

EHDDI Web Application Guide

This guide describes how to use the EHDDI web application for reporting diagnostic information to the Department of Health.



Early Hearing-loss Detection Diagnosis & Intervention Program

Better Communication with Early Detection (206) 418-5613 · (888) WAEHDDI

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For persons with disabilities, this document is available on request in other formats. To submit a request please call 1-800-525-0127 (TDD/TTY 711)

Using the EHDDI Web Application

Log-in Banner for Confidential Internet Applications

When you login, you will first see a banner that is required by the Department of Health for confidential web applications.

Attention		
You must be explicitly authorized by the Department of Health to access and use this system. If so authorized you may access, use and disclose only the information permitted by law. Unauthorized attempts and actions to access or use this system are prohibited by state and federal law and may result in disciplinary action, civil, and/or criminal penalties. By accessing this system you are consenting to the recording and monitoring of your activities.	•	~
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1) Select OK.

Homepage

After you select OK, you will be taken to the Audiologists Home/Patient Search page. From this page you can access and search for infants who have been referred to your clinic. The EHDDI program knows if an infant has been referred to your clinic through communications with the infant's Primary Care Provider (PCP), the hospital hearing screening coordinator, your audiology clinic, or another audiology clinic. If you do not find an infant in our system for whom you want to enter diagnostic results, please contact the EHDDI program and we will 'push the baby through' to your clinic. You will then see the infant in the pending patients grid or be able to search for the infant.

The Homepage is divided into two sections. The top half is where you can search for infants and the bottom half is where you can view and access records of infants the EHDDI program has been told have been referred to your clinic.

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Searching for Infants

Search for infants referred to your clinic in the top portion of the homepage. Use an asterisk as a wild card character. Below are directions for an example search for a child with a mother's last name of Duck.

- 1) Type du* in the Mother's Last Name field.
- 2) Select Search.

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3) Patients who meet the search criteria will appear next to the patient search. Click Select next to the infant record you want to access.

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Using the Pending Patients Grid

The bottom portion of your homepage lists infants who have been referred to your clinic and the EHDDI program has identified as needing a diagnostic evaluation. These are infants who:

- Do not have a final diagnostic evaluation reported.
- Are indicated as being seen at your clinic and are not considered lost.
- Do not have a future diagnostic evaluation indicated in Referral section.

The grid contains the child's name, date of birth, gender, hospital of birth, and mother's first and last name. It also has the following information:

- Referral Status if there have been previous diagnostic evaluations entered for the infant
 - Not Entered no diagnostic evaluations have been entered for the infant
 - In Progress –diagnostic results have been entered for the infant
- Referral Date the date when the EHDDI program was informed that the infant was referred to your audiology clinic

You can sort the grid using the down caret character (v) next to the name of each column and filter the grid using the row just below the column headings. Click on 'Select' to go to the Physiologic Test/Hearing Loss Section for an infant. In the following example, you will be shown how to use the pending patients grid to find and go into the patient record of an infant whose mother's first name is 'Daisy.'

1) Type da in the open field just below the Mother's First Name column heading.

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3) Now only patients who meet this criterion will be seen in the pending patients grid. Click Select next to the infant record you want to access.

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Patient Record Sections

When you select an infant from the search or pending patients grid, you will be taken to the Physiologic Test Hearing Loss section of the patient's record.

Audologist Man Meru * EHDDIF: 19158264 Name: BABY GIRL DOH #: 20112500130 Case Status: Open Cancel • Screening Results Obe / 1: 01/19/2014 / 0845 Mom's Name: DUCK, DAISY Sex: Female Birth Order: Single Retry • Risk Factors Open Actions: No Notebook: Yes Diagnostic Eval: No Create Case • Physiologic Test / Hearing Loss Results Ealeant To Dag Order, Facility Tester Meaning Loss - R. * Hearing Loss - R. * * Hearing Loss - R. * * Hearing Loss - R. * * * * * * * * * * * * * * * * * *	Audiologists Home P	Patient Search Help	Contact EHDDI	Logoff		Screen	1 of 2 < Prev 1 2 Next >
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There are six different sections that you can access in an infant's record.

- Screening Results view the newborn hearing screening results that hospitals and clinics have reported to the EHDDI program
- Case Demographics view and edit infant and mother's information
- Risk Factors report risk factors for late onset hearing loss
- **Physiologic Test/Hearing Loss** report the results of diagnostic testing and whether or not a hearing loss was identified
- **Referrals** 1) report the infant as unknown, not showing to appointments, or not returning to your clinic, (2) make referrals to other audiology clinics, specialists, and the Part C program, and (3) indicate the date of the infant's next diagnostic evaluation.

• **El Services** – view Early Intervention (EI) services that the infant's Family Resource Coordinator reported on the infant's first Individual Family Service Plan (IFSP)

Physiologic Test/Hearing Loss Section

In the Physiologic Test/Hearing Loss Section you report the results of diagnostic testing and whether or not a hearing loss was identified.

When you select on a patient from the home page or from search, you'll first be directed to the Physiologic Test/Hearing Loss Section. You will see any previously reported evaluations and be

able to add a new evaluation by selecting Add Evaluation Results. Shown below is the diagnostic evaluation form where you report the results of the completed tests and whether or not a hearing loss was identified. A red asterisk indicates a mandatory field.

Audiologists Home	Patient Search Help Contact EHI	DDI Logoff Change I	Passwo	rd		Screen 1 of 2 < Pre	ev 1 2 Next >
Audiologist Main Menu 🔦	EHDDI#: 19158264	Name: BAB	Y GIR	L DOH #: 20112500130	Case Status:	Open	Cancel
 Screening Results 	DOB / T: 01/19/2014 / 0845	Mom's Name: DUC	K, DA	ISY Sex: Female	Birth Order:	Single	Retry
Case Demographics	RF Present: No	Open Actions: No		Notebook: No	Diagnostic Eval:	No	Create Case
Risk Factors						5	
Physiologic Test / Hearing Loss	* Date Of Evaluation	1					
Referrals	* Diagnostic Facility	AUDCL3					
EI Services		Children's Hospital and Region	al Med	lical Center			
		PO Box 5371, MS W-6640, Au	diolog	,			
		Seattle WA 98105					
		Right Ear		Left Ear			
	Otoscopic Examination		•	Select One			
	Tympanometry	Select One		Select One			
		Select One	-	Select One			
		Select One	-				
	Behavioral Test	Select One	•	Select One			
		Right Ear		Left Ear			
		© Yes		© Yes			
	* Diagnosis Hearing Loss:			© No			
		O Undetermined		O Undetermined			
		*If Yes, Please Select Type	and I	Degree of Hearing Loss			
	Degree of Hearing Loss		-				
	Configuration		-				
	Type of Hearing Loss						
	Type of Heating Loss			· · · · · · · · · · · · · · · · · · ·			
	Comments			÷			
	and the second second						
	Final Report for this Child						
	Save Save	& Next Cance					

- 1) Enter the date of the evaluation.
- 2) Report the results for any tests performed.
- 3) Indicate whether a hearing loss was diagnosed. If you did not test an ear because you previously diagnosed that ear as having or not having a hearing loss and you do not suspect that diagnosis has changed, please enter the previous diagnosis for that ear.
 - Yes a hearing loss is present
 - No no hearing loss is present

