



Protecting Our Children's Health

Securely, Accurately, Confidentially

Quick Reference Guide To Vermont Public Health Patient Profile

The Vermont Public Health Patient Profile is a group of applications that provide access to screening and prevention data. Access is based upon permission levels. These are built upon the Vermont Department of Health Shared Public Health Information Exchange (SPHINX) database. Access is managed by the individual programs.

- *Vermont Early Hearing Detection and Intervention
- *Immunization Registry
- *Dried Blood Spot
- *Blood Lead
- *Developmental Screening

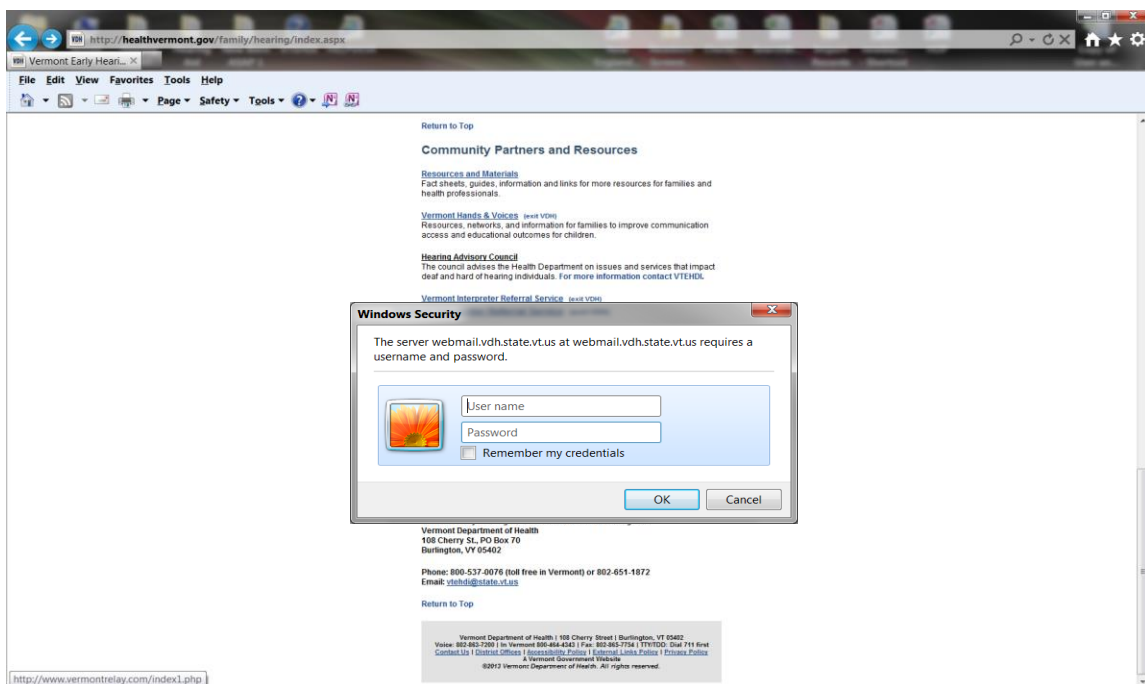
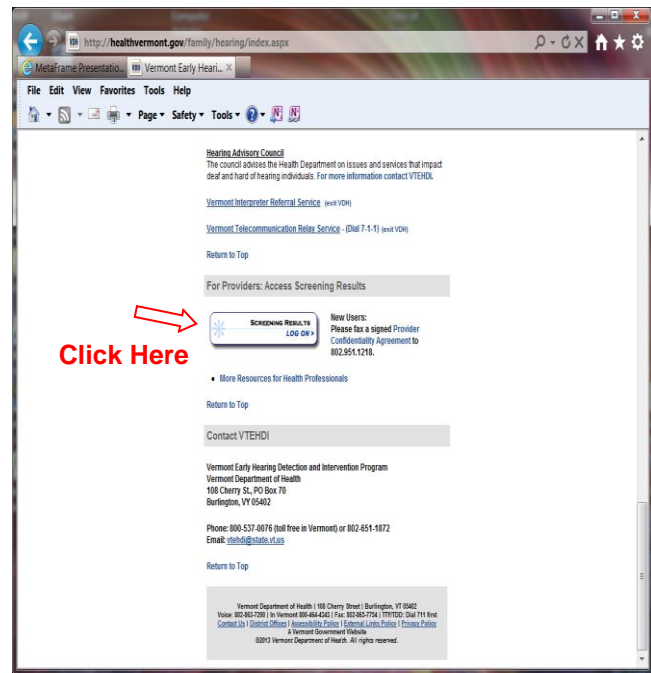
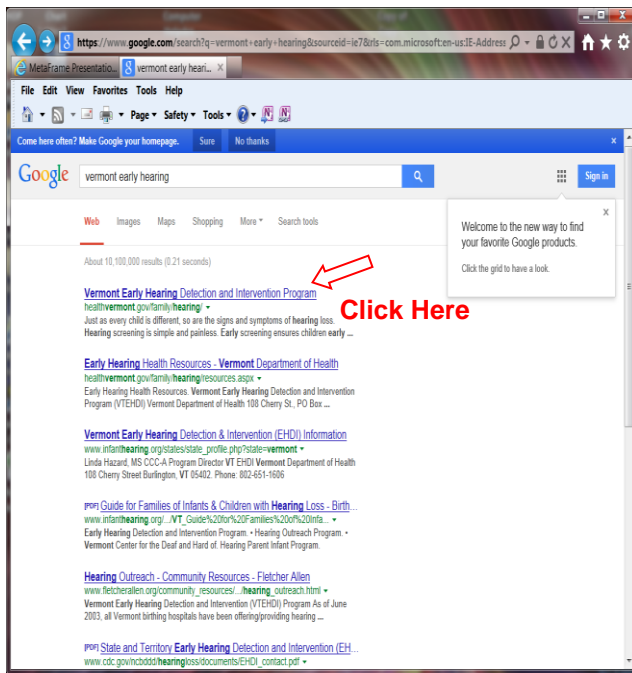


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LOGGING INTO THE PUBLIC HEALTH PATIENT PROFILE

- Open Microsoft Internet Explorer. (Google Chrome and Safari are not supported)
- Type <http://healthvermont.gov/family/hearing> in the address bar.
- OR type [Vermont Early Hearing Detection and Intervention](#) into the search bar.
- Select the option, [Vermont Early Hearing Detection and Intervention](#).
- Click the [Screening Results Log On](#) graphic to log into the registry.
- Enter your user name, password, and click [OK](#).



