

Hearing Report

Date of Birth Range: Mar 1 2006 - Mar 31 2006

Report Criteria:

Determination

Status

Group By

Hospital

Diagnosis

Center

Report Format Current Status

Diagnosis Type

Report Type Summary

Date Printed: 2/15/2007

| 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:</i> | 33 | | | 20 | 11 | 0 | 0 | 0 | 2 | |
| A BIRTH CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | | <i>Patients:</i> | 5 | | | 1 | 1 | 0 | 0 | 0 | 3 | |
| ALL NATURAL BIRTH CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | | <i>Patients:</i> | 2 | | | 2 | 0 | 0 | 0 | 0 | 0 | |
| ARNOLD PALMER HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | | <i>Patients:</i> | 1,055 | | | 132 | 900 | 0 | 1 | 1 | 21 | |
| BAPTIST HOSP OF MIAMI | | | | | | | | | | | | |
| <i>Subtotal:</i> | | <i>Patients:</i> | 423 | | | 27 | 363 | 1 | 7 | 0 | 25 | |
| BAPTIST HOSPITAL PENSACOLA | | | | | | | | | | | | |
| <i>Subtotal:</i> | | <i>Patients:</i> | 109 | | | 13 | 94 | 0 | 2 | 0 | 0 | |
| BAPTIST MED CTR - NASSAU | | | | | | | | | | | | |
| <i>Subtotal:</i> | | <i>Patients:</i> | 42 | | | 1 | 38 | 0 | 1 | 0 | 2 | |
| BAPTIST MED CTR OF JAX | | | | | | | | | | | | |
| <i>Subtotal:</i> | | <i>Patients:</i> | 202 | | | 5 | 173 | 0 | 0 | 0 | 24 | |

| 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 MEDICAL CTR SOUTH | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>110</i> | | | | <i>4</i> | <i>99</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>6</i> | |
| BARTOW MEMORIAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>30</i> | | | | <i>2</i> | <i>25</i> | <i>2</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| BAY MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>42</i> | | | | <i>3</i> | <i>36</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>2</i> | |
| BAYFRONT MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>261</i> | | | | <i>46</i> | <i>209</i> | <i>2</i> | <i>0</i> | <i>0</i> | <i>4</i> | |
| BEACHES MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>87</i> | | | | <i>5</i> | <i>78</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>3</i> | |
| BETHESDA MEMORIAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>361</i> | | | | <i>99</i> | <i>246</i> | <i>0</i> | <i>3</i> | <i>0</i> | <i>13</i> | |
| BIRTH CENTER OF GAINESVILLE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>4</i> | | | | <i>2</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>2</i> | |
| BIRTHING CTR. OF SOUTH FLORIDA | | | | | | | | | | | | |
| <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> | |
| BOCA RATON COMM HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>203</i> | | | | <i>19</i> | <i>174</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>9</i> | |
| BRANDON REGIONAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>394</i> | | | | <i>45</i> | <i>325</i> | <i>4</i> | <i>3</i> | <i>0</i> | <i>17</i> | |
| BROWARD GENERAL MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>285</i> | | | | <i>21</i> | <i>241</i> | <i>2</i> | <i>0</i> | <i>0</i> | <i>21</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: |
|-------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| CAPE CANAVERAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>71</i> | | | | <i>10</i> | <i>58</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>3</i> | |
| CAPE CORAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>109</i> | | | | <i>4</i> | <i>99</i> | <i>0</i> | <i>4</i> | <i>1</i> | <i>1</i> | |
| CAPITAL REG. MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>80</i> | | | | <i>2</i> | <i>76</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>2</i> | |
| CENTRAL FLA REG HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>62</i> | | | | <i>10</i> | <i>51</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| CITRUS MEMORIAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>61</i> | | | | <i>0</i> | <i>61</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| COLUMBIA HOSPITAL WPB | | | | | | | | | | | | |
| <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> | |
| COMM HOSP OF NPR/BIRTHPLACE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>76</i> | | | | <i>6</i> | <i>66</i> | <i>0</i> | <i>1</i> | <i>1</i> | <i>2</i> | |
| CORAL SPRINGS MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>185</i> | | | | <i>8</i> | <i>166</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>11</i> | |
| COUNTRYSIDE BIRTHING PLACE | | | | | | | | | | | | |
| <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> | |
| DESOTO MEMORIAL HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>57</i> | | | | <i>13</i> | <i>41</i> | <i>0</i> | <i>3</i> | <i>0</i> | <i>0</i> | |
| ENGLEWOOD COMMUNITY HOSPITAL | | | | | | | | | | | | |
| <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> | |