- Undetermined you were unable to determine if a hearing loss was present
- 4) If a hearing loss was diagnosed, report the degree and type of hearing loss.
- 5) If the infant was found to not have a hearing loss or was definitively diagnosed with a permanent hearing loss, check the 'Final Report for this Child' box. If an infant has a hearing loss, don't forget to report the type and degree of hearing loss to the best of your ability. If the infant has a conductive fluctuating hearing loss and you are confident the infant does not have a permanent hearing loss, indicate 'Conductive Fluctuating' as the type of hearing loss and check the 'Final Report for this Child' box.
- 6) Select Save

Audiologists Home P	atient Search Help Contact EHI	DDI Logoff Change Passwo	rd		Screen 1 of 2	< Prev 1 2 Next >
Audiologist Main Menu 💊	EHDDI#: 19158264	Name: BABY GIR	L DOH #: ;	20112500130	Case Status: Open	Cancel
 Screening Results 	DOB / T: 01/19/2014 / 0845	Mom's Name: DUCK, DA	AISY Sex: I	Female	Birth Order: Single	Retry
Case Demographics	RF Present: No	Open Actions: No	Notebook:	No	Diagnostic Eval: No	Create Case
Risk Factors						
 Physiologic Test / Hearing Loss 	* Date Of Evaluation	03/10/2014				
Referrals	* Diagnostic Facility	AUDCL3				
EI Services		Children's Hospital and Regional Med	lical Center			
		PO Box 5371, MS W-6640, Audiolog				
		Seattle WA 98105				
		-	Left Ear			
	Otoscopic Examination					
	Tympanometry	Normal	Normal	•		
	OAE	Normal	Abnormal			
	ABR	Normal	Abnormal	•		E
	Behavioral Test	Select One	Select One	•		
	1		Left Ear			
		O Yes	Yes			
	* Diagnosis Hearing Loss:		O No			
		O Undetermined	O Undetermined			
		*If Yes, Please Select Type and I	Degree of Hearing Loss			
	Degree of Hearing Loss		Severe (71 - 90 dB)			
	Configuration			-		
	Type of Hearing Loss		Sensorineural	•		
	Comments			*		
	Final Report for this Child					
	Save Save	& Next Cancel				

The evaluation you entered will be shown in the Physiologic Test/Hearing Loss section. Click select next to the evaluation if you want to view the results that were entered.

Audiologists Home	Patient Search	Help	Contact EHDDI	Logoff	Change Password					Screen 1 of 2 <	Prev 1 2 Next >
Audiologist Main Menu 💊	EHDDI	#: 1915826	4	1	ame: BABY GIRL		DOH #: 2011250013	30	Case Status:	open	Cancel
 Screening Results 	DOB /	T: 01/19/20	14 / 0845	Mom's N	ame: DUCK, DAISY		Sex: Female		Birth Order: S		Retry
Case Demographics	RF Preser	nt: No		Open Ac	tions: Yes		Notebook: No		Diagnostic Eval:	es	Create Case
Risk Factors											
 Physiologic Test / Hearing Loss 	Physiologic	Test/Heari	ng Loss Resul	ts							
• Referrals		Evaluation (Date 🗵 Diagnostic	: Facility			Tester 🛛	Hearing Loss -	R 🖉 Hearing Loss - L		
EI Services	Select	03/10/2013	3 Children's	en's Hospital and Regional Medical Center			Susan Norton	No	Yes		
	Add Evalu	uation Result	IS								
										NEC	Powered By

Referral Section

In the Referral Section, you can (1) report the infant as unknown, not showing to appointments, or not returning to your clinic, (2) make referrals to other audiology clinics, specialists, and the Part C program, and (3) indicate the date of the infant's next diagnostic evaluation.

Reporting an Infant as Lost in Referrals Section

In the Referrals section, you can indicate that an infant is not being seen at your clinic. You can assign an infant to one of three types of lost categories. They are:

- No Show: The infant has no future appointments scheduled and the family has cancelled or has not been coming in for appointments.
- Not Seen at This Facility Unknown Patient: The family has never scheduled an appointment for the infant at your audiology clinic.
- Patient Not Returning: The infant had an inconclusive evaluation at your audiology clinic and the family has not scheduled or brought their infant in for a needed evaluation.

When you report that an infant falls into one of these lost categories, the EHDDI program will call the infant's Primary Care Provider (PCP) to determine why the infant is not receiving necessary audiology services and assist the PCP in making sure the infant does receive an evaluation.

1) In the Referrals section, click on Select next to the pending referral that indicates the infant was referred to your clinic.

Audiologists Home	Patient Search Help Contact EHDDI EHDDI#: 19179213			Logoff	Change Password				Screen 1	of 2 < Prev	1 2 Next >
Audiologist Main Menu 💊	EHDD	I#: 1917	9213	N	ame: BABY BOY	DOH #: 2	20112440345	C	Case Status: Open		Cancel
 Screening Results 	DOB /	/ T: 03/04	/2014 / 1025	Mom's N	ame: MOUSE, MIN	NIE Sex: I	Male		Birth Order: Single		Retry
Case Demographics	RF Prese	ant: No		Open Act	ions: No	Notebook:	No		Diagnostic Eval: No		Create Case
 Risk Factors 	KI FICS	ant. No		Open Act	1011 5. 110	Notebook.	NO		Eval: NO		
 Physiologic Test / Hearing Loss 	Referrals										
Referrals									-		
EI Services			ialist	_	Referral Date Facility			Comment	🔄 Entered By 🛛 🔛		
	Select	Aud	ologist	0	04/28/2014 Children's Ho	spital and Regional Medical Center	Pending		Karin Neidt		
	Add Ne	w Referral									
	Pending Ev	aluation	;								
		Specialist		5	Referral Date Facility		Status S				
					No c	data to display					
	Add Next E										
	Add Next E	valuation L	Jate								
											Powered By
										NEON	IETRICS

2) Click on the down carrot for the Referral Status field.

3) Choose the appropriate status for the infant. In this case, we will report the infant as not being a patient in our clinic.

Audiologists Home F	Patient Search	Help	Contact EHDC	I Logoff	Change Password				Screen 1 of 2	< Prev 1 2	2 Next >
Audiologist Main Menu 🧖	EHDD	I#: 19179	9213	N	ame: BABY BOY	DOH #	: 20112440345	Case Status:	Open		Cancel
Screening Results	DOB	/ T: 03/04	/2014 / 1025	Mom's N	ame: MOUSE, MINNIE	Sex	c: Male	Birth Order:	Single		Retry
Case Demographics	RF Pres	ante No		Open Act	None No	Notebook	er ble	Diagnostic Eval:	No	Crea	ate Case
Risk Factors	RF Pres	ent: No		Open Act	tions: NO	Notebook	C NO	Eval:	NO		
 Physiologic Test / Hearing Loss 	Edit Referra	al									
Referrals	Required Field	ds are in Re	d								
EI Services			Entered By karin	neidt							
		Re	ferral Date 4/2	8/2014		~					
		Re	ferral Type Rep	orted by Audiolo	gist	~					
		Refe	erral Status 🚺	Seen at This Fac	ility - Unknown Patient	~					
			Specialist								
		Fa	cility Name Per	ding							
				npleted							
				Show	tility - Unknown Patient						
				ent Not Returnin							
	Referred Du	a ta Diak Fi		celled	3						
	Kelerred Du	e to KISK F	actors only								
			Comments			Ţ.					
	Save Ca	ancel									
									Ne	омет	Powered By