BASICS ON USING THE VERMONT PUBLIC HEALTH PATIENT PROFILE

STEP ONE: SEARCHING FOR A PATIENT

- Click [Search Patient](#).
- Enter the patient's last name, first name, and date of birth. (Use the Tab key or mouse to move between cells)
- Click [Find](#). A list of possible matches will be displayed.
- Click [Select](#) next to the correct patient name.

VERMONT DEPARTMENT OF HEALTH

Individual Profile

User: janet.fortune Practice: HOP Clinic-Burlington Patient: None Selected Logout

Search Patient

To find a record, please search for LAST NAME + FIRST NAME + DATE OF BIRTH. TIP: Please do not use "wild card searches, where you enter "J" or "J*" to find a record for "Jenkins" -- even if you have done so in the past. These searches make it easy to miss finding a record.

First Name: Date of Birth: 1/01/2001

Middle Name:

Last Name: DECEMBER

Identifiers:

	IMR Patient	Last Name	First Name	Middle Name	Date of Birth
Select		December	Molly		1/1/2001

1

New Search Find Add New Save Cancel

For questions, or help with this application, please contact imr@state.vt.us or call (888)688-4667

STEP TWO: VERIFY PATIENT INFORMATION

Verify Patient Information

- Please verify you have the correct patient by checking the patient name, date of birth, mother or guardian. We recommend all information be verified before moving on to the next steps.
- If this is not the correct patient then return to [Search Patient](#) and start from the beginning.

* Verifying Patient Information *

Patient Profile R6 (SPHINX-TEST / dbSphinx) - Windows Internet Explorer

VERMONT DEPARTMENT OF HEALTH
User: janet.fortune Practice: HOP Clinic-Burlington Patient: December, Molly Logout

Patient Information

Patient ID:
Preferred Name: **Verify**
*First Name: Molly **Verify**
Middle Name:
*Last Name: December **Verify**
Suffix:
Race:
 American Indian or Alaska Native
 Asian Indian
 Black or African American
 Chinese
 Filipino
 Guamanian or Chamorro
 Japanese
 Korean
 Native Hawaiian
 Other
 Other Asian
 Other Pacific Islander
 Samoan
 Unknown
 Vietnamese
 White

IMR Status: Inactive - Moved or Gone Elsewhere
*Date of Birth: 1/1/2001 **Verify**
*Gender: Female
*Residence: Burlington
 Out of State

Ethnicity:
Patient of Hispanic Origin? (Check the box that best describes whether patient is Spanish/Hispanic/Latino. Check the "No" box if patient is not Spanish/Hispanic/Latino.)
 No, not Spanish/Hispanic/Latina/Latino
 Unknown
 Yes
 Yes, Cuban
 Yes, Mexican, Mexican American, Chicana/Chicano
 Yes, other Spanish/Hispanic/Latina/Latino
 Yes, Puerto Rican

Person Contact Information

Address Loc.: Home
Address Type: Mailing Address
Confidentiality: Normal
*Street: A STREET
*City/Town: Burlington
*State: VT *Zip: 05401 +4:
*Country: UNITED STATES

Communication:

Method	Number / Address	Extension	Location	Confidentiality
--------	------------------	-----------	----------	-----------------

Parent/Guardian Information

Mother First Name: KELLY **Verify**
Mother Middle Name:
*Mother Last Name: DECEMBER
Mother Maiden Name: JANUARY
Guardian First Name: MICHAEL **Verify**
Guardian Middle Name:
*Guardian Last Name: DECEMBER
Father

New Search Find Add New Save Cancel

For questions, or help with this application, please contact imr@state.vt.us or call (888)688-4667

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ENTERING INTO THE HEARING APPLICATION

STEP ONE: ACCESSING HEARING INFORMATION

From the Patient Information screen, click the blue [Hearing](#) link on the left side of the screen.

- If it is grayed-out, or nothing happens when you click on it, that means that you may not have permission to view or edit this information.
- Contact the VTEHDI staff to request access.

Patient Profile R6 (SPHINX-TEST / dbSphinx) - Windows Internet Explorer

VERMONT DEPARTMENT OF HEALTH
 User: janet.fortune Practice: HOP Clinic-Burlington Patient: December, Molly Logout

Individual Profile

Actions:
 Search Patient
 Current Patient

Programs:
 Hearing

Patient Information

Patient ID:
 Preferred Name:
 *First Name: Molly
 Middle Name:
 *Last Name: December
 Suffix:
 Race:
 American Indian or Alaska Native
 Asian Indian
 Black or African American
 Chinese
 Filipino
 Guamanian or Chamorro
 Japanese
 Korean
 Native Hawaiian
 Other
 Other Asian
 Other Pacific Islander
 Samoan
 Unknown
 Vietnamese
 White

IMR Status: Inactive - Moved or Gone Elsewhere
 *Date of Birth: 1/1/2001
 *Gender: Female
 *Residence: Burlington
 Out of State

Ethnicity:
 Patient of Hispanic Origin? (Check the box that best describes whether patient is Spanish/Hispanic/Latino. Check the "No" box if patient is not Spanish/Hispanic/Latino.)
 No
 No, not Spanish/Hispanic/Latina/Latino
 Unknown
 Unknown
 Yes
 Yes, Cuban
 Yes, Mexican, Mexican American, Chicana/Chicano
 Yes, other Spanish/Hispanic/Latina/Latino
 Yes, Puerto Rican