| 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: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| FLAGLER HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>104</i> | | | | <i>7</i> | <i>93</i> | <i>3</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| FLORIDA HOSP CELEBRATION HLTH | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>129</i> | | | | <i>3</i> | <i>124</i> | <i>0</i> | <i>2</i> | <i>0</i> | <i>0</i> | |
| FLORIDA HOSPITAL - ALTAMONTE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>107</i> | | | | <i>1</i> | <i>103</i> | <i>1</i> | <i>2</i> | <i>0</i> | <i>0</i> | |
| FLORIDA HOSPITAL - DELAND | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>113</i> | | | | <i>0</i> | <i>112</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| FLORIDA HOSPITAL - WATERMAN | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>77</i> | | | | <i>3</i> | <i>74</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| FLORIDA HOSPITAL HEARTLAND | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>80</i> | | | | <i>11</i> | <i>69</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| FLORIDA HOSPITAL ORLANDO - LAB | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>295</i> | | | | <i>14</i> | <i>272</i> | <i>3</i> | <i>3</i> | <i>0</i> | <i>3</i> | |
| FLORIDA HOSPITAL ORMOND | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>98</i> | | | | <i>8</i> | <i>90</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| FLORIDA HOSPITAL-ZEPHYRHILLS | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>56</i> | | | | <i>6</i> | <i>43</i> | <i>0</i> | <i>4</i> | <i>0</i> | <i>3</i> | |
| FT WALTON BCH MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>215</i> | | | | <i>91</i> | <i>120</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>4</i> | |
| GLADES GENERAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>48</i> | | | | <i>14</i> | <i>31</i> | <i>0</i> | <i>1</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: |
|--------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| GOOD SAMARITAN HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>68</i> | | | | <i>43</i> | <i>23</i> | <i>0</i> | <i>2</i> | <i>0</i> | <i>0</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>187</i> | | | | <i>4</i> | <i>178</i> | <i>0</i> | <i>4</i> | <i>0</i> | <i>1</i> | |
| GULF COAST MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>189</i> | | | | <i>7</i> | <i>173</i> | <i>0</i> | <i>0</i> | <i>1</i> | <i>8</i> | |
| HALIFAX MEDICAL CENTER | | | | | | | | | | | | |
| <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> | |
| HEALTH CENTRAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>99</i> | | | | <i>7</i> | <i>91</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | |
| HEALTH PARK MEDICAL CTR/LEE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>326</i> | | | | <i>20</i> | <i>286</i> | <i>0</i> | <i>8</i> | <i>1</i> | <i>11</i> | |
| HEART OF FLORIDA HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>80</i> | | | | <i>1</i> | <i>76</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>2</i> | |
| HELEN ELLIS MEMORIAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>60</i> | | | | <i>11</i> | <i>48</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| HIALEAH HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>132</i> | | | | <i>2</i> | <i>127</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>3</i> | |
| HIGHLANDS REG MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>27</i> | | | | <i>1</i> | <i>25</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: |
|-------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| HOLLYWOOD BIRTH CENTER, INC | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>7</i> | | | | <i>6</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| HOLMES REG MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>216</i> | | | | <i>15</i> | <i>196</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>5</i> | |
| HOLY CROSS HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>142</i> | | | | <i>29</i> | <i>106</i> | <i>1</i> | <i>4</i> | <i>0</i> | <i>2</i> | |
| HOME BIRTH | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>50</i> | | | | <i>29</i> | <i>2</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>19</i> | |
| HOMESTEAD HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>135</i> | | | | <i>12</i> | <i>118</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>4</i> | |
| INDIAN RIVER MEMORIAL HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>115</i> | | | | <i>3</i> | <i>110</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>1</i> | |
| JACKSON HOSPITAL - MARIANNA | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>54</i> | | | | <i>1</i> | <i>52</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| JACKSON MEMORIAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>512</i> | | | | <i>30</i> | <i>474</i> | <i>0</i> | <i>7</i> | <i>0</i> | <i>1</i> | |
| JACKSON NORTH MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>116</i> | | | | <i>20</i> | <i>93</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>2</i> | |
| JACKSON SOUTH COMM HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>117</i> | | | | <i>4</i> | <i>113</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| JOE DIMAGGIO CHILDRENS HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>3</i> | | | | <i>1</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: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| JUPITER MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>104</i> | | | | <i>47</i> | <i>57</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| KENDALL MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>214</i> | | | | <i>22</i> | <i>187</i> | <i>0</i> | <i>3</i> | <i>0</i> | <i>2</i> | |
| LABOR OF LOVE - DUNEDIN | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>4</i> | | | | <i>3</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| LABOR OF LOVE BIRTH CTR (LUTZ) | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>8</i> | | | | <i>4</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>3</i> | |