4) Select Save

Audiologists Home	Patient Search Help Contact E	HDDI Logoff Change Password		Screen 1 of 2 < Pre	v 1 2 Next >
Audiologist Main Menu 💊	EHDDI#: 19179213	Name: BABY BOY	DOH #: 20112440345	Case Status: Open	Cancel
Screening Results	DOB / T: 03/04/2014 / 102	5 Mom's Name: MOUSE, MINNIE	Sex: Male	Birth Order: Single	Retry
Case Demographics	RF Present: No	Open Actions: No	Notebook: No	Diagnostic Eval: No	Create Case
Risk Factors	RF Present. No	Open Actions. No	Notebook. No	Eval: NO	
 Physiologic Test / Hearing Loss 	Edit Referral				
Referrals	Required Fields are in Red				
EI Services	Entered By	Karin Neidt			
	Referral Date	4/28/2014	~		
	Referral Type	Reported by Audiologist	~		
	Referral Status	Not Seen at This Facility - Unknown Patient	×		
	Specialist	Audiologist			
	Facility Name				
	Facility	AUDCL3			
		Children's Hospital and Regional Medical Center PO Box 5371, MS W-6640, Audiology Seattle, WA 98105			
	Referred Due to Risk Factors Only				
	Comments		*		
	Save Cancel				
				NEON	Powered By

Audiologists Home	Patient Search	Help Contact EHI	DDI Logoff Change Password		Screen 1
Audiologist Main Menu 🔦	EHDD	I#: 19179213	Name: BABY BOY	DOH #: 20112440345	Case Status: Open
Screening Results	DOB	/ T: 03/04/2014 / 1025	Mom's Name: MOUSE, MINNIE	Sex: Male	Birth Order: Single
Case Demographics	RF Prese		Open Actions: No	Notebook: No	Diagnostic Eval: No
Risk Factors	RF Prese	ent: No	Open Actions: No	NOTEDOOK: NO	Eval: NO
Physiologic Test / Hearing Loss	Referrals				
eferrals					
EI Services		Specialist	Referral Date Facility	🖾 Status 🔛	Comment 🦉 Entered By 🖉
	Select	Audiologist	04/28/2014 Children's Hospital	and Regional Medical Center Not Seen at This Facility - Unknown Patient	karin neidt
	Add Ne	w Referral		Î	
	Pending Ev	aluations			
		Specialist	Referral Date Facility	Status	🖉 Next Eval 🛛 Entered By 🖉
			No data tr	o display	
	Add Next E	valuation Date			

You will see that the referral status for the infant changed from 'Pending' to 'Not Seen at This Facility- Unknown Patient'. This change creates an action for EHDDI staff to contact the infant's PCP and the infant will no longer appear in your pending patients grid on your homepage. You will still be able to search for the infant, however.

Entering Pending Evaluation in Referral Section

In the Referrals section, you can indicate the date of the infant's next diagnostic evaluation. If you enter this date, the infant will not be listed in your pending patients grid on the homepage and the EHDDI program will not contact your clinic for results on this infant until after the date of the reported pending diagnostic evaluation.

- 1) Go to the Referrals section in the infant's record
- 2) Select Add Next Evaluation Date

Audiologists Home P	atient Search Help Contact	EHDDI Logoff Change Password		Screen 1 o	of 2
Audiologist Main Menu 💊	EHDDI#: 19158264	Name: BABY GIRL	DOH #: 20112500130	Case Status: Closed	
 Screening Results 	DOB / T: 01/19/2014 / 0	845 Mom's Name: DUCK, DAISY	Sex: Female	Birth Order: Single	
Case Demographics	RF Present: No	Open Actions: No	Notebook: No	Diagnostic Eval: No	
Risk Factors					
 Physiologic Test / Hearing Loss 	Referrals				
Referrals	Specialist	Referral Date Facility	🖾 Status 🛛 🖾 Comme	ent 🖾 Entered By 🖾	
EI Services	Select Audiologist	03/05/2014 Children's Hospital and Regional	Medical Center Pending	Karin Neidt	
	Add New Referral				
	Pending Evaluations				
	Specialist	Referral Date Facility	🖾 Status 🖉 Ne	ext Eval 🛛 🛛 Entered By 🖉	
		No data to display			
	Add Next Evaluation Date				
				Ľ	N

- 3) Enter the date of the infant's next evaluation. If you do not know the exact date of the child's next evaluation (e.g. infant should have evaluation in 6 weeks), you can enter an estimated date and in the comments section write 'estimate'.
- 4) Select Save

Audiologists Home	Patient Search Help Cont	tact EHDDI Logoff Change Password		Screen 1 of 2 <	Prev 1 2 Next >
Audiologist Main Menu 🚳	EHDDI#: 19158264	Name: BABY GIRL	DOH #: 20112500130	Case Status: Closed	Cancel
 Screening Results 	DOB / T: 01/19/2014	/ 0845 Mom's Name: DUCK, DAIS	Y Sex: Female	Birth Order: Single	Retry
Case Demographics	RF Present: No	Open Actions: Yes	Notebook: No	Diagnostic Eval:	Create Case
Risk Factors					_
 Physiologic Test / Hearing Loss 	Enter Pending Evaluation				
Referrals	Entered By	karin neidt			
EI Services	* Referral Date	3/10/2014	~		
	Referral Status	Pending			
	* Specialist	Further evaluation (referred / kept in)	~		
	Facility	Children's Hospital and Regional Medical C	ente		
	* Date of Upcoming Evaluation	Children's Hospital and Regional Medical Cente PO Box 5371, MS W-6640, Audiology Seattle WA 98105 3/30/2014	r V		
	Comments				
	Save	Cancel			
				NEO	Powered By

Audiologists Home	Patient Search	Help	Contact EHDDI	Logoff	Change Pass	word						Screen	1 of 2 < P	rev 1 2 N
Audiologist Main Menu 🧖	EHDD	DI#: 1915	8264	N	ame: BABY G	SIRL	DOH #	: 20112	500130		Case	Status: Closed		Canc
Screening Results	DOB	/ T: 01/19	9/2014 / 0845	Mom's N	ame: DUCK,	DAISY	Sex	: Female	9			Order: Single		Retr
 Case Demographics 	RF Pres	ent: No		Open Ac	tions: Yes		Notebool	: No			Dia	gnostic Eval: Yes		Create
Risk Factors														
Physiologic Test / Hearing Loss	Referrals													
Referrals		Spe	cialist	2	Referral Date Facili	ty		Statu	s 🔊	Comment		Entered By	2	
EI Services	Select	Aud	liologist	(03/05/2014 Child	ren's Hospital and	Regional Medical Cent	er Pend	ing			Karin Neidt		
		Specialist	:	1	Referral Date	Facility			Status	S Next	Eval	🔄 Entered By 🖇		
					5 a.C. 10.1				-			57 AL 10 8		
	Select	Further e	valuation (referred / ke	pt in)	03/10/2014	Children's Hospit	al and Regional Medical	Center	Pending	03/3	/2014	karin neidt		
	Add Next E	valuation (Date											
													NEO	METRI

Referring Infants to Other Clinics or Specialists

If you know that an infant is going to be seen at another audiology clinic or by another specialist, please report the referral(s) in the Referrals section in an infant's record. If you refer an infant to another audiology clinic, the infant will then appear in that audiology clinic's pending patients grid. That clinic will then know that the infant was referred to their clinic and that they need to enter diagnostic results for the infant.