Person Contact Information

Address Loc.: Home
 Address Type: Mailing Address
 Confidentiality: Normal
 *Street: A STREET
 *City/Town: Burlington
 *State: VT *Zip: 05401 +4:
 *Country: UNITED STATES

Communication:

Method	Number / Address	Extension	Location	Confidentiality

Parent/Guardian Information

Mother First Name: KELLY
 Mother Middle Name:
 *Mother Last Name: DECEMBER
 Mother Maiden Name: JANUARY
 Guardian First Name: MICHAEL
 Guardian Middle Name:
 *Guardian Last Name: DECEMBER
 Father

New Search Find Add New Save Cancel

For questions, or help with this application, please contact imr@state.vt.us or call (888)688-4667

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STEP TWO: VIEWING OR EDITING PATIENT PROFILE HIGH RISK INFORMATION

1. Note* the bolded font identifies which page you are viewing.
2. Most information found here is acquired from the Electronic Birth Record.
3. If you have a “view only” permission status all information should already be filled in with a “Yes”, “No” or “Unknown”.

*If you have an “Edit” status then you will need to answer the Risk Factors that are highlighted in Red with “Yes”, “No” or “Unknown”.

* High Risk Information *

Patient Profile R6 (SPHINX-TEST / dbSphinx) - Windows Internet Explorer

VERMONT DEPARTMENT OF HEALTH
 User: janet.fortune Practice: HOP Clinic-Burlington Patient: December, Molly Logout

Individual Profile

Patient Summary
 Patient: December, Molly Date of Birth: 1/1/2001 Patient Age: 12 years 9 months and 13 days
 Residence: Burlington Practice Name: Loom Practice

Birth Information
 Birth Information:
 Medical Record Number: 000112233 Type of Birthplace: Hospital Facility Name: Fletcher Allen Hea
 Estimate of Gestation: 40 Other Type of Birthplace: Other Facility Name: Multiple Birth Order: First

High Risk Information

<input type="checkbox"/> No	Family history of permanent hearing loss in childhood	Congenital Infections:
<input type="checkbox"/> No	Active congenital infections	<input type="checkbox"/> Toxoplasmosis
<input type="checkbox"/> No	Ear Pits/Tags	<input type="checkbox"/> Cytomegalovirus
<input type="checkbox"/> No	Syndrome associated with hearing loss	<input type="checkbox"/> Herpes Simplex Virus
<input type="checkbox"/> No	Ototoxic medications given to baby	<input type="checkbox"/> Rubella
<input type="checkbox"/> No	Was the child born with craniofacial abnormalities?	<input type="checkbox"/> Syphilis

Other Factors:

Infant living at the time of the report
 No Child admitted to a NICU for > 4 hours
 Infant transferred within 24 hours of delivery
 Facility Name

Initial Screening

Hearing Screening:
 Screening Type: Initial (medical) Sc Date: 1/3/2001 Place of Screening: Fletcher Allen Hea Screener Initials: me
 Right Ear Results: Pass Right Ear Technology: DPOAE Left Ear Results: Pass Left Ear Technology: DPOAE

No Screening Conducted:
 No Screen Reason: Transferred to: Date:

Follow Up Plan for ASAP:

Follow-Up Screening
 Enter New Follow Up Screening
 There are no Follow Up test results for this child.

Final Screening Results
 Final Screening Result / Outcome: Pass Bilaterally

Actions
 Save Cancel

For questions, or help with this application, please contact vtehdi@state.vt.us or call 1-800-537-0076

STEP THREE: VIEWING OR EDITING INITIAL HEARING SCREENING INFORMATION

Initial Hearing screening:

1. Provide the date, place, screener, results and technology used for the initial screening.

* Initial Hearing Screening Information *

Patient Profile R6 (SPHINX-TEST / dbSphinx) - Windows Internet Explorer

VERMONT DEPARTMENT OF HEALTH Individual Profile VERMONT DEPARTMENT OF HEALTH

User: janet.fortune Practice: HOP Clinic-Burlington Patient: December, Molly Logout

Actions:
[Search Patient](#)
[Current Patient](#)
[Immunization Information for Providers](#)
[Immunization Information for Families & the Public](#)

Programs:
[Hearing](#)

Hearing Actions
[Newborn Hearing Screening](#)
[Early Childhood Screening](#)
[Diagnosis](#)

Patient Summary
 Patient: December, Molly Date of Birth: 1/1/2001 Patient Age: 12 years 9 months and 13 days
 Residence: Burlington Practice Name: Loom Practice

Birth Information
 Birth Information:
 Medical Record Number: 000112233 Type of Birthplace: Hospital Facility Name: Fletcher Allen Hea
 Estimate of Gestation: 40 Other Type of Birthplace: Other Facility Name: Multiple Birth Order: First

High Risk Information
 No Family history of permanent hearing loss in childhood
 No Active congenital infections
 No Ear Pits/Tags
 No Syndrome associated with hearing loss
 No Otototoxic medications given to baby
 No Was the child born with craniofacial abnormalities?
Congenital Infections:
 Toxoplasmosis
 Cytomegalovirus
 Herpes Simplex Virus
 Rubella
 Syphilis

Other Factors:
 Infant living at the time of the report
 No Child admitted to a NICU for > 4 hours
 Infant transferred within 24 hours of delivery
 Facility Name

Initial Screening
Hearing Screening:
 Screening Type: Initial (medical) Sc Date: 1/3/2001 Place of Screening: Fletcher Allen Hea Screener Initials: me
 Right Ear Results: Pass Right Ear Technology: DPOAE Left Ear Results: Pass Left Ear Technology: DPOAE
 No Screening Conducted:
 No Screen Reason: Transferred to: Date:
 Follow Up Plan for ASAP:

Follow-Up Screening

 There are no Follow Up test results for this child.

