.

Please arrive at the Registration office (room 106 in the front of the building) at the time of your appointment. They will direct you to the Speech and Hearing Department. You must be on time for your appointment in order for us to complete the screening.

In order for us to provide consistent quality services to our patients, no more than 3 no show or same day cancellations are allowed if individuals wish to continue to receive services at our Center.