| LABOR OF LOVE BIRTH CTR LAKE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>5</i> | | | | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>4</i> | |
| LAKELAND REG MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>257</i> | | | | <i>6</i> | <i>235</i> | <i>0</i> | <i>6</i> | <i>0</i> | <i>10</i> | |
| LAKESWOOD RANCH MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>78</i> | | | | <i>2</i> | <i>75</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| LAWNWOOD REGIONAL MEDICAL CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>105</i> | | | | <i>7</i> | <i>95</i> | <i>0</i> | <i>3</i> | <i>0</i> | <i>0</i> | |
| LEESBURG REGIONAL MEDICAL CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>143</i> | | | | <i>2</i> | <i>137</i> | <i>0</i> | <i>3</i> | <i>0</i> | <i>1</i> | |
| LOWER KEYS MEDICAL CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>39</i> | | | | <i>1</i> | <i>38</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| LUCERNE MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>52</i> | | | | <i>2</i> | <i>49</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: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| MADISON COUNTY MEMORIAL HOSP | | | | | | | | | | | | |
| <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> | |
| MAMA'S CRADLE | | | | | | | | | | | | |
| <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> | |
| MANATEE MEMORIAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>208</i> | | | | <i>24</i> | <i>177</i> | <i>0</i> | <i>2</i> | <i>0</i> | <i>5</i> | |
| MARTIN MEMORIAL MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>174</i> | | | | <i>25</i> | <i>136</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>12</i> | |
| MEASE COUNTRYSIDE HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>179</i> | | | | <i>20</i> | <i>148</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>10</i> | |
| MEMORIAL HOSPITAL JACKSONVILLE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>238</i> | | | | <i>20</i> | <i>213</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>4</i> | |
| MEMORIAL HOSPITAL MIRAMAR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>205</i> | | | | <i>13</i> | <i>186</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>5</i> | |
| MEMORIAL HOSPITAL WEST | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>437</i> | | | | <i>38</i> | <i>359</i> | <i>3</i> | <i>3</i> | <i>0</i> | <i>34</i> | |
| MEMORIAL REG HOSP - HOLLYWOOD | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>408</i> | | | | <i>34</i> | <i>354</i> | <i>1</i> | <i>5</i> | <i>1</i> | <i>13</i> | |
| MERCY HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>138</i> | | | | <i>17</i> | <i>114</i> | <i>0</i> | <i>2</i> | <i>0</i> | <i>5</i> | |
| MIAMI BEACH MATERNITY CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>26</i> | | | | <i>0</i> | <i>22</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>4</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: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| MIAMI CHILDREN'S HOSPITAL | | | | | | | | | | | | |
| <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> | |
| MORTON F PLANT HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>323</i> | | | | <i>14</i> | <i>286</i> | <i>0</i> | <i>2</i> | <i>1</i> | <i>20</i> | |
| MT SINAI MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>193</i> | | | | <i>13</i> | <i>170</i> | <i>4</i> | <i>1</i> | <i>0</i> | <i>5</i> | |
| MUNROE REG MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>253</i> | | | | <i>27</i> | <i>225</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| NO HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>154</i> | | | | <i>75</i> | <i>68</i> | <i>1</i> | <i>1</i> | <i>0</i> | <i>9</i> | |
| NORTH BROWARD MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>4</i> | | | | <i>2</i> | <i>2</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| NORTH COLLIER HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>446</i> | | | | <i>75</i> | <i>342</i> | <i>0</i> | <i>2</i> | <i>1</i> | <i>26</i> | |
| NORTH FLORIDA REG MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>178</i> | | | | <i>28</i> | <i>141</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>8</i> | |
| NORTH OKALOOSA MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>56</i> | | | | <i>3</i> | <i>51</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>2</i> | |
| NORTH RIDGE HOSPITAL/MATERNITY | | | | | | | | | | | | |
| <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> | |
| NORTH SHORE MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>118</i> | | | | <i>13</i> | <i>103</i> | <i>0</i> | <i>2</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: |
|--------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| NORTHWEST MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>170</i> | | | | <i>21</i> | <i>141</i> | <i>0</i> | <i>6</i> | <i>0</i> | <i>2</i> | |
| OCALA REGIONAL MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>2</i> | | | | <i>1</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| ORANGE PARK MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>194</i> | | | | <i>4</i> | <i>182</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>8</i> | |
| ORLANDO REG SOUTH SEMINOLE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>133</i> | | | | <i>2</i> | <i>130</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| OSCEOLA REGIONAL MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>249</i> | | | | <i>42</i> | <i>193</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>13</i> | |
| OUT-OF-STATE HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>19</i> | | | | <i>13</i> | <i>3</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>3</i> | |
| PALM BCH GARDENS MED CTR | | | | | | | | | | | | |