In the following example, let's say we are Seattle Children's Hospital Audiology and want to refer the infant to Mary Bridge Audiology

- 1) Go to the Referrals section in the infant's record
- 2) Select Add New Referral

	Patient Search	Help	Contact EHDDI	Logoff	Change Pass	word							S	creen 1
Audiologist Main Menu 🌤	EHDD	DI#: 1915	8264	Na	me: BABY G	IRL		DOH #: 2	01125	500130		Case	Status: Clo	sed
 Screening Results 	DOB	/ T: 01/19	/2014 / 0845	Mom's Na	me: DUCK,	DAISY		Sex: F	emale	9			h Order: Sin	
Case Demographics	RF Pres	ent: No		Open Acti	ons: No		No	tebook: N	No			Dia	Eval: Yes	5
Risk Factors														
 Physiologic Test / Hearing Loss 	Referrals													
Referrals		Spec	cialist	🖉 Re	ferral Date Facili	ty		2	Statu	s 🕅	Commen	t 🕅	Entered By	V
EI Services	Select	Audi	iologist	03	/05/2014 Child	ren's Hospital an	d Regional Medi	cal Center	Pendi	ing			Karin Neidt	
	Pending E	Specialist		P	Referral Date	Facility			V	Status	🕅 Nes	t Eval	🔄 Entered E	ay 🕫
	rending L	valuations												
				-	a second particular			-						
	Select	Further et	valuation (referred / kep	t in)	03/10/2014	Children's Hospit	tal and Regional	Medical Cent	er	Pending	03/	30/2014	karin nek	dt
	Add Next E	valuation D	Date											

Audiologists Home	Patient Search	Help	Contact EHDDI	Logoff	Change Password			Screen 1 of 2 < Pre	v 1 2 Next >
Audiologist Main Menu 🙆	EHDD	I#: 19158	264		Name: BABY GIRL	DOH #: 2	20112500130 Ca	se Status: Open	Cancel
 Screening Results 	DOB	/ T: 01/19/	2014 / 0845	Mom's	Name: DUCK, DAISY	Sex:		irth Order: Single	Retry
Case Demographics	RF Prese	ent: No		Open Ac	tions: Yes	Notebook:	No	Diagnostic Eval: Yes	Create Case
Risk Factors									
 Physiologic Test / Hearing Loss 	Enter Refer								
Referrals	Required Field		ntered By karin	neidt					
EI Services			erral Date 4/18						
		Ref	erral Type Repo	rted by Audiok	ogist				
		Refer	ral Status Pend	ing		~			
			Specialist			~			
		Faci	ility Name						
			Facility			•••			
	Referred Due	e to Risk Fa	ctors Only 📃						
		c	Comments			*			
	Save Ca	ancel				· · ·			
								NEON	Powered By

3) Choose Audiologist as from the dropdown menu for Specialist

Audiologists Home	Patient Search Help Contact E	HDDI Logoff Change Password		Screen 1 of 2 < Prev 1 2 Next >
Audiologist Main Menu 💊	EHDDI#: 19158264	Name: BABY GIRL	DOH #: 20112500130	Case Status: Open Cancel
 Screening Results 	DOB / T: 01/19/2014/ 084	Mom's Name: DUCK, DAISY	Sex: Female	Birth Order: Single Retry
Case Demographics	RF Present: No	Open Actions: Yes	Notebook: No	Diagnostic Eval: Yes Create Case
Risk Factors				
 Physiologic Test / Hearing Loss 	Enter Referral			
Referrals	Required Fields are in Red Entered By	ania poldt		
EI Services	Referral Date			
	Referral Type	Reported by Audiologist	~	
	Referral Status	Pending		
	Specialist			
	Facility Name	-	^	
	Facility	Discharge		
	Referred Due to Risk Factors Only	ENT Early Intervention Family Resources Coordinator (FRC)	E	
	Comments	Genetics	-	
	Save Cancel	Guide By Your Side	*	
				NEOMETRICS

- 4) Type the first few letters of the clinic's name in the Facility field. In this case, let's start with 'mar' for Mary Bridge.
- 5) Select on the ellipses (...)

Audiologists Home	Patient Search Help Contact	EHDDI Logoff Change Password		Screen 1 of 2 < Prev	1 2 Next >
Audiologist Main Menu 🙆	EHDDI#: 19158264	Name: BABY GIRL	DOH #: 20112500130	Case Status: Open	Cancel
 Screening Results 	DOB / T: 01/19/2014 / 08	45 Mom's Name: DUCK, DAISY	Sex: Female	Birth Order: Single	Retry
Case Demographics	RF Present: No	Open Actions: Yes	Notebook: No	Diagnostic Yes	Create Case
Risk Factors					
 Physiologic Test / Hearing Loss 	Enter Referral				
Referrals	Required Fields are in Red Entered By	karin neidt			
EI Services	Referral Date				
		Reported by Audiologist	✓		
	Referral Status	Pending			
	Specialist	Audiologist			
	Facility Name				
	Facility	mary			
	Referred Due to Risk Factors Only		_		
			*		
	Comments		~		
	Save Cancel				
					0
				NEOME	Powered By

- 6) Our library of audiology clinics will appear, filtered to audiology clinics that have names starting with what you entered in the Facility field. You can find other audiology clinics by editing what is entered in the row just below the column headings.
- 7) Click Select for the audiology clinic to which you want to refer.

Audiologists Home P	atient Search He	lp Contact E	HDDI Logo	ff Chan	ge Passw	ord							Scre	en 1 of 2 < Pr	ev 1 2 Next >
Audiologist Main Menu 🍝	Select Provider														Cancel
Screening Results Case Demographics	Drag a column	header here to gr	oup by that colum	าก											Retry Create Case
Risk Factors	Select	ID#	Туре	Facility	N 1	Name 🔛	Address	2	City 🛛	Pho	one S	Fax			
Physiologic Test /		4	P Audio Clinic	🕆 mary	8	Ŷ		Ŷ	5	7	9	?	Ŷ		
Hearing Loss Referrals	R	AUDCL6	Audio Clinic	Mary Bridg Speech and Hearing Se	5 E		1220 Division		Tacoma	(253	i3)403-4437	2536275	004		
	V (Type] E	quals 'Audio Clinic' A	nd [Facility] Is like										Clear		
	Cancel	Specialist Facility Name Facility	Audiologist	-		-	-							J	
	Referred Due to R	sk Factors Only Comments													
														NEO	Powered By

Audiologists Home	Patient Search	Help Contact	EHDDI Logo	ff Change Password		Screen 1 of 2 < Pr	ev 1 2 Next >
Audiologist Main Menu 🗖	EHDDI	#: 19158264		Name: BABY GIRL	DOH #: 20112500130	Case Status: Open	Cancel
 Screening Results 	DOB /	T: 01/19/2014 / 0	845 Mom	's Name: DUCK, DAISY	Sex: Female	Birth Order: Single	Retry
Case Demographics	RF Presen	nt: No	Open	Actions: Yes	Notebook: No	Diagnostic Yes Eval:	Create Case
Risk Factors							
 Physiologic Test / Hearing Loss 	Enter Referra						
 Referrals 	Required Fields		y karin neidt				
EI Services		Referral Dat	-				
		Referral Typ	e Reported by Aud	liologist	Image: A state of the state		
		Referral Statu					
		Specialis	t Audiologist				
		Facility Nam	e				
		Facilit	AUDCL6				
			Mary Bridge Sp 1220 Division Tacoma, WA 9	beech and Hearing Services 84031321			
	Referred Due t	to Risk Factors Onl	y 🗖				
		Comment	s		*		
	Save Can	cel					
						NEO	Powered By

8) Select Save.