Final Screening Results
 Final Screening Result / Outcome: Pass Bilaterally

Actions

For questions, or help with this application, please contact vtehdi@state.vt.us or call 1-800-537-0076

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1. No Screen Conducted:

When the initial screen field does not have data, the No Screen Conducted field provides information as to why an initial hearing screen may not have been conducted at or around the time of birth.

The reason for no screen conducted is found in the drop down menu.

If a patient has been transferred to another hospital please fill in the information "Transferred To" and "Date" that they were transferred.

Patient Profile R6 - Windows Internet Explorer

VERMONT DEPARTMENT OF HEALTH Individual Profile

User: janet.fortune Practice: HOP Clinic-Burlington Patient: December, Molly Logout

Actions:
 Search Patient
 Current Patient
 Immunization Information for Providers
 Immunization Information for Families & the Public

Programs:
 Hearing

Hearing Actions
 Newborn Hearing Screening
 Early Childhood Screening
 Diagnosis

Patient Summary
 Patient: December, Molly Date of Birth: 1/1/2001 Patient Age: 12 years 9 months and 13 days
 Residence: Burlington Practice Name: Loom Practice

Birth Information
 Birth Information:
 Medical Record Number: 000112233 Type of Birthplace: Hospital Facility Name: Fletcher Allen Hea
 Estimate of Gestation: 40 Other Type of Birthplace: Other Facility Name: Multiple Birth Order: First

High Risk Information
 No Family history of permanent hearing loss in childhood
 No Active congenital infections
 No Ear Pits/Tags
 No Syndrome associated with hearing loss
 No Ototoxic medications given to baby
 No Was the child born with craniofacial abnormalities?
 Other Factors:
 Infant living at the time of the report
 No Child admitted to a NICU for > 4 hours
 Infant transferred within 24 hours of delivery
 Facility Name

Congenital Infections:
 Toxoplasmosis
 Cytomegalovirus
 Herpes Simplex Virus
 Rubella
 Syphilis

Initial Screening
 Hearing Screening:
 Screening Type: Initial (medical) Sc Date: Place of Screening: Screener Initials:
 Right Ear Results: Right Ear Technology: Left Ear Results: Left Ear Technology:

No Screening Conducted:
 No Screen Reason: Transferred to: Date:
 Deceased
 Discharged without Screen
 Home Birth
 Parent Declined
 Transferred
 There are no Follow Up Test results for this child.

Follow-Up Screening
 Final Screening Results
 Final Screening Result / Outcome: Pass Bilaterally

Actions
 Save Cancel

For questions, or help with this application, please contact vtehdi@state.vt.us or call 1-800-537-0076

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2. Follow-Up Plan for ASAP:

This is a view only field and is managed by VTEHDI staff only. When a patient does not have or does not pass an initial hearing screening a recommendation is made and VTEHDI staff will follow-up with PCP and family.

Patient Profile R6 (SPHINX-TEST / dbSphinx) - Windows Internet Explorer

VERMONT DEPARTMENT OF HEALTH Individual Profile VERMONT DEPARTMENT OF HEALTH

User: janet.fortune Practice: HOP Clinic-Burlington Patient: December, Molly Logout

Actions:
 Search Patient
 Current Patient
 Immunization Information for Providers
 Immunization Information for Families & the Public

Programs:
 Hearing

Hearing Actions
 Newborn Hearing Screening
 Early Childhood Screening
 Diagnosis

Patient Summary
 Patient: December, Molly Date of Birth: 1/1/2001 Patient Age: 12 years 9 months and 13 days
 Residence: Burlington Practice Name: Loom Practice

Birth Information
 Birth Information:
 Medical Record Number: 000112233 Type of Birthplace: Hospital Facility Name: Fletcher Allen Hea
 Estimate of Gestation: 40 Other Type of Birthplace: Other Facility Name: Multiple Birth Order: First

High Risk Information
 Yes Family history of permanent hearing loss in childhood
 No Active congenital infections
 No Ear Pits/Tags
 No Syndrome associated with hearing loss
 No Ototoxic medications given to baby
 No Was the child born with craniofacial abnormalities?
 Other Factors:
 Infant living at the time of the report
 No Child admitted to a NICU for > 4 hours
 Infant transferred within 24 hours of delivery
 Facility Name

Initial Screening
 Hearing Screening:
 Screening Type: Initial (medical) Sc Date: Place of Screening: Screener Initials:
 Right Ear Results: Right Ear Technology: Left Ear Results: Left Ear Technology:
 No Screening Conducted:
 No Screen Reason: Transferred to: Date:
 Discharged without Screener

Follow Up Plan for ASAP:
 Enter New Follow Up S
 There are no Follow
 Audiology / ENT Appointment
 Midwife Appointment
 Outpatient Hospital Screening
 PCP Appointment

Final Screening Results
 Final Screening Result / Outcome:

Actions
 Save Cancel

For questions, or help with this application, please contact vtehdi@state.vt.us or call 1-800-537-0076

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3. Follow-Up Screening:

2. When a follow-up screening has occurred you will click on the “Enter New Follow-Up Screening” and an additional data entry box will populate. Enter information into the Follow-Up data fields. Provide the date, place, screener, results and technology used for the follow-up screening.

There can be multiple follow-up screening reports under this category until a final outcome has been determined.