| <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> | |
| PALMETTO BAY MATERNITY CENTER | | | | | | | | | | | | |
| <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> | |
| PALMETTO GENERAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>197</i> | | | | <i>28</i> | <i>148</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>20</i> | |
| PALMS WEST HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>109</i> | | | | <i>22</i> | <i>82</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>4</i> | |
| PARRISH MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>74</i> | | | | <i>0</i> | <i>74</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: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| PASCO REGIONAL MEDICAL CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>19</i> | | | | <i>2</i> | <i>17</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| PEACE RIVER REGIONAL MED. CTR. | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>108</i> | | | | <i>1</i> | <i>103</i> | <i>1</i> | <i>1</i> | <i>0</i> | <i>2</i> | |
| PLANTATION GENERAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>342</i> | | | | <i>27</i> | <i>293</i> | <i>5</i> | <i>6</i> | <i>0</i> | <i>11</i> | |
| PUTNAM COMMUNITY MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>42</i> | | | | <i>6</i> | <i>36</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| REGENCY MEDICAL CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>183</i> | | | | <i>181</i> | <i>0</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>1</i> | |
| ROSEMARY BIRTHING HOME INC. | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>2</i> | | | | <i>1</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| SACRED HEART HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>280</i> | | | | <i>5</i> | <i>264</i> | <i>2</i> | <i>1</i> | <i>0</i> | <i>8</i> | |
| SANTA ROSA MEDICAL CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>36</i> | | | | <i>3</i> | <i>33</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| SARASOTA MEMORIAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>347</i> | | | | <i>26</i> | <i>294</i> | <i>5</i> | <i>5</i> | <i>0</i> | <i>17</i> | |
| SEVEN RIVERS COMM HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>38</i> | | | | <i>4</i> | <i>34</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| SHANDS AT AGH | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>124</i> | | | | <i>23</i> | <i>87</i> | <i>2</i> | <i>0</i> | <i>0</i> | <i>12</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>295</i> | | | | <i>29</i> | <i>239</i> | <i>3</i> | <i>9</i> | <i>0</i> | <i>15</i> | |
| SHANDS AT LAKE SHORE HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>64</i> | | | | <i>15</i> | <i>40</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>8</i> | |
| SHANDS HOSP AT THE UNIV OF FLA | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>277</i> | | | | <i>49</i> | <i>181</i> | <i>4</i> | <i>0</i> | <i>0</i> | <i>43</i> | |
| SOUTH FLA BAPTIST HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>63</i> | | | | <i>6</i> | <i>53</i> | <i>1</i> | <i>2</i> | <i>0</i> | <i>1</i> | |
| SOUTH LAKE MEMORIAL HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>50</i> | | | | <i>0</i> | <i>50</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| SOUTH MIAMI HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>385</i> | | | | <i>23</i> | <i>346</i> | <i>1</i> | <i>0</i> | <i>1</i> | <i>14</i> | |
| SPECIAL BEGINNINGS | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>6</i> | | | | <i>2</i> | <i>3</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| SPRING HILL REGIONAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>154</i> | | | | <i>19</i> | <i>129</i> | <i>1</i> | <i>1</i> | <i>0</i> | <i>4</i> | |
| ST JOSEPH WOMEN HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>683</i> | | | | <i>76</i> | <i>585</i> | <i>6</i> | <i>3</i> | <i>0</i> | <i>13</i> | |
| ST LUCIE MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>68</i> | | | | <i>46</i> | <i>21</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>0</i> | |
| ST LUKES HOSPITAL-FAMILY BIRTH | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>125</i> | | | | <i>3</i> | <i>115</i> | <i>1</i> | <i>1</i> | <i>1</i> | <i>4</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 MARY'S HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>368</i> | | | | <i>319</i> | <i>25</i> | <i>0</i> | <i>2</i> | <i>0</i> | <i>22</i> | |
| ST PETE GENERAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>138</i> | | | | <i>4</i> | <i>130</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>3</i> | |
| ST VINCENT'S MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>177</i> | | | | <i>6</i> | <i>157</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>14</i> | |
| TALLAHASSEE MEM REG MED CTR | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>333</i> | | | | <i>22</i> | <i>289</i> | <i>6</i> | <i>1</i> | <i>0</i> | <i>15</i> | |
| TAMPA GENERAL HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>667</i> | | | | <i>328</i> | <i>305</i> | <i>0</i> | <i>10</i> | <i>0</i> | <i>24</i> | |
| THE BIRTH CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>6</i> | | | | <i>3</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>2</i> | |
| THE BIRTH COTTAGE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>4</i> | | | | <i>1</i> | <i>1</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>1</i> | |
| THE BIRTH PLACE/JENNIE JOSEPH | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>5</i> | | | | <i>3</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>1</i> | |
| THE FAMILY BIRTH CTR OF NAPLES | | | | | | | | | | | | |
| <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> | |
| THE FAMILY BIRTH CTR@ FT MYERS | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>2</i> | | | | <i>1</i> | <i>1</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| TOWN & COUNTRY 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> | |