Audiologists Home	Patient Search	Help Contact EHDDI	Logoff (Change Password				Screen
udiologist Main Menu 🚳		: 19158264		BABY GIRL		20112500130		Status: Closed
Screening Results	DOB / 1	r: 01/19/2014 / 0845	Mom's Name	DUCK, DAISY	Sex: F	emale		h Order: Single
Case Demographics	RF Presen	t: No	Open Actions	: No	Notebook:	No	Di	agnostic Eval: Yes
Risk Factors								
Physiologic Test / Hearing Loss	Referrals							
Referrals		Specialist	Refer	al Date Facility		Status 🕅	Comment 🛛	Entered By
EI Services	Select	Audiologist	04/18	2014 Mary Bridge Spe	ech and Hearing Services	Pending		karin neidt
	Select	Audiologist	03/05	/2014 Children's Hospit	al and Regional Medical Center	Pending		Karin Neidt
	Add New Pending Eval			Referral Date Facility		Status	Next Eval	Entered By
	Select	Specialist Further evaluation (referred / ke			lospital and Regional Medical Cent		03/30/2014	karin neidt
	Add Next Eva							

You can also report that you have referred an infant to other specialists. Audiology clinics, ENTs, Genetics clinics, and Primary Care Providers can be found in our library. For referrals to Neurologists and Early Intervention you can write the facility in the Facility Name field after you have indicated the specialist type in the Specialist field. For example, below are instructions for referring and infant to the Arc of Tri Cities (Early Intervention).

- 1) Go to the Referrals section in the infant's record.
- 2) Select Add New Referral.
- 3) Choose Early Intervention as from the dropdown menu for Specialist.

Audiologists Home	Patient Search	Help Contact	EHDDI Logoff	Change Password		Screen 1 of 2 < Pre	v 1 2 Next >
Audiologist Main Menu 🔦	EHDDI	(#: 19158264		Name: 'BABY GIRL	DOH #: 20112500130	Case Status: Closed	Cancel
 Screening Results 	DOB /	T: 01/19/2014 / 0	845 Mom's	Name: DUCK, DAISY	Sex: Female	Birth Order: Single	Retry
Case Demographics	RF Prese	nt: No	Open A	ctions: No	Notebook: No	Diagnostic Eval: Yes	Create Case
Risk Factors							
 Physiologic Test / Hearing Loss 	Enter Referr						
Referrals	Required Fields		y karin neidt				
EI Services		Referral Dat					
		Referral Typ	Reported by Audio	ogist			
		Referral Statu	s Pending				
		Specialis	t				
		Facility Nam	e				
		Facilit	Audiologist		1		
			Discharge		E		
	Referred Due	to Risk Factors Onl	ENT Early Intervention				
		Comment	Family Resources	Coordinator (FRC)			
			Genetics		-		
	Save Car	ncel					
							Powered By
						NEON	<i>IETRICS</i>

- 4) Write in the facility where the infant was referred.
- 5) Select Save.

Audiologists Home P	atient Search Help Contact E	HDDI Logoff Change Password		Screen 1 of 2 < P	rev 1 2 Next >
Audiologist Main Menu 💊	EHDDI#: 19158264	Name: 'BABY GIRL	DOH #: 20112500130	Case Status: Closed	Cancel
 Screening Results 	DOB / T: 01/19/2014 / 084	5 Mom's Name: DUCK, DAISY	Sex: Female	Birth Order: Single	Retry
Case Demographics	RF Present: No	Open Actions: No	Notebook: No	Diagnostic Eval: Yes	Create Case
Risk Factors					
 Physiologic Test / Hearing Loss 	Enter Referral				
Referrals	Required Fields are in Red Entered By	raria poldt			
EI Services	Referral Date				
		Reported by Audiologist			
	Referral Status				
	Specialist	Early Intervention	<u></u>		
	Facility Name	Arc of Tri Cities			
	Facility				
	Referred Due to Risk Factors Only				
	Comments		A		
	Save Cancel				
				NEO	Powered By METRICS

Audiologists Home	Patient Search	Help Contact EHDDI	Logoff Ch	ange Password						Screen :	l of
Audiologist Main Menu 💊	EHDD	I#: 19158264	Name:	BABY GIRL	DOH #: 2	01125001	30	G	ase Stati	us: Closed	
 Screening Results 	DOB /	T: 01/19/2014 / 0845	Mom's Name:	DUCK, DAISY	Sex: F	emale				er: Single	
Case Demographics	RF Prese	nt: No	Open Actions:	No	Notebook:	No			Diagnos Ev	tic _{Yes}	
 Risk Factors 											
• Physiologic Test / Hearing Loss	Referrals										
Referrals		Specialist	🖾 Referral	Date Facility		Status	🛛 🖸 0	omment	🖾 Enter	red By 🛛 🖾	
EI Services	Select	Audiologist	03/05/2	014 Children's Hospita	al and Regional Medical Center	Pending			Karin	Neidt	1
	Select	Audiologist	04/18/20)14 Mary Bridge Spee	ch and Hearing Services	Pending			karin	neidt	
	Select	Early Intervention	04/22/2	014		Pending			karin	neidt	
	Pending Ev	aluations	Ref	erral Date Facility		Status		Next Eva	R	Entered By 🔗	
	Select	Further evaluation (referred / k	ept in) 03/	10/2014 Children's H	ospital and Regional Medical Cent	ter Pendi	19	03/30/20	14	karin neidt	1
	Add Next Ev	valuation Date									

Referring Infants to the ESIT Program (Part C)

Audiologists can use the EHDDI system to refer infants with hearing loss to Washington's Part C Program, the Early Support for Infants and Toddlers (ESIT) program. The ESIT program provides services for infants and toddlers who have hearing loss (birth to three years of age). Family Resources Coordinators (FRC) in each county help families access services such as family training, counseling, and other early intervention services – including specialized help to meet the unique communication needs of infants and toddlers with hearing loss. Follow these instructions to refer an infant to the ESIT program.

Audiologists Home	Patient Search	Help Contact EHDDI	Logoff	Change Password				Screen	1 of	2 <	2 < Prev	2 < Prev 1	2 < Prev 1 2	2 < Prev 1 2 N	2 < Prev 1 2 N	2 < Prev 1 2 Ner
Audiologist Main Menu 💊		: 19158264		ame: BABY GIRL		20112500130		Case Status: Closed								Cancel
 Screening Results 	DOB / T	: 01/19/2014 / 0845	Mom's N	ame: DUCK, DAISY	Sex:	Female		Birth Order: Single								Retry
Case Demographics	RF Present	: No	Open Act	ions: No	Notebook:	No		Diagnostic Eval: Yes					Crea	Create	Create C	Create Ca
 Risk Factors 																
 Physiologic Test / Hearing Loss 	Referrals															
Referrals		Specialist		teferral Date Facility	5	Status	Comment	🖾 Entered By 🛛 🖗								
EI Services	Select	Audiologist	0	3/05/2014 Children's Hospital	and Regional Medical Center	Pending		Karin Neidt								
	Add New F	Referral														
	Pending Evalu	uations														
		Specialist	5	Referral Date Facility		Status	Next E	val 🛛 🖉 Entered By 🖉								
				No data to	o display											
	Add Next Eval	uation Date														
									ļ	NEG	NEON	NEOME				NEOMETRIC

1) In the Referrals Section, select Add New Referral.