Patient Profile R6 - Windows Internet Explorer

VERMONT DEPARTMENT OF HEALTH
Individual Profile
User: janet.fortune Practice: HOP Clinic-Burlington Patient: December, Molly Logout

Actions:
Search Patient
Current Patient
Immunization Information for Providers
Immunization Information for Families & the Public

Programs:
Hearing

Hearing Actions
Newborn Hearing Screening
Early Childhood Screening
Diagnosis

Patient Summary
Patient: December, Molly Date of Birth: 1/1/2001 Patient Age: 12 years 9 months and 13 days
Residence: Burlington Practice Name: Loom Practice

Birth Information
Birth Information:
Medical Record Number: 000112233 Type of Birthplace: Hospital Facility Name: Fletcher Allen Hea
Estimate of Gestation: 40 Other Type of Birthplace: Other Facility Name: Multiple Birth Order: First

High Risk Information
Yes Family history of permanent hearing loss in childhood
No Active congenital infections
No Ear Pits/Tags
No Syndrome associated with hearing loss
No Ototoxic medications given to baby
No Was the child born with craniofacial abnormalities?
Congenital Infections:
Toxoplasmosis
Cytomegalovirus
Herpes Simplex Virus
Rubella
Syphilis

Other Factors:
Infant living at the time of the report
No Child admitted to a NICU for > 4 hours
Infant transferred within 24 hours of delivery
Facility Name

Initial Screening
Hearing Screening:
Screening Type: Initial (medical) Sc Date: Place of Screening: Screener Initials:
Right Ear Results: Right Ear Technology: Left Ear Results: Left Ear Technology:
No Screening Conducted:
No Screen Reason: Transferred to: Date:
Discharged without Screener
Follow Up Plan for ASAP: Audiology / ENT Appointment

Follow-Up Screening
Enter New Follow Up Screening Cancel New Follow Up Screening
Hearing Screening:
Screening Type: Follow up screen Date: Place of Screening: Screener Initials:
Right Ear Results: Right Ear Technology: Left Ear Results: Left Ear Technology:
There are no Follow Up test results for this child.

Final Screening Results
Final Screening Result / Outcome:

Actions
Save Cancel

For questions, or help with this application, please contact vtehdi@state.vt.us or call 1-800-537-0076

4. Final Screening Result / Outcome:

This is a view only field and is managed by VTEHDI staff and will indicate when a Newborn Hearing screening record has been closed. Choices for this may vary. When finished entering a screening or follow-up screening click on the save button and the work you provided will be loaded.

*Please note you will have only 24 hours in which to edit any entry, after that the fields become locked and you will have to contact a VTEHDI staff member to modify any loaded test results.

Patient Profile R6 - Windows Internet Explorer

VERMONT DEPARTMENT OF HEALTH
Individual Profile
VERMONT DEPARTMENT OF HEALTH

User: janet.fortune Practice: HOP Clinic-Burlington Patient: December, Molly Logout

Actions:
Search Patient
Current Patient
Immunization Information for Providers
Immunization Information for Families & the Public

Programs:
Hearing

Hearing Actions
Newborn Hearing Screening
Early Childhood Screening
Diagnosis

Patient Summary
Patient: December, Molly Date of Birth: 1/1/2001 Patient Age: 12 years 9 months and 13 days
Residence: Burlington Practice Name: Loom Practice

Birth Information
Birth Information:
Medical Record Number: 000112233 Type of Birthplace: Hospital Facility Name: Fletcher Allen Hea
Estimate of Gestation: 40 Other Type of Birthplace: Other Facility Name: Multiple Birth Order: First

High Risk Information
Yes Family history of permanent hearing loss in childhood
No Active congenital infections
No Ear Pits/Tags
No Syndrome associated with hearing loss
No Ototoxic medications given to baby
No Was the child born with craniofacial abnormalities?
Other Factors:
Infant living at the time of the report
No Child admitted to a NICU for > 4 hours
Infant transferred within 24 hours of delivery
Facility Name

Initial Screening
Hearing Screening:
Screening Type: Initial (medical) Sc Date: Place of Screening: Screener Initials:
Right Ear Results: Right Ear Technology: Left Ear Results: Left Ear Technology:
No Screening Conducted:
No Screen Reason: Transferred to: Date:
Discharged without Screener
Follow Up Plan for ASAP: Audiology / ENT Appointment

Follow-Up Screening
Enter New Follow Up Screening Cancel New Follow Up Screening
Hearing Screening:
Screening Type: Follow up screen Date: Place of Screening: Screener Initials:
Right Ear Results: Right Ear Technology: Left Ear Results: Left Ear Technology:
There are no Follow Up test results for this child.

Final Screening Results
Final Screening Result / Outcome:
Save Cancel
Pass Bilaterally
Family Choice Not to Test
No Response from Family
Deceased
Relocated Out of State
Referred for Diagnostic Evaluation
Pass Bilaterally with Risk Factors
1-800-537-0076

STEP FOUR: RED FLAG

- When a “Red Flag” indicator appears it can mean one of two things.
 - The patient record is being flagged due to either not passing the newborn hearing screening or,
 - The patient’s record has been flagged with a high risk factor and will need continued annual follow-up.

Review the patient record to determine that a full recorded history of hearing screening is available with an outcome. Also determine which risk factors might have been identified at birth to indicate a need for annual screening.

Patient Profile R6 - Windows Internet Explorer

VERMONT DEPARTMENT OF HEALTH Individual Profile

User: janet.fortune Practice: HOP Clinic-Burlington Patient: December, Molly Logout

Actions:
 Search Patient
 Current Patient
 Immunization Information for Providers
 Immunization Information for Families & the Public

Programs:
 Hearing

Hearing Actions
 Newborn Hearing Screening
 Early Childhood Screening
 Diagnosis

Patient Summary
 Patient: December, Molly Date of Birth: 1/1/2001 Patient Age: 12 years 9 months and 13 days
 Residence: Burlington Practice Name: Loom Practice

Birth Information
 Birth Information:
 Medical Record Number: 00112233 Type of Birthplace: Hospital Facility Name: Fletcher Allen Hea
 Estimate of Gestation: 40 Other Type of Birthplace: Other Facility Name: Multiple Birth Order: First

