

Hearing Report

Date of Birth Range: Jan 1 2008 - Jan 31 2008

Report Criteria:

Determination

Status

Group By

Hospital

Diagnosis

Center

Report Format Current Status

Diagnosis Type

Report Type Summary

Date Printed: 3/27/2008

| Medical Rec. No: | Parent Name: | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|---------------------------------------|--------------|---------------------|------|------|--------------|--------------|------|-------------------------|----------|--------------|--------------|----------------------|
| <i>Subtotal:</i> | | <i>Patients: 6</i> | | | | 2 | 4 | 0 | 0 | 0 | 0 | |
| A BIRTH CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | | <i>Patients: 8</i> | | | | 2 | 1 | 0 | 0 | 0 | 5 | |
| A MOTHER'S NATURE HOME BIRTHS | | | | | | | | | | | | |
| <i>Subtotal:</i> | | <i>Patients: 2</i> | | | | 2 | 0 | 0 | 0 | 0 | 0 | |
| A WOMAN'S TOUCH IN HEALTH CARE | | | | | | | | | | | | |
| <i>Subtotal:</i> | | <i>Patients: 4</i> | | | | 1 | 0 | 0 | 0 | 0 | 3 | |
| ALL CHILDREN'S HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | | <i>Patients: 54</i> | | | | 1 | 17 | 4 | 0 | 0 | 32 | |
| ALL NATURAL BIRTH CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | | <i>Patients: 2</i> | | | | 1 | 1 | 0 | 0 | 0 | 0 | |
| ARNOLD PALMER HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | | <i>Patients: 3</i> | | | | 0 | 2 | 0 | 0 | 0 | 1 | |
| BABY LOVE BIRTH CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | | <i>Patients: 3</i> | | | | 0 | 0 | 0 | 0 | 0 | 3 | |

| Medical Rec. No: | Parent Name: | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|---|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| BAPTIST HOSP OF MIAMI | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>449</i> | | | | <i>0</i> | <i>431</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>17</i> | |
| BAPTIST HOSPITAL OF MIAMI-OUTREACH | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>2</i> | | | | <i>0</i> | <i>2</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| BAPTIST HOSPITAL PENSACOLA | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>98</i> | | | | <i>0</i> | <i>92</i> | <i>0</i> | <i>6</i> | <i>0</i> | <i>0</i> | |
| BAPTIST MED CTR - NASSAU | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>32</i> | | | | <i>0</i> | <i>31</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | |
| BAPTIST MED CTR OF JAX | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>220</i> | | | | <i>1</i> | <i>203</i> | <i>1</i> | <i>3</i> | <i>0</i> | <i>12</i> | |
| BAPTIST MEDICAL CTR SOUTH | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>103</i> | | | | <i>2</i> | <i>99</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>2</i> | |
| BAY MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>51</i> | | | | <i>0</i> | <i>49</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>1</i> | |
| BAYFRONT MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>269</i> | | | | <i>59</i> | <i>195</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>15</i> | |
| BAYFRONT MEDICAL CENTER LABORATORY | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>7</i> | | | | <i>2</i> | <i>4</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| BEACHES MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>104</i> | | | | <i>5</i> | <i>97</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>2</i> | |
| BERT-FISH MED CTR INC | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>1</i> | | | | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |

| Medical Rec. No: | Parent Name: | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| BETHESDA MEMORIAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>308</i> | | | | <i>0</i> | <i>289</i> | <i>10</i> | <i>3</i> | <i>0</i> | <i>6</i> | |
| BIRTH CENTER OF GAINESVILLE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>2</i> | | | | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| BIRTHING CTR. OF SOUTH FLORIDA | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>1</i> | | | | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| BOCA RATON COMM HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>136</i> | | | | <i>0</i> | <i>135</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| BRANDON REGIONAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>344</i> | | | | <i>15</i> | <i>311</i> | <i>8</i> | <i>1</i> | <i>0</i> | <i>9</i> | |
| BREATH OF LIFE BIRTH CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>2</i> | | | | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| BROWARD GENERAL MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>314</i> | | | | <i>3</i> | <i>299</i> | <i>4</i> | <i>2</i> | <i>0</i> | <i>6</i> | |
| CAPE CANAVERAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>68</i> | | | | <i>2</i> | <i>66</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| CAPE CORAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>122</i> | | | | <i>0</i> | <i>112</i> | <i>0</i> | <i>8</i> | <i>0</i> | <i>2</i> | |
| CAPITAL REG. MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>73</i> | | | | <i>6</i> | <i>64</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>3</i> | |
| CENTRAL FLA REG HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>70</i> | | | | <i>0</i> | <i>69</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | |

| Medical Rec. No: | Parent Name: | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|--------------------------------------|------------------|--------------|------|------|--------------|--------------|------|-------------------------|----------|--------------|--------------|----------------------|
| CITRUS MEMORIAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 53 | | | | 1 | 50 | 1 | 1 | 0 | 0 | |
| COMM HOSP OF NPR/BIRTHPLACE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 75 | | | | 0 | 75 | 0 | 0 | 0 | 0 | |
| CORAL SPRINGS MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 210 | | | | 1 | 206 | 0 | 1 | 1 | 1 | |
| DESOTO MEMORIAL HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 48 | | | | 8 | 35 | 1 | 4 | 0 | 0 | |
| FLAGLER HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 98 | | | | 0 | 96 | 2 | 0 | 0 | 0 | |
| FLORIDA HOSP CELEBRATION HLTH | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 72 | | | | 0 | 72 | 0 | 0 | 0 | 0 | |
| FLORIDA HOSPITAL - ALTAMONTE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 38 | | | | 0 | 36 | 1 | 1 | 0 | 0 | |
| FLORIDA HOSPITAL - DELAND | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 84 | | | | 2 | 80 | 1 | 0 | 0 | 1 | |
| FLORIDA HOSPITAL - KISSIMMEE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 1 | | | | 0 | 1 | 0 | 0 | 0 | 0 | |
| FLORIDA HOSPITAL - WATERMAN | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 89 | | | | 5 | 79 | 0 | 0 | 0 | 5 | |
| FLORIDA HOSPITAL HEARTLAND | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 94 | | | | 0 | 88 | 0 | 4 | 0 | 2 | |

| Medical Rec. No: | Parent Name: | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|-----------|--------------|--------------|----------------------|
| FLORIDA HOSPITAL ORLANDO - LAB | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>370</i> | | | | <i>0</i> | <i>358</i> | <i>0</i> | <i>6</i> | <i>0</i> | <i>6</i> | |
| FLORIDA HOSPITAL ORMOND | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>84</i> | | | | <i>2</i> | <i>77</i> | <i>0</i> | <i>3</i> | <i>0</i> | <i>2</i> | |
| FLORIDA HOSPITAL-ZEPHYRHILLS | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>46</i> | | | | <i>6</i> | <i>34</i> | <i>0</i> | <i>2</i> | <i>0</i> | <i>4</i> | |
| FRUITFUL VINE MIDWIFERY SERV | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>3</i> | | | | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>2</i> | |
| FT WALTON BCH MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>88</i> | | | | <i>5</i> | <i>81</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>2</i> | |
| GINA GELORMINI | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>2</i> | | | | <i>0</i> | <i>2</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| GLADES GENERAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>48</i> | | | | <i>6</i> | <i>34</i> | <i>0</i> | <i>7</i> | <i>0</i> | <i>1</i> | |
| GOOD SAMARITAN HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>66</i> | | | | <i>3</i> | <i>60</i> | <i>1</i> | <i>1</i> | <i>0</i> | <i>1</i> | |
| GULF BREEZE HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>2</i> | | | | <i>0</i> | <i>2</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| GULF COAST HOSP - FT MYERS | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>210</i> | | | | <i>0</i> | <i>187</i> | <i>1</i> | <i>14</i> | <i>0</i> | <i>8</i> | |
| GULF COAST MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>210</i> | | | | <i>0</i> | <i>194</i> | <i>0</i> | <i>4</i> | <i>2</i> | <i>10</i> | |