2) In the Specialist field, choose Family Resources Coordinator (FRC) from the dropdown.

Audiologists Home	Patient Search Help Conta	ct EHDDI Logoff Change Password		Screen	1 of 2 < Prev 1 2 Next >
Audiologist Main Menu 🔦	EHDDI#: 19158264	Name: BABY GIRL	DOH #: 20112	2500130 Case Status: Closed	Cancel
 Screening Results 	DOB / T: 01/19/2014 /	0845 Mom's Name: DUCK, DAI	SY Sex: Fema		Retry
Case Demographics	RF Present: No	Open Actions: No	Notebook: No	Diagnostic Eval: Yes	Create Case
Risk Factors					
 Physiologic Test / Hearing Loss 	Enter Referral				
Referrals	Required Fields are in Red	By karin neidt			
EI Services		ate 4/8/2014	v		
		rpe Reported by Audiologist			
	Referral Sta				
			V		
	Specia		<		
	Facility Na				
	Faci	ity	•••		
	Referred Due to Risk Factors O	nly 📃			
	Comme	nts	Ĵ		
	Save Cancel				
					NEOMETRICS

Audiologists Home	Patient Search	Help	Contact EH	DDI Logoff	Change Password			Screen 1 of 2 < Pre	ev 1 2 Next >
Audiologist Main Menu 💊	EHD	DI#: 19158	8264		ame: BABY GIRL	DOH #: 2	0112500130 Ca	se Status: Closed	Cancel
Screening Results	DOB	/ T: 01/19	0/2014 / 0845	Mom's I	ame: DUCK, DAISY	Sex: F	onnaro	rth Order: Single	Retry
Case Demographics	RF Pres	ent: No		Open Ac	tions: No	Notebook: N	lo	Diagnostic Eval: Yes	Create Case
Risk Factors									
 Physiologic Test / Hearing Loss 	Enter Refe								
Referrals	Required Fiel		d Entered By ka	arin neidt					
EI Services			ferral Date			V			
				eported by Audiolo	gist				
			erral Status						
			Specialist						
		Fac	cility Name			<u>^</u>			
			Facility	Audiologist					
				Discharge		=			
	Referred Du	ie to Risk Fa	actors Only						
				arly Intervention amily Resources O	vordinator (EPC)				
				Senetics	ordinator (PRC)				
	Save C	ancel							
								NEOI	Powered By

- 3) Indicate the county/Lead FRC where the infant will receive Part C services. Type the first few letters of the county's name in the Facility field.
- 4) Click on the ellipses (...) to take you to the library. In this example we are choosing the Snohomish County Lead FRC.

Audiologists Home	Patient Search Help C	Contact EHDDI Logofi	Change Password			Screen 1 of 2 <	Prev 1 2 Next >
Audiologist Main Menu 🙆	EHDDI#: 19158264	4	Name: BABY GIRL	DOH #: 201125001	30 Case Status:	Closed	Cancel
 Screening Results 	DOB / T: 01/19/201	14 / 0845 Mom's	Name: DUCK, DAISY	Sex: Female	Birth Order:	-	Retry
Case Demographics	RF Present: No	Open	Actions: No	Notebook: No	Diagnostic Eval:	Yes	Create Case
 Risk Factors 							
 Physiologic Test / Hearing Loss 	Enter Referral						
Referrals	Required Fields are in Red	ered By karin neidt					
EI Services		al Date 4/8/2014		•			
		al Type Reported by Audi	logist				
	Referral	Status Pending		~			
	Sp	ecialist Family Resources	Coordinator (FRC)	\checkmark			
		y Name					
	1	Facility sno					
	Referred Due to Risk Facto	ors Only 📄					
	Con	nments		÷			
	Save Cancel						
						NEC	Powered By

5) Select the appropriate County Lead FRC

Audiologists Home	Patien	t Search Help	Contact E	HDDI	Log	off	Change I	Passi	word									Scre	en 1 of 2 <	Prev	1 2 Next >
Audiologist Main Menu 🔦	IF.	Select Provider																			Cancel
Screening Results		Drag a column h	eader here to gr	oup b	ov that colu	ımn															Retry Create Case
Case Demographics						_				-		-	-		-1	-	-				Create Case
Risk Factors		Select		Ту							Address	_		_	Phone		Fax				
 Physiologic Test / Hearing Loss 	E			2 L	ead FRC	Ÿ	SNO	Ÿ		Ÿ		Ÿ		8		Ÿ		Ÿ			
Referrals	Re	Select	FRC29	Le	ad FRC		Snohomish County Lead F	RC	Joan Flesher		3000 Rockefel MS 305	ler,	Everett		(425)388-7402	2					
• EI Services		🔽 💎 (Type) Equ	uals 'Lead FRC' And	d (Faci	ility] Is like	sno%	6 - C											Clear			
		Cancel																			
						_		_		_				_		_					
			Specialist	Fami	ily Resourc		oordinator (FR														
			Facility																		
	Ref	ferred Due to Risk	Factors Only																		
			Comments																		
	S	ave Cancel																			
																			NEC	ЭМС	Powered By

6) Enter in the infant's Primary Contact (mother, father, guardian, etc.) information. Provide as much information as possible. The fields in red are required in order for the referral to go through to the ESIT program.

Please note: you will need to get the parent or guardian's consent to make a referral to Part C through the EHDDI system. By checking the Parent Consent box, you are indicating to EHDDI that parent consent was obtained.

Fix for Duplicate Numbers: You may find that digits are duplicated when you try entering the Primary Contact's phone number and zip code (e.g. 77 when you type 7). This is a web browser compatibility issue. Please follow the instructions on page 27 to fix this problem.

7) Select Save.

Audiologists Home	Patient Search Help Contact	EHDDI Logoff Change Password		Screen 1 of 2	< Prev 1 2 Next >
Audiologist Main Menu 🚳	EHDDI#: 19158264	Name: BABY GIRL	DOH #: 20112500130	Case Status: Closed	Cancel
 Screening Results 	DOB / T: 01/19/2014 / 08	Mom's Name: DUCK, DAISY	Sex: Female	Birth Order: Single	Retry
Case Demographics	RF Present: No	Open Actions: No	Notebook: No	Diagnostic Yes Eval:	Create Case
Risk Factors					
Physiologic Test /	Enter Referral				
Hearing Loss	Required Fields are in Red				
 Referrals 	Entered By	karin neidt			
 EI Services 	Referral Date	4/8/2014	V		
	Referral Type	Reported by Audiologist	v		
	Referral Statu	Pending			
	Specialis	Family Resources Coordinator (FRC)	v		
	Facility Name				
	Facility	FRC29			
		Snohomish County Lead FRC	_		
		3000 Rockefeller, MS 305			
		Everett, WA			
	Referred Due to Risk Factors Only				
	Comment	5	^		
	Primary Contact Info				
	Required Fields are in Red				
	Last Name DUCK				
	First Name DAISY				
	Mailing Address 1234 Lily Pond	Dr.			
	City Disney		_		
	State WA				
	Zip Code 55555-5555		Primary Contact Infor	mation	
	Phone (555)-555-5555				
	EMail				
	Primary Language English				
	Relationship Mother				
	Parental Consent				
	Save Cancel		_		
	Concor				