High Risk Information
 Yes Family history of permanent hearing loss in childhood
 No Active congenital infections
 No Ear Pits/Tags
 No Syndrome associated with hearing loss
 No Ototoxic medications given to baby
 No Was the child born with craniofacial abnormalities?
Congenital Infections:
 Toxoplasmosis
 Cytomegalovirus
 Herpes Simplex Virus
 Rubella
 Syphilis

Other Factors:
 Infant living at the time of the report
 No Child admitted to a NICU for > 4 hours
 Infant transferred within 24 hours of delivery
 Facility Name

Initial Screening
Hearing Screening:
 Screening Type: Initial (medical) Sc Date: Place of Screening: Screener Initials:
 Right Ear Results: Right Ear Technology: Left Ear Results: Left Ear Technology:
 No Screening Conducted:
 No Screen Reason: Transferred to: Date:
 Discharged without Screener
 Follow Up Plan for ASAP: Audiology / ENT Appointment

Follow-Up Screening
 Enter New Follow Up Screening Cancel New Follow Up Screening
Hearing Screening:
 Screening Type: Follow up screen Date: Place of Screening: Screener Initials:
 Right Ear Results: Right Ear Technology: Left Ear Results: Left Ear Technology:
 There are no Follow Up test results for this child.

Final Screening Results
 Final Screening Result / Outcome:
 Save Cancel
 Pass Bilaterally
 Family Choice Not to Test
 No Response from Family
 Deceased
 Relocated Out of State
 Referred for Diagnostic Evaluation
 Pass Bilaterally with Risk Factors

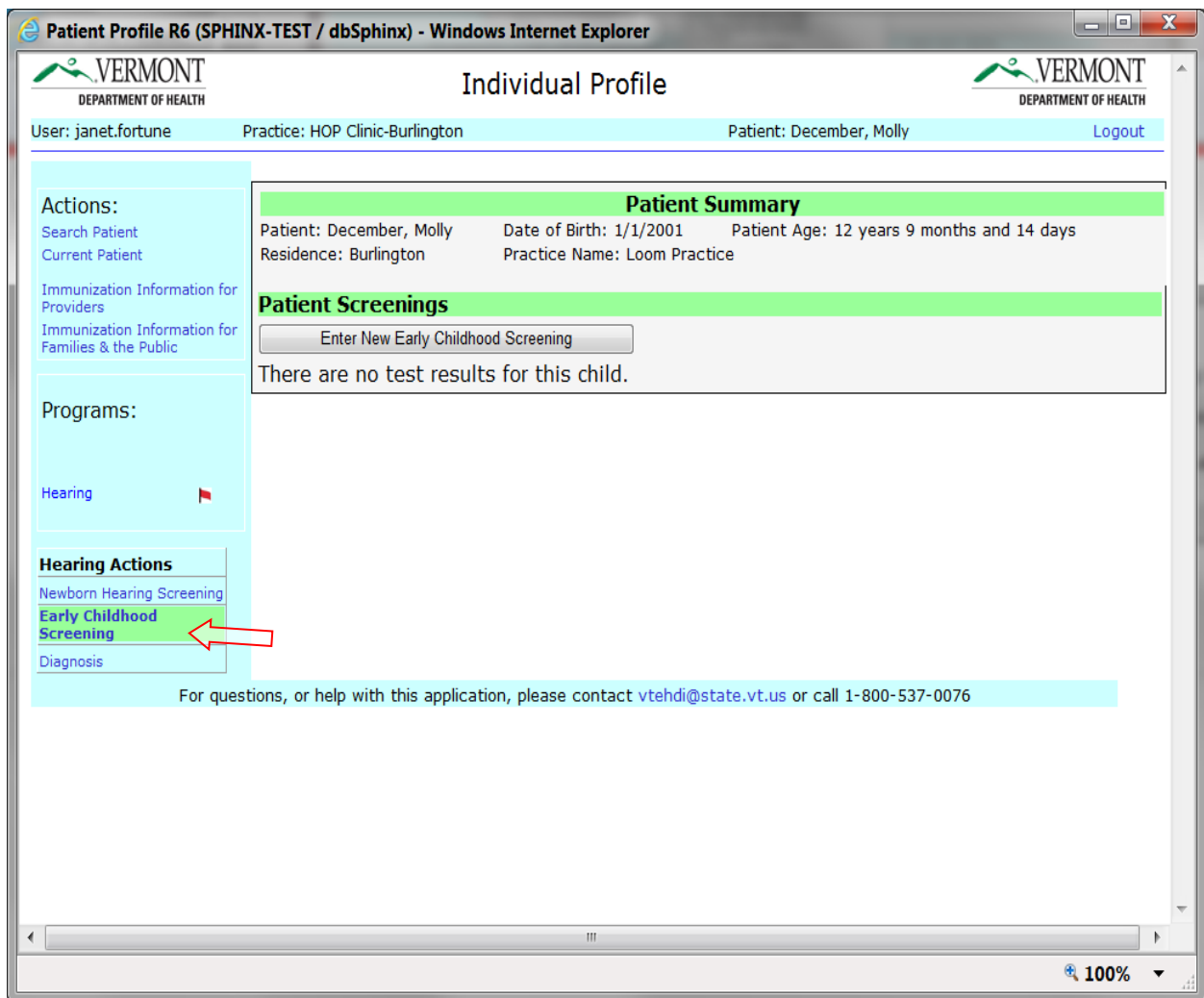
For questions, or help with this application, please call 1-800-537-0076

EARLY CHILDHOOD HEARING SCREENING

Hearing screening results can be entered in the Early Childhood Hearing Screening tab as early as 6 months of age through age 5. Please refer to the recommended hearing screening schedule located on page 18. The exception to this rule is if a patient does not have a Final Screening Result / Outcome from the Initial Newborn Hearing Screening section **and** are under 12 months of age then the system will not allow you to enter a Early Childhood Hearing Screening. Please contact VTEHDI staff for details.