| Medical Rec. No: | Parent Name: | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|--------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|-----------|--------------|--------------|----------------------|
| HALIFAX MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>203</i> | | | | <i>3</i> | <i>192</i> | <i>1</i> | <i>5</i> | <i>0</i> | <i>2</i> | |
| HEALTH CENTRAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>93</i> | | | | <i>1</i> | <i>92</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| HEALTH PARK MEDICAL CTR/LEE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>357</i> | | | | <i>0</i> | <i>320</i> | <i>2</i> | <i>20</i> | <i>0</i> | <i>15</i> | |
| HEART 2 HEART BIRTH CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>6</i> | | | | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>5</i> | |
| HEART OF FLORIDA HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>94</i> | | | | <i>1</i> | <i>88</i> | <i>0</i> | <i>5</i> | <i>0</i> | <i>0</i> | |
| HEARTS N HANDS HOMEBIRTH | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>1</i> | | | | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| HELEN ELLIS MEMORIAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>37</i> | | | | <i>1</i> | <i>35</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| HIALEAH HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>146</i> | | | | <i>0</i> | <i>142</i> | <i>2</i> | <i>1</i> | <i>0</i> | <i>1</i> | |
| HIGHLANDS REG MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>42</i> | | | | <i>0</i> | <i>41</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| HOLLYWOOD BIRTH CENTER, INC | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>2</i> | | | | <i>2</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| HOLMES REG MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>236</i> | | | | <i>1</i> | <i>235</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |

| Medical Rec. No: | Parent Name: | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|-------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|-----------|--------------|--------------|----------------------|
| HOLY CROSS HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>101</i> | | | | <i>8</i> | <i>89</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>3</i> | |
| HOME BIRTH | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>34</i> | | | | <i>16</i> | <i>6</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>12</i> | |
| HOMESTEAD HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>126</i> | | | | <i>0</i> | <i>122</i> | <i>2</i> | <i>1</i> | <i>0</i> | <i>1</i> | |
| INDIAN RIVER MEMORIAL HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>105</i> | | | | <i>3</i> | <i>102</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| JACKSON HOSPITAL - MARIANNA | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>62</i> | | | | <i>13</i> | <i>49</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| JACKSON MEMORIAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>518</i> | | | | <i>10</i> | <i>471</i> | <i>6</i> | <i>12</i> | <i>0</i> | <i>19</i> | |
| JACKSON NORTH MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>152</i> | | | | <i>22</i> | <i>120</i> | <i>1</i> | <i>5</i> | <i>0</i> | <i>4</i> | |
| JACKSON SOUTH COMM HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>130</i> | | | | <i>21</i> | <i>107</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| JOE DIMAGGIO CHILDRENS HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>44</i> | | | | <i>1</i> | <i>25</i> | <i>4</i> | <i>1</i> | <i>0</i> | <i>13</i> | |
| JUPITER MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>95</i> | | | | <i>0</i> | <i>94</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | |
| KENDALL MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>178</i> | | | | <i>1</i> | <i>175</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>2</i> | |

| Medical Rec. No: | Parent Name: | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|-----------|--------------|--------------|----------------------|
| LABOR OF LOVE - DUNEDIN | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>3</i> | | | | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>2</i> | |
| LABOR OF LOVE BIRTH CTR (LUTZ) | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>4</i> | | | | <i>1</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>2</i> | |
| LABOR OF LOVE BIRTH CTR LAKE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>6</i> | | | | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>5</i> | |
| LAKELAND REG MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>331</i> | | | | <i>2</i> | <i>306</i> | <i>0</i> | <i>22</i> | <i>0</i> | <i>1</i> | |
| LAKESWOOD RANCH MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>81</i> | | | | <i>3</i> | <i>78</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| LAWNWOOD REGIONAL MEDICAL CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>97</i> | | | | <i>1</i> | <i>92</i> | <i>0</i> | <i>2</i> | <i>0</i> | <i>2</i> | |
| LEESBURG REGIONAL MEDICAL CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>129</i> | | | | <i>3</i> | <i>121</i> | <i>2</i> | <i>3</i> | <i>0</i> | <i>0</i> | |
| LOWER KEYS MEDICAL CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>51</i> | | | | <i>5</i> | <i>46</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| MAMA'S CRADLE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>2</i> | | | | <i>2</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| MANATEE MEMORIAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>214</i> | | | | <i>1</i> | <i>197</i> | <i>1</i> | <i>10</i> | <i>1</i> | <i>4</i> | |
| MARTIN MEMORIAL MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>175</i> | | | | <i>0</i> | <i>173</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>1</i> | |