Audiologists Home F	Patient Search Help	Contact EHDDI Logoff	Change Passwor	d			Screen 1	of 2 < Prev	1 2 Next >
Audiologist Main Menu 💊	EHDDI#: 191582		Name: BABY GIR		20112500130		Status: Closed		Cancel
 Screening Results 	DOB / T: 01/19/2	2014 / 0845 Mom's	Name: DUCK, DA	ISY Sex:	Female		h Order: Single		Retry
Case Demographics	RF Present: No	Open A	ctions: No	Notebook:	No	Dia	Eval: Yes		Create Case
 Risk Factors 								_	
 Physiologic Test / Hearing Loss 	Referrals								
Referrals	Special	list 🛛	Referral Date Facility	2	Status 🛛 🖾	Comment 🛛 🖾	Entered By		
EI Services	Select Family	Resources Coordinator (FRC)	04/08/2014 Snohomi	sh County Lead FRC	Pending		karin neidt		
	Select Audiok	ogist	04/08/2014 Children	s Hospital and Regional Medical Center	Pending		Karin Neidt	•	
	Add New Referral								
	Pending Evaluations								
	Specialist		Referral Date Fac	lity	Status	🖾 Next Eval	🔄 Entered By 🔛		
				No data to display					
	Add Next Evaluation Da	te							
								NEOM	ETRICS

The EHDDI system sends referrals to the ESIT system once every hour, so the referral should be received by the ESIT program within the hour. Once the referral is received by ESIT, the County Lead FRC will process the referral and contact the parent.

At this time, you will still need to send diagnostic results to the FRC separately. In the future, the EHDDI system will be able to send diagnostic results you enter along with the referral.

Early Intervention (EI) Services Section

After an infant has been referred to the ESIT Program, an FRC will work with the family and other partners to develop an Individual Family Service Plan (IFSP). This plan ensures that the child will receive the services necessary to reach his or her goals. The IFSP should be created within 45 days of a child's referral to ESIT. Once the IFSP has been completed, the FRC enters the IFSP information into the ESIT system. This information will then be sent to the EHDDI system. You can find what EI services were indicated in an infant's IFSP in the EI Services Section of the EHDDI system.

Audiologists Home	Patient Search	Help	Contact EHDDI	Logoff	Change Password				Screen 1 of 2 < Pre	v 1 2 Next
Audiologist Main Menu 💊		DI#: 191582			ame: BABY GIRL	D	OH #: 20112500130	Case Status:		Cancel
Screening Results	DOB	/ T: 01/19/2	2014 / 0845	Mom's I	ame: DUCK, DAISY		Sex: Female	Birth Order:	-	Retry
Case Demographics	RF Pres	ent: No		Open Ac	tions: No	Note	book: No	Diagnostic Eval:	Yes	Create Cas
Risk Factors										
Physiologic Test / Hearing Loss	EI Service	25								
Referrals	IFSP Date	N	Service Type		N	Start Date	Planned Start Date	8		_
EI Services	08/28/2013		Hearing Services			08/28/2013	08/28/2013		EI services indicated in the infant's IFSP	
									NEON	NETRIC

Screening Results Section

In this section you can view the newborn hearing screening results that hospitals and clinics have reported to the EHDDI program. Please do not add hearing screening results in this section.

1) Click select next to the hearing screening result if you wish to see more details about the hearing screen.

Audiologists Home	Patient Search H	lelp Conta	ct EHDDI	Logoff	Change Password					Screen 1 of 2	< Prev	1 2 1
Audiologist Main Menu 💊	EHDDI#:	19179213			Name: BABY BOY	DOH 4	*: 201124403	45	Case Status:	Open		Canc
Screening Results	DOB / T:	03/04/2014 /	1025	Mom's	Name: MOUSE, MINNI	E Se	k: Male		Birth Order:	Single		Retr
Case Demographics	RF Present:	No		Onon A	ctions: No	Noteboo	kt No		Diagnostic Eval:	No		Create
Risk Factors	Kr Fresent.	NO		Open A	cuons. No	Noteboo	k. 140		Eval:	NO		
 Physiologic Test / Hearing Loss 	Screening Resu	ilts										
Referrals		1	I see al		100							
EI Services		NBHS #	Screening	Method Re	sult		2	Screening Date	Status	8.		
	Select	20141188002	Repeat Screening	ABR Le	ft ear: Pass, Right ear: Refer for	further testing		03/16/2014	Refer			
	Select	20141188001	Initial Screening	TEOAE Le	ft ear: Refer for further testing, F	light ear: Refer for further tes	ting	03/05/2014	Refer			
	Add Screening	Result										
										Ne	EOM	ETRI

Screening Results Case Demographics Risk Factors Physiologic Test /		Name: BABY BOY Name: MOUSE, MINNIE ctions: No MOUSE 20141188002 Repeat Screening	DOH #: 20112440345 Sex: Male Notebook: No	Case Status: Open Birth Order: Single Diagnostic Eval: No
Case Demographics Risk Factors Physiologic Test / Hearing Loss Referrals	Present: No Open A te Hearing Screen Information EHDDI No Last Name NBHS # Screen Type Screen No.	ctions: No MOUSE 20141188002 Repeat Screening		
Risk Factors Physiologic Test / Hearing Loss Updat RF	te Hearing Screen Information EHDDI No Last Name NBHS # Screen Type Screen No.	MOUSE 20141188002 Repeat Screening	Notebook: No	Diagnostic Eval: No
Risk Factors Physiologic Test / Hearing Loss Referrals	te Hearing Screen Information EHDDI No Last Name NBHS # Screen Type Screen No.	MOUSE 20141188002 Repeat Screening		Eval: "
Referrals	EHDDI No Last Name NBHS # Screen Type Screen No.	20141188002 Repeat Screening		
	Last Name NBH S # Screen Type Screen No.	20141188002 Repeat Screening		
EI Services	Last Name NBH S # Screen Type Screen No.	20141188002 Repeat Screening		
	NBHS # Screen Type Screen No.	20141188002 Repeat Screening		
	Screen Type Screen No.	Repeat Screening		
	Screen No.			
		2		
		3/16/2014		
	Screening Method	ABR		
		Pass		
		Refer		
	Risk Factors	RF1 RF2 RF3 RF4 RF	5 None	
	Outpatient Provider			
	Screen Facility	H0001		
	Screener ID	KSN		
	Screening Refused			
	Edit Save and Exit	Cancel		

Case Demographics Section

In this section you can view the infant and mother's demographic information.

Audiologists Home P	Patient Search Help Contact I	EHDDI Logoff Change Password		Screen 1 of
Audiologist Main Menu 🔦	EHDDI#: 19179213	Name: BABY BOY	DOH #: 20112440345	Case Status: Open
Screening Results	DOB / T: 03/04/2014 / 102	Mom's Name: MOUSE, MINNIE	Sex: Male	Birth Order: Single
Case Demographics	DE Drosente No	Onen Artisper No.	Notobools No.	Diagnostic No
Risk Factors	RF Present: No	Open Actions: No	Notebook: No	Diagnostic Eval: No
hysiologic Test / learing Loss	Case Demographics			
Referrals				
Services	Baby's Information			
	Name	BABY BOY		
		03/04/2014 / 1025		
		3317		
		Male		
		Single 👻		
		678698		
			ative American 🗌 Other 📝 White	
		Not Hispanic		
		H0001		
	Dirti Hospital			
	Audiologist Med Rec ID			
	Mother's Information			
	Name	MOUSE , MINNIE		
	Age	, ,		
	Mailing Address			
	City			
	State			
	Zip Code			
	County			
	County			
	Edit Save	Cancel		
				Λ

Risk Factors Section

In this section you can report risk factors for late onset hearing loss.