STEP ONE: ACCESS EARLY CHILDHOOD HEARING SCREENING

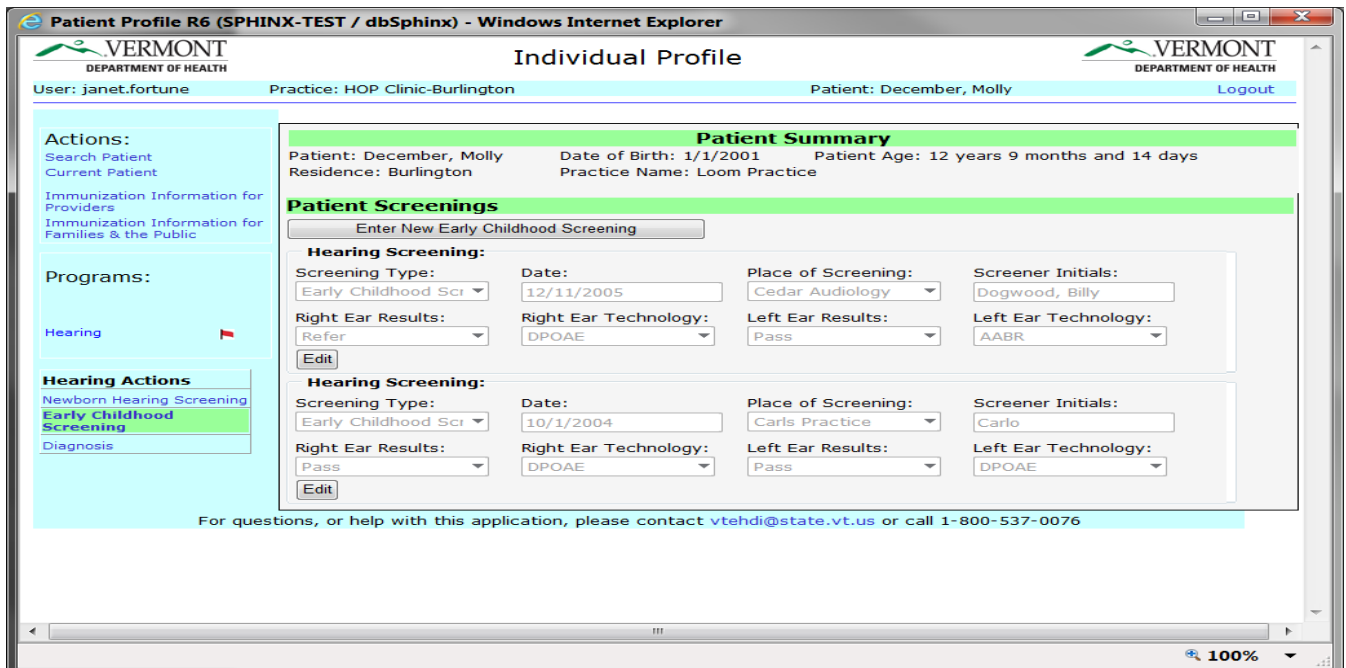
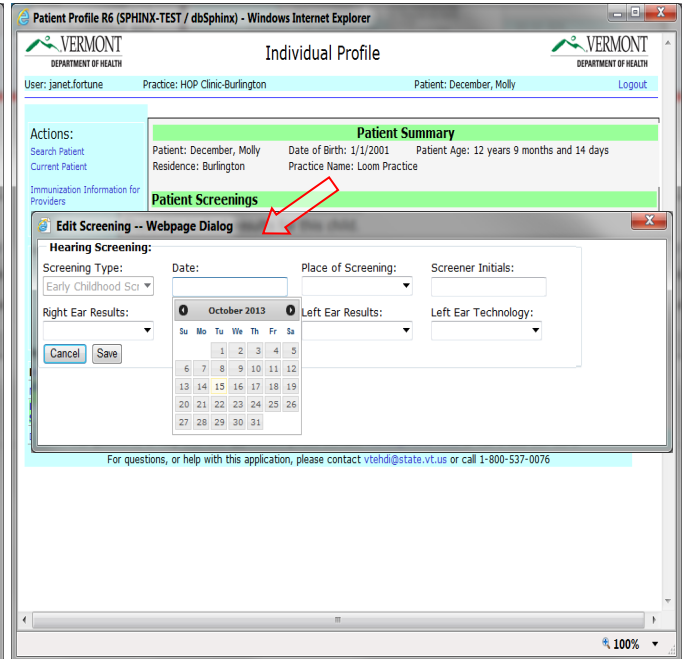
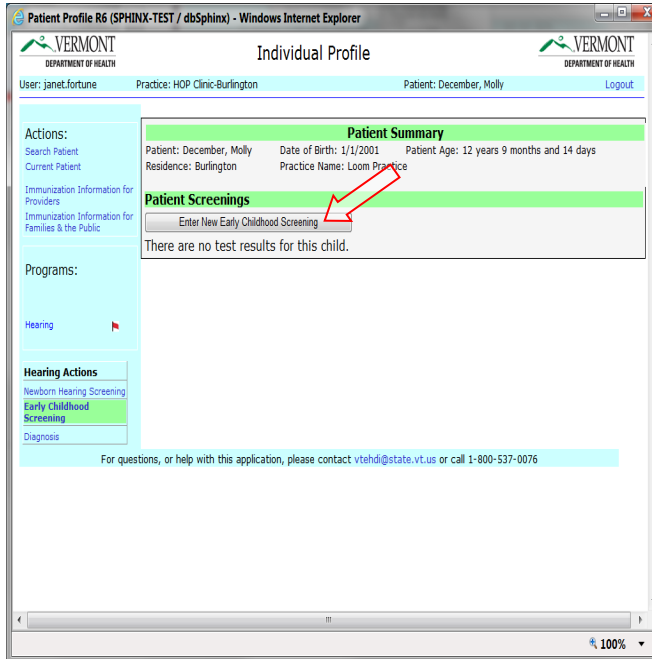
On the left side of the screen there is a link to the Early Childhood Hearing Screening. Click on that tab and it will direct you to the page for data entry.



