

Helpful Hints for OAE Screening

Three keys to effective otoacoustic emissions (OAE) hearing screening are:

- Good probe fit,
- Reducing external noise in the environment, and
- Reducing internal noise



With these keys in mind, you can learn how to structure a screening environment and interact with children 0 – 3 years of age to make the experience good for children—and for screeners! Although some children are difficult to screen, there are strategies that can be used to consistently increase the likelihood that children will cooperate. These include:

- Choosing and preparing the screening environment with care,
- Enlisting assistance from other adults, and
- Engaging the child in a playful and reassuring way.

As you already know if you have attempted to do OAE screening with young children, there is no single approach that will work with all of the children all of the time!

For that reason, good screeners are always expanding their repertoire of screening skills. Listed below are a number of helpful hints for successful OAE screening.



The important thing is to be flexible, creative, and to find out what works for you and the children you serve!

1. Prepare the setting where you will be screening. Think about where you will put your equipment, other supplies, and toys to keep the child entertained during screening. If children will be sitting on a chair or held in someone's lap, you may need a small table nearby where you can place the equipment and other supplies.
2. When teachers or parents are present, ask about any concerns related to hearing or language development, whether the child has pressure equalization (PE) tubes or respiratory conditions, and be sure to note these. Children who have PE tubes can and should be screened (on some brands of equipment, a small adjustment is necessary). If a child has is being treated for an active ear infection, you will need to coordinate with the health care provider to determine when the ear is clear and ready to be screened.

3. Children may be the most relaxed if they are screened in a familiar environment. If you are screening in the classroom, you can select a corner of the room that is relatively quiet or you can choose to be surrounded by children who are playing calmly. Alternately, if you can't complete the screening in a room where other children are playing, try taking the child into an unfamiliar room. Screening can even be done outside if the noise level is low and weather is good.



4. Screening is often accomplished more easily with the assistance of another adult, so enlist the help of a teacher or parent who can cuddle, comfort and entertain the child. Children will typically have to be gently stopped from pulling the probe from the ear and their hands redirected toward an object, or hand, they can hold.
5. Establish a positive, soothing rapport using playful language and involve nearby adults in doing the same. Tell the children what you are going to do, rather than asking permission. A child's response to the question, "Can I put this in your ear?" is often "No!" Instead, make it fun by telling the child you are going to play a listening game, using phrases such as "See if you can hear the bird!" Avoid saying anything like "it won't hurt." That will automatically make children think there is something to be afraid of. It's best to keep the experience positive and playful.
6. If you are screening where other children are present, start with children who are most likely to be cooperative. You may need to ask teachers which child to start with. Allow children who are reluctant the chance to watch other compliant children being screened. Make it a fun "listening game" as the children "take turns" being screened. Never introduce the activity by telling children you are going to "test" their hearing!

7. Use quiet, interesting toys that children do not see on a regular basis to capture their attention.
8. Redirect a child's attention away from the ear and toward another physical sensation by stroking the child's forehead or arm, or by letting them play with a ball of sticky masking tape, or a vibrating toy.



9. Prepare children in advance by watching the playful sing-along video available at www.KidsHearing.org/ListenUpSong. Children can be viewing this or another engaging video, with the volume turned down low, while being screened.
10. Allow the child to become familiar with the probe by handling it and placing it in the ear of a doll. Encourage the child to engage his or her imagination by saying, "Let the dolly listen to the iPod" or "Let the dolly hear the music."
11. Offer the child a meaningful reward after a completed screening such as stickers, a snack, an opportunity to play with a toy or to go outside.
12. Try a different size probe tip cover.
13. Have another screener attempt to do the screening.
14. Screen during naptime, if possible, or consider arranging a way to screen a child who arrives asleep in a car seat.
15. If a child is soothed by a pacifier, you can attempt to screen without removing it from the child's mouth. If the result is a "refer," however, you will want to try the screening again when the child is not sucking because that movement introduces "noise" into the screening process. The same is true for a child who is having a snack, being breast fed or fed with a bottle etc.
16. For a child who is extremely fearful, you may want to introduce the equipment and probe without making any attempt to conduct the screening. Simply allow the child to handle the probe and equipment for a day or two to help them to feel more comfortable with it. Suggest that the child can have a turn on another day. Set up the screening as a reward.



Keep in mind that if a child appears to be pulling on an ear in discomfort, or reacting to an adult touching the ear, this may be a sign of an ear infection. A direct referral to a health care provider may be in order. If you are still not able to complete the screening after trying the strategies above, refer the child to an audiologist for the screening to be completed.