| 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: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| UNIV OF MIAMI SCHOOL OF MED | | | | | | | | | | | | |
| <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> | |
| UNIVERSITY COMMUNITY HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>271</i> | | | | <i>63</i> | <i>127</i> | <i>2</i> | <i>2</i> | <i>1</i> | <i>76</i> | |
| USN HOSP JAX- NAS | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>3</i> | | | | <i>1</i> | <i>2</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| USN HOSPITAL PENSACOLA | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>42</i> | | | | <i>0</i> | <i>40</i> | <i>0</i> | <i>1</i> | <i>0</i> | <i>1</i> | |
| WELLINGTON REG MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>225</i> | | | | <i>13</i> | <i>206</i> | <i>1</i> | <i>3</i> | <i>0</i> | <i>2</i> | |
| WEST BOCA MEDICAL CENTER | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>214</i> | | | | <i>34</i> | <i>169</i> | <i>2</i> | <i>2</i> | <i>0</i> | <i>7</i> | |
| WEST FLORIDA HOSPITAL | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>39</i> | | | | <i>1</i> | <i>38</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| WINTER PARK BIRTHING COTTAGE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>4</i> | | | | <i>4</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>0</i> | |
| WINTER PARK MEMORIAL HOSP | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>221</i> | | | | <i>12</i> | <i>204</i> | <i>1</i> | <i>1</i> | <i>0</i> | <i>3</i> | |
| WUESTHOFF HOSPITAL - MELBOURNE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>58</i> | | | | <i>13</i> | <i>41</i> | <i>0</i> | <i>0</i> | <i>0</i> | <i>4</i> | |
| WUESTHOFF HOSPITAL-ROCKLEDGE | | | | | | | | | | | | |
| <i>Subtotal:</i> | <i>Patients:</i> | <i>87</i> | | | | <i>3</i> | <i>81</i> | <i>1</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:

Totals:

Not Reported: 2,967
 Pass: 16,897
 Passed with Risk Factor: 83
 Referred: 174
 Hearing Loss: 11
 Not Screened: 822
 Total: 20,954

Not Screened Reason Counts:

1. Previously screened: 47
2. Other: 143
3. Not yet screened NICU: 528
4. Missing Result: 57
5. Parent Refused: 19
6. Missed: 17
7. Transferred: 11

Risk Factor Counts:

1. Low Birth Weight: 161
2. Family History: 74
3. Hyperbilirubinemia: 10
4. PPHN: 9
5. ECMO: 4