STEP TWO: ENTERING EARLY CHILDHOOD HEARING SCREENING

Entering an Early Childhood Hearing Screen

1. Below patient screenings is a tab for Enter New Early Childhood Hearing Screening. Click on that tab.
2. A new window will pop up to add a new hearing screen.
3. Enter a new hearing screening and click on the save tab.
4. Multiple hearing screenings may be added over time to this record.



* Entering Childhood Hearing Screening *

DIAGNOSTIC HEARING TEST RESULTS

STEP ONE: ACCESSING DIAGNOSTIC HEARING TEST

Accessing Diagnostic Hearing Testing Results by clicking on the Diagnosis tab on the left side of the page.



STEP TWO: ENTERING DIAGNOSTIC TEST RESULTS

Entering a New Diagnosis

1. Click on the Enter New Diagnosis tab. You will see a data entry pop up box.
2. Enter all testing information into the drop down boxes.
3. Click on the save button to save and load your testing information.
4. Multiple diagnostic testing results can be listed here with the most recent test on top and in date order

*Please note you will have only 24 hours in which to edit any entry, after that the fields become locked and you will have to contact a VTEHDI staff member to modify any loaded test results.

The first screenshot shows the 'Patient Profile' page for Molly December. Under the 'Patient Diagnosis' section, the 'Enter New Diagnosis' button is highlighted with a red arrow. The second screenshot shows the 'Edit Diagnosis -- Webpage Dialog' box, where the 'Save' button is highlighted with a red arrow.

The screenshot displays the 'Patient Diagnosis' section with two entries. The top entry is dated 11/20/2007 and shows 'Normal hearing bilaterally' with 'Normal' results for both ears. The bottom entry is dated 10/16/2005 and shows 'Hearing Loss Undetermined Type' with 'Mild' results for both ears. Each entry includes fields for Date, Diagnostic Audiologist, Right and Left Ear Degree and Type, Results, and Date Enrolled in EI.



DEPARTMENT OF HEALTH

High risk factors for late on-set hearing loss

Recommended Hearing Screening Schedule

Birth thru 5 years

FOR PROVIDERS ONLY

* Recommended Hearing Screening Schedule *

RISK FACTOR	REPEAT HEARING SCREENING
Family history of permanent hearing loss from birth or starting in childhood; this does <i>not</i> include hearing loss due to old age, injury, noise exposure, or ear infections	6 months, 1 year, yearly
Infections in the mother during pregnancy or delivery (i.e. Toxoplasmosis, Syphilis, HIV, Hepatitis B, Rubella, Cytomegalovirus (CMV), Herpes simplex, and others)	6 months, 1 year, yearly
Problems of the head, face, ears, or neck (such as: cleft lip or palate; abnormal shaped head, neck, or ear)	3 months, 6 months, 1 year, yearly 1 year & yearly for ear pits or tags
Medications given to baby at birth (i.e. ampicillin, gentamicin, vancomycin, loop diuretics; lasix)	1 year (sooner follow-up may be recommended if medications were continued after hospital discharge); yearly
Syndromes that include hearing loss (i.e. Down Syndrome, Usher’s Syndrome, neurofibromatosis type 2, Waardenburg Syndrome, Alport Syndrome)	3 months, 6 months, 1 year, yearly
Neonatal Intensive Care Unit (NICU) admission > 4 hours	1 year, yearly
Prematurity (< 37 weeks gestation)	1 year, yearly
Jaundice (after therapy/treatment is complete; even if baby passed previously)	1 year, yearly
Parental concern of changes in hearing	Immediate

Questions:

Vermont Early Hearing Detection and Intervention program (VTEHDI)

1-800-537-0076 or VTEHDI@vermont.gov

Updated 7.2013

HOW DO I LOG OUT?

Click on [Logout](#) in the upper right corner of the screen.

WHAT IF I NEED MORE HELP?

Email the VTEHDI Team anytime at vtehdi@vermont.gov or call 1-800-537-0076 or for local calls 1-802-651-1872.

TROUBLESHOOTING:

If you have forgotten your password –

- Use Password Central for automatic password reset! Simply click on the link for directions, password reset, etc. <https://apps.health.vermont.gov/aims/PS/Default.aspx>

If you receive a message saying Internet Explorer v5.0 or higher is the only supported browser for the Vermont Immunization Registry –

- Open Internet Explorer or Firefox as your browser and try logging in again. Some computers have another browser, like Safari or Chrome, set up to open by default.

If you find more than one record for a patient --

- Please call VTEHDI at 1-800-537-0076 or for local calls 1-802-651-1872.
- Enter information into either record – VTEHDI will merge them together.

If you log in and you do not have access to data enter hearing screening information

- You may not have editing permissions.
- If you feel you should have editing permissions please contact VTEHDI at 1-800-537-0076 or for local calls 1-802-651-1872.

If you try to login but when you click OK with your username and password, the whole page disappears --

- You most likely have a pop-up blocker in place. Open Internet Explorer. Go to tools → pop-up blocker → pop-up blocker settings. Add our program address: <https://webmail.state.vt.us/imr3>
- Or, call VTEHDI toll free for help at 1-800-537-0076 or for local calls 1-802-651-1872.

If the window asking for your username and password keeps coming back even though you have double checked that you are entering it correctly --

- If a user name or password is entered incorrectly 3 times the account will lock up. You will not be allowed to login even if you enter the correct information. We recommend waiting for 15-20 minutes and then trying again with the correct password.
- If you are unsure of the correct password or it still does not work please Use Password Central for automatic password reset! Simply click on the link for directions, password reset, etc. <https://apps.health.vermont.gov/aims/PS/Default.aspx>