| Medical Rec. No: | Parent Name: | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| MEASE COUNTRYSIDE HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>164</i> | | | | <i>0</i> | <i>159</i> | <i>0</i> | <i>1</i> | <i>1</i> | <i>3</i> | |
| MEMORIAL HOSPITAL JACKSONVILLE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>227</i> | | | | <i>1</i> | <i>220</i> | <i>0</i> | <i>4</i> | <i>0</i> | <i>2</i> | |
| MEMORIAL HOSPITAL MIRAMAR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>273</i> | | | | <i>0</i> | <i>267</i> | <i>1</i> | <i>1</i> | <i>1</i> | <i>3</i> | |
| MEMORIAL HOSPITAL WEST | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>433</i> | | | | <i>0</i> | <i>421</i> | <i>2</i> | <i>6</i> | <i>0</i> | <i>4</i> | |
| MEMORIAL REG HOSP - HOLLYWOOD | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>328</i> | | | | <i>1</i> | <i>314</i> | <i>0</i> | <i>6</i> | <i>0</i> | <i>7</i> | |
| MERCY HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>136</i> | | | | <i>0</i> | <i>128</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>7</i> | |
| MIAMI BEACH MATERNITY CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>36</i> | | | | <i>2</i> | <i>24</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>9</i> | |
| MIAMI CHILDREN'S HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>31</i> | | | | <i>3</i> | <i>9</i> | <i>1</i> | <i>1</i> | <i>0</i> | <i>17</i> | |
| MORTON F PLANT HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>300</i> | | | | <i>0</i> | <i>282</i> | <i>2</i> | <i>6</i> | <i>0</i> | <i>10</i> | |
| MT SINAI MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>181</i> | | | | <i>4</i> | <i>168</i> | <i>1</i> | <i>2</i> | <i>0</i> | <i>6</i> | |
| MUNROE REG MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>253</i> | | | | <i>0</i> | <i>245</i> | <i>7</i> | <i>0</i> | <i>0</i> | <i>1</i> | |

| Medical Rec. No: | Parent Name: | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| NATURAL BIRTH CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>1</i> | | | | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| NO HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>34</i> | | | | <i>12</i> | <i>21</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| NORTH BAY HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>1</i> | | | | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| NORTH FLORIDA REG MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>185</i> | | | | <i>1</i> | <i>184</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| NORTH NAPLES NCH HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>388</i> | | | | <i>2</i> | <i>383</i> | <i>1</i> | <i>2</i> | <i>0</i> | <i>0</i> | |
| NORTH OKALOOSA MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>65</i> | | | | <i>8</i> | <i>45</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>12</i> | |
| NORTH RIDGE HOSPITAL/MATERNITY | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>1</i> | | | | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| NORTH SHORE MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>184</i> | | | | <i>1</i> | <i>174</i> | <i>4</i> | <i>0</i> | <i>0</i> | <i>5</i> | |
| NORTHWEST MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>164</i> | | | | <i>6</i> | <i>146</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>11</i> | |
| ORANGE PARK MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>186</i> | | | | <i>2</i> | <i>181</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>3</i> | |
| ORLANDO REG SOUTH SEMINOLE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>124</i> | | | | <i>3</i> | <i>120</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |

| Medical Rec. No: | Parent Name: | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------|-------------------------|----------|--------------|--------------|----------------------|
| OSCEOLA REGIONAL MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 202 | | | | 2 | 198 | 0 | 0 | 0 | 2 | |
| OUT-OF-STATE HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 3 | | | | 2 | 1 | 0 | 0 | 0 | 0 | |
| PALMETTO BAY MATERNITY CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 1 | | | | 0 | 1 | 0 | 0 | 0 | 0 | |
| PALMETTO GENERAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 192 | | | | 0 | 187 | 0 | 1 | 0 | 4 | |
| PALMS WEST HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 86 | | | | 0 | 84 | 0 | 1 | 0 | 1 | |
| PARRISH MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 55 | | | | 1 | 52 | 1 | 1 | 0 | 0 | |
| PASCO REGIONAL MEDICAL CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 42 | | | | 0 | 41 | 0 | 1 | 0 | 0 | |
| PEACE RIVER REGIONAL MED. CTR. | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 112 | | | | 4 | 101 | 0 | 4 | 0 | 3 | |
| PHYSICIAN'S REG MEDICAL CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 33 | | | | 0 | 32 | 0 | 1 | 0 | 0 | |
| PLANTATION GENERAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 288 | | | | 5 | 259 | 7 | 13 | 0 | 4 | |
| PUTNAM COMMUNITY MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | 43 | | | | 5 | 34 | 0 | 1 | 0 | 3 | |

| Medical Rec. No: | Parent Name: | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| RAULERSON MEMORIAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>1</i> | | | | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| REGENCY MEDICAL CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>167</i> | | | | <i>0</i> | <i>165</i> | <i>1</i> | <i>1</i> | <i>0</i> | <i>0</i> | |
| ROSEMARY BIRTHING HOME INC. | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>2</i> | | | | <i>0</i> | <i>2</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| SACRED HEART EMERALD COAST | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>87</i> | | | | <i>0</i> | <i>87</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| SACRED HEART HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>298</i> | | | | <i>0</i> | <i>282</i> | <i>6</i> | <i>1</i> | <i>1</i> | <i>8</i> | |
| SANPERE ,ALICE, LM | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>1</i> | | | | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| SANTA ROSA MEDICAL CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>29</i> | | | | <i>0</i> | <i>28</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | |
| SARASOTA MEMORIAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>277</i> | | | | <i>1</i> | <i>269</i> | <i>4</i> | <i>1</i> | <i>1</i> | <i>1</i> | |
| SEBASTIAN RIVER MEDICAL CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>1</i> | | | | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| SEVEN RIVERS COMM HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>36</i> | | | | <i>0</i> | <i>36</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| SHANDS AT AGH | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>114</i> | | | | <i>2</i> | <i>105</i> | <i>1</i> | <i>3</i> | <i>0</i> | <i>3</i> | |

| Medical Rec. No: | Parent Name: | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|-----------|--------------|--------------|----------------------|
| SHANDS AT JACKSONVILLE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>357</i> | | | | <i>28</i> | <i>283</i> | <i>0</i> | <i>14</i> | <i>0</i> | <i>32</i> | |
| SHANDS AT LAKE SHORE HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>57</i> | | | | <i>1</i> | <i>52</i> | <i>0</i> | <i>4</i> | <i>0</i> | <i>0</i> | |
| SHANDS HOSP AT THE UNIV OF FLA | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>258</i> | | | | <i>4</i> | <i>235</i> | <i>2</i> | <i>2</i> | <i>0</i> | <i>15</i> | |
| SOUTH FLA BAPTIST HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>53</i> | | | | <i>3</i> | <i>48</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| SOUTH LAKE MEMORIAL HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>45</i> | | | | <i>0</i> | <i>45</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| SOUTH MIAMI HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>369</i> | | | | <i>0</i> | <i>343</i> | <i>7</i> | <i>2</i> | <i>0</i> | <i>17</i> | |
| SPRING HILL REGIONAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>168</i> | | | | <i>16</i> | <i>135</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>17</i> | |
| ST JOSEPH WOMEN HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>649</i> | | | | <i>0</i> | <i>622</i> | <i>11</i> | <i>1</i> | <i>1</i> | <i>14</i> | |
| ST LUCIE MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>91</i> | | | | <i>0</i> | <i>89</i> | <i>1</i> | <i>1</i> | <i>0</i> | <i>0</i> | |
| ST LUKES HOSPITAL-FAMILY BIRTH | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>127</i> | | | | <i>1</i> | <i>124</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| ST MARY'S HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>375</i> | | | | <i>0</i> | <i>354</i> | <i>0</i> | <i>0</i> | <i>1</i> | <i>20</i> | |

