

GEORGIA CODE
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*** Current through the 2009 Regular Session ***

TITLE 31. HEALTH
CHAPTER 1. GENERAL PROVISIONS; ACCESS TO EYE CARE
ARTICLE 1. GENERAL PROVISIONS

O.C.G.A. § 31-1-3.2 (2009)

§ 31-1-3.2. Hearing screenings for newborns

(a) The General Assembly finds, determines, and declares:

(1) That hearing loss occurs in newborn infants more frequently than any other health condition for which newborn infant screening is required;

(2) That 80 percent of the language ability of a child is established by the time the child is 18 months of age and that hearing is vitally important to the healthy development of such language skills;

(3) That early detection of hearing loss in a child and early intervention and treatment has been demonstrated to be highly effective in facilitating a child's healthy development in a manner consistent with the child's age and cognitive ability;

(4) That children with hearing loss who do not receive such early intervention and treatment frequently require special educational services and that such services are publicly funded for the vast majority of children with hearing needs in the state;

(5) That appropriate testing and identification of newborn infants with hearing loss will facilitate early intervention and treatment and may therefore serve the public purposes of promoting the healthy development of children and reducing public expenditure;

(6) The American Academy of Pediatrics, the American Speech-Language-Hearing Association, the American Academy of Audiology, and the American Academy of Otolaryngology, Head and Neck Surgery have recently endorsed the implementation of universal newborn hearing screenings and recommended that such screenings be performed in all birthing hospitals and coordinated by state departments of public health; and

(7) That consumers should be entitled to know whether the hospital at which they choose to deliver their infant provides newborn hearing screening.

(b) As used in this Code section, the term "newborn infant" means an infant after delivery but before discharge from the hospital.

(c) For reasons specified in subsection (a) of this Code section, the General Assembly determines that it would be beneficial and in the best interests of the development of the children of the state that newborn infants' hearing be screened.

(d) Reserved.

(e) It is the intent of the General Assembly that, by July 1, 2002, newborn hearing screening be conducted on no fewer than 95 percent of all newborn infants born in hospitals in this state, using procedures established by rule and regulation of the Board of Community Health after review of any recommendations of the advisory committee on hearing in newborn infants, created in former subsection (d) of this Code section. Toward that end, on and after July 1, 2001, every licensed or certified hospital and physician shall educate the parents of newborn infants born in such hospitals of the importance of screening the hearing of newborn infants and follow-up care. Education shall not be considered a substitute for the hearing screening described in this subsection. Every licensed or permitted hospital shall report annually to the Department of Community Health concerning the following:

- (1) The number of newborn infants born in the hospital;
- (2) The number of newborn infants screened;
- (3) The number of newborn infants who passed the screening, if administered; and
- (4) The number of newborn infants who did not pass the screening, if administered.

(f) The advisory committee on hearing in newborn infants shall determine which hospitals or other health care providers in this state are ordering and administering newborn hearing screening to newborn infants on a voluntary basis and the number of newborn infants screened. The advisory committee on hearing in newborn infants shall report to the General Assembly and Governor by December 1, 2001, concerning the following:

- (1) The number of hospitals and other health care providers administering such voluntary screenings;
- (2) The number of newborn infants screened as compared to the total number of infants born in such hospitals and institutions;
- (3) The number of newborn infants who passed the screening, if administered; and
- (4) The number of newborn infants who did not pass the screening, if administered.

(g) Subject to available appropriations, the advisory committee on hearing in newborn infants shall make the report described in subsection (f) of this Code section available throughout the state and specifically available to physicians whose practice includes the practice of obstetrics or the care of newborn infants, to consumer groups, to managed care organizations, and to the

media.

(h) If the number of newborn infants screened does not equal or exceed 95 percent of all newborn infants born in hospitals in this state by July 1, 2002, or falls below 95 percent at any time thereafter, the advisory committee shall continue to work with hospitals and physicians to achieve that goal. The advisory committee shall advise and assist hospitals and physicians regarding the conditions and procedures under which a parent or guardian of a child may object to and thereby exempt the child from such screening for religious reasons. The advisory committee shall study and address those hospitals with a low volume of births, as determined by the Department of Community Health based upon recommendations by the advisory committee on hearing in newborn infants, which may arrange otherwise for newborn infant hearing screening.

(i) A physician, registered professional nurse, including a certified nurse midwife, or other health professional attending a birth outside a hospital or institution shall provide information, as established by the department, to parents regarding places where the parents may have their infants' screening and the importance of such screening.

(j) The department shall encourage the cooperation of local health departments, health care clinics, school districts, health care providers, and any other appropriate resources to promote the screening of newborn infants' hearing and early identification and intervention for those determined to have hearing loss for those infants born outside a hospital or institution.

HISTORY: Code 1981, § 31-1-3.2, enacted by Ga. L. 1999, p. 266, § 1; Ga. L. 2009, p. 453, §§ 1-4, 1-5/HB 228.