Hearing and vision
Baby's hearing and eyesight

Here are some stages of development that can help you identify if your baby is seeing correctly.

**Babies (birth to 12 months) can:**
- see from birth, but not clearly
- watch a speaker's eyes and mouth
- recognise the faces of special people in their lives
- follow noiseless moving objects with both eyes
- search for dropped objects in late infancy.

**Toddlers (1 to 2 years) can:**
- see objects in the distance such as signs or logos
- point to objects in a book
- match shapes and objects by colour and size
- pick out small detail in pictures.

**Preschoolers (3 to 5 years) can:**
- begin to colour in within the lines
- look at a book without tilting their head
- look at a book without holding it too close or too far away.

See your doctor or optometrist if you have any worries about your child's eyesight at any age. For advice on optometrists in your area, visit [www.optometry.org.au](http://www.optometry.org.au)
Newborn hearing screening

All babies born in a hospital have a hearing screen soon after birth. Newborn (neonatal) hearing screening is quick, free and results are available straight away. It’s best to have the screen as soon as possible after your baby is born. This screening can be done up to 6 months of age, although younger is better.

Check to see if your baby has had a screen, and what the result was:

Pass: Your baby showed a clear response to sound in both ears during the screening tests.

Refer: Your baby did not show a clear response to sound during the screening tests.

If your baby did not show a clear response, the Child and Family Health Service will contact you to arrange follow-up screening. This will occur separately to any other services you may or may not have consented to receive from the Child and Family Health Service.

If your baby has missed a hearing screening, contact the Universal Neonatal Hearing Screening program on 8303 1585 (Mon-Fri 8:00am - 4:30pm).

It’s very important to find out early if your baby has hearing problems. Early treatment is best for their speech and language development.
Follow-up hearing screening (if required)

Hearing loss diagnosis
Some children will be referred directly for further hearing assessment soon after birth if they have been diagnosed with a condition or infection known to be related to hearing problems. These include:

> craniofacial abnormalities
> syndromes known to be related to hearing loss e.g. cleft palate, hydrocephalus
> microtia or ear canal atresia
> viral or bacterial meningitis
> TORCH infections in baby (Toxoplasmosis, Syphilis, Rubella, Cytomegalovirus (CMV), Herpes Simplex).

Please contact the Universal Neonatal Hearing Screening Program if you believe your child has one of these conditions and has not already been referred for assessment.

Hearing risk factors identified
(recommended at 12 months)
Follow-up with the Hearing Assessment Service is recommended at 12 months of age if your child has any of the following risk factors, even if they have passed the neonatal hearing screening:

> a close relative (child’s parent, brother or sister or, child’s parents brothers or sisters or their children) has had a permanent hearing loss from birth
> a significant head injury
> any syndrome known to be related to persistent middle ear fluid, such as Down Syndrome
> admission to neonatal intensive care unit for more than 5 days
> assisted ventilation
> hyperbilirubinaemia requiring exchange transfusion (severe jaundice at birth)
> exposure to ototoxic medications (medications toxic to the ear of the newborn, eg Gentamicin, loop diuretics)
> parental concern about the child’s hearing.

For more information or to make an appointment, contact the Hearing Assessment Service on 8303 1530 8:00am - 4:30pm.