| Medical Rec. No: | Parent Name: | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| ST PETE GENERAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>135</i> | | | | <i>0</i> | <i>135</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| ST VINCENT'S MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>176</i> | | | | <i>11</i> | <i>158</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>6</i> | |
| TALLAHASSEE MEM REG MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>347</i> | | | | <i>2</i> | <i>327</i> | <i>4</i> | <i>6</i> | <i>0</i> | <i>8</i> | |
| TAMPA GENERAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>518</i> | | | | <i>7</i> | <i>464</i> | <i>1</i> | <i>7</i> | <i>2</i> | <i>37</i> | |
| THE BIRTH CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>1</i> | | | | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| THE BIRTH COTTAGE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>1</i> | | | | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| THE BIRTH PLACE/JENNIE JOSEPH | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>4</i> | | | | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>3</i> | |
| THE FAMILY BIRTH CTR OF NAPLES | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>3</i> | | | | <i>2</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| UNIV OF MIAMI SCHOOL OF MED | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>2</i> | | | | <i>0</i> | <i>2</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| UNIVERSITY COMMUNITY HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>268</i> | | | | <i>13</i> | <i>243</i> | <i>0</i> | <i>3</i> | <i>0</i> | <i>9</i> | |
| USAF 6TH MEDICAL GRP/SGSC | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>2</i> | | | | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |

| Medical Rec. No: | Parent Name: | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|--------------|-------------------------|----------|--------------|--------------|----------------------|
| USAF HOSP EGLIN | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>65</i> | | | | <i>0</i> | <i>64</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| USN HOSP JAX- NAS | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>1</i> | | | | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| USN HOSPITAL PENSACOLA | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>41</i> | | | | <i>1</i> | <i>40</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| WELLINGTON REG MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>234</i> | | | | <i>1</i> | <i>232</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | |
| WEST BOCA MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>191</i> | | | | <i>6</i> | <i>163</i> | <i>2</i> | <i>9</i> | <i>0</i> | <i>11</i> | |
| WEST FLORIDA HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>25</i> | | | | <i>2</i> | <i>23</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| WINNIE PALMER HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>1,219</i> | | | | <i>2</i> | <i>1,199</i> | <i>2</i> | <i>4</i> | <i>0</i> | <i>12</i> | |
| WINTER PARK BIRTHING COTTAGE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>7</i> | | | | <i>4</i> | <i>2</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| WINTER PARK MEMORIAL HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>164</i> | | | | <i>0</i> | <i>163</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | |
| WUESTHOFF HOSPITAL - MELBOURNE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>51</i> | | | | <i>3</i> | <i>44</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>3</i> | |
| WUESTHOFF HOSPITAL-ROCKLEDGE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>72</i> | | | | <i>1</i> | <i>69</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>2</i> | |

Medical Rec. No: Parent Name: Infant Name: Sex: DOB: Birth Order: Not Reported Pass Passed with Risk Factor Referred Hearing Loss Not Screened Not Screened Reason:

Totals:

Not Reported: 445
 Pass: 19,066
 Passed with Risk Factor: 131
 Referred: 281
 Hearing Loss: 12
 Not Screened: 610
 Total: 20,545

Not Screened Reason Counts:

1. Other: 107
2. Not yet screened NICU: 368
3. Previously screened: 17
4. Transferred: 25
5. Parent Refused: 52
6. Missed: 15
7. Missing Result: 26

Risk Factor Counts:

1. Low Birth Weight: 275
2. Hyperbilirubinemia: 13
3. Family History: 76
4. PPHN: 9