	Patient Search Help Contact EHDDI Logoff Change Password	Screen 1 of 2 < Prev 1 2	2 Next
diologist Main Menu 🔦	EHDDI#: 19179213 Name: BABY BOY DOH #: 201	12440345 Case Status: Open Ca	ancel
Screening Results	DOB / T: 03/04/2014 / 1025 Mom's Name: MOUSE, MINNIE Sex: Male	Birth Order: Single	Retry
Case Demographics	RF Present: No Open Actions: No Notebook: No	Diagnostic No.	ate Case
Risk Factors	Ri Present, no open Actions, no notebook, no	Eval: No	
Physiologic Test / Hearing Loss	Instructions		
Referrals	Please use the columns on the right to document patient's risk factors. The default selection for all risk factor	rs is UNKNOWN.	
El Services	Please use the columns on the right to document patient's risk factors. The default selection for all risk factor Please check off risk factors that apply. Enter additional notes then click Next to submit and proceed to the n	next page.	
	Risk Factors		
	Save & Next >>		
	Please check all that apply	Check All No Check All Unknown	
	General History:	Yes No Unknown	
	Parental or caregiver concern regarding:		
	Hearing		
	Speech		
	Language Developmental Delay		
	Developmental Delay Other (Explain in Notes)		
	Family History:		
	Family history of permanent childhood hearing loss	0 0 •	
	Maternal History: In-utero infection:		
	Cytomegalovirus (CMV)		
	Rubella	0 0 0	
	Syphilis		
	Herpes	0 0 0	
	Toxoplasmosis		
	Other (Explain in Notes) Patient History:	0 0 0	
	Low Birth Weight: 1500 to 2500 grams	0 0 0	
	Very Low birth weight < 1500 grams	0 0 0	
	Ototoxic Drugs		
	Postnatal infection associated w/ sensorineural hearing loss such as sepsis or bacterial meningitis		
	Head Trauma Recurrent or persistent otitis media with effusion (OME) for at least 3 months		
	Neonatal Indicators:		
	Admission to NICU > 5 Days		
	APGAR Score (0-4@1 min or 0-6@5 min)		
	Hyperbilirubinemia requiring exchange transfusion		
	Mechanical ventilation > 5 days Condition at birth requiring the use of ECMO		
	Other (Explain in Notes)		
	Craniofacial anomalies:	:: :: ::	
	Abnormal Pinna		
	Abnormal Ear Canal Ear Tags		
	Ear Tags Malformed Eyes		
	Choanal Atresia		
	Craniostynosis		
	Hemifacial Microsomia	0 0 0	
	Ear Pits	0 0 0	
	Other (Explain in Notes)	0 0 0	
	Diagnosis of Syndrome or genetic condition associated with hearing loss:		
	Comments		
	×		
	U		

Tips for Using the System

• If you have forgotten your password for the EHDDI application, you can select 'Forgot Password.' This will take you through the steps to reset your password.

Help Logout	
Login Help	
User Nam	
Passwor	d
Forgot Password ?	Login

• "Audiologists Home" and "Patient Search" in the top toolbar will bring you to Homepage where you can search for patients and select pending patients from the grid.

Audiologists Home	Patient Search	Help	Contact EHDDI	Logoff	Change Password	Screen 1 of 2 < Prev 1 2 Net

• If you are in a patient record, use 'Cancel' or 'Retry' on the right to navigate back to the Homepage.

Audiologists Home F	atient Search	Help	Contact EHDDI	Logoff	Change Password		Screen 1 of 2 < Pr	ev 1 2 Next >
Audiologist Main Menu 🙆	EHDD	(#: 19179	213	Nan	e: BABY BOY	DOH #: 20112440345	Case Status: Open	Cancel
Screening Results	DOB /	T: 03/04	/2014 / 1025	Mom's Nan	e: MOUSE, MINNIE	Sex: Male	Birth Order: Single	Retry
Case Demographics	RF Present: No Open Actions: No		Open Actions: No		Notebook: No	Diagnostic Eval: No	Create Case	
 Risk Factors 			IS. NO	NOTEBOOK. NO	Eval: NO			

Memorize or write down the ID numbers of specialists to which you frequently refer. If you
just type the ID into the Facility field when making a referral, the EHDDI system will
automatically find the correct referral. For example, just type 'AUDCL6' after selecting
Audiologists as a specialist if you want to refer to Mary Bridge. Or just type 'FRC30' after
selecting Lead FRC as a specialist if you want to refer to Spokane County's Lead FRC.

Audiologists Home	Patient Search Help	Contact EHDD	I Logoff	Change Password			Screen 1 of 2	Prev	1 2 Next >
Audiologist Main Menu	EHDDI#: 191582			ame: BABY GIRL	DOH #:	20112500130 Ca	se Status: Closed		Cancel
 Screening Results 	DOB / T: 01/19/2	2014 / 0845	Mom's N	ame: DUCK, DAISY	Sex:		irth Order: Single		Retry
Case Demographics	RF Present: No		Open Act	ions: No	Notebook:	No	Diagnostic Eval: Yes		Create Case
Risk Factors									
 Physiologic Test / Hearing Loss 	Enter Referral								
Referrals	Required Fields are in Red	ntered By karin	naidt						
EI Services	Referral Date 4/8/2014								
	Referral Type Reported by Audiologist				~				
	Referral Status Pending								
	Specialist Family Resources Coordinator (FRC)				~				
	Facil	lity Name							
	Facility FRC30					—			
	Referred Due to Risk Fac	tors Only 📄							
	с	comments			۸ ۳				
	Save Cancel								
							N	EOM	Powered By

Fix for Duplicate Numbers in ESIT Referral

When making a referral to the ESIT program (Family Resources Coordinator), you may find that digits are duplicated when you try entering the Primary Contact's phone number and zip code (e.g. 77 when you type 7). This is a web browser compatibility issue. Please follow these instructions to fix this problem in Internet Explorer.

- 1) Open Internet Explorer 🧔
- 2) If you do not see a Menu bar at top with Tools listed, press the Alt key
- 3) Select Tools > Compatibility View Settings
- 4) Enter the following for the 'Add this website': wa.gov
- Select the Add button the website added will be listed under 'Websites you've added to Compatibility View'
- 6) Select the Close button at the bottom of the Compatibility View Settings window

Compatibility View Settings	
You can add and remove websites to be display Compatibility View.	red in
Add this website:	
wa.gov	Add
Websites you've added to Compatibility View:	
	Remove
	Compatibility View Settings
	You can add and remove websites to be displayed in Compatibility View.
	Add this website:
	Add
Include updated website lists from Microsoft	Websites you've added to Compatibility View:
Display intranet sites in Compatibility View	wa.gov Remove
Display all websites in Compatibility View	
	Include updated website lists from Microsoft Display intranet sites in Compatibility View
	Display invaries sites in Compatibility View
	Close