

Hearing Report

Date of Birth Range: Mar 1 2007 - Mar 31 2007

Report Criteria:

Determination

Status

Group By

Hospital

Diagnosis

Center

Report Format Current Status

Diagnosis Type

Report Type Summary

Date Printed: 8/27/2007

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>						3	3	0	0	0	0	
<i>Patients: 6</i>												
A BIRTH CENTER												
<i>Subtotal:</i>						0	1	0	0	0	5	
<i>Patients: 6</i>												
A MOTHER'S NATURE HOME BIRTHS												
<i>Subtotal:</i>						2	0	0	0	0	0	
<i>Patients: 2</i>												
A WOMAN'S TOUCH IN HEALTH CARE												
<i>Subtotal:</i>						1	0	0	0	0	0	
<i>Patients: 1</i>												
ALL CHILDREN'S HOSPITAL												
<i>Subtotal:</i>						8	46	0	2	0	2	
<i>Patients: 58</i>												
ARNOLD PALMER HOSP												
<i>Subtotal:</i>						0	15	0	0	0	0	
<i>Patients: 15</i>												
BAPTIST HOSP OF MIAMI												
<i>Subtotal:</i>						4	377	2	2	0	36	
<i>Patients: 421</i>												
BAPTIST HOSPITAL OF MIAMI-OUTREACH												
<i>Subtotal:</i>						0	6	0	0	0	0	
<i>Patients: 6</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:
BAPTIST HOSPITAL PENSACOLA												
<i>Subtotal:</i>	<i>Patients:</i>	82				7	72	0	3	0	0	
BAPTIST MED CTR - NASSAU												
<i>Subtotal:</i>	<i>Patients:</i>	31				0	31	0	0	0	0	
BAPTIST MED CTR OF JAX												
<i>Subtotal:</i>	<i>Patients:</i>	199				0	194	0	1	0	4	
BAPTIST MEDICAL CTR SOUTH												
<i>Subtotal:</i>	<i>Patients:</i>	122				3	117	0	0	0	2	
BARTOW REGIONAL MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	26				3	21	1	0	0	1	
BAY MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	50				0	48	2	0	0	0	
BAYFRONT MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	220				21	180	1	1	0	17	
BAYFRONT MEDICAL CENTER LABORATORY												
<i>Subtotal:</i>	<i>Patients:</i>	30				3	27	0	0	0	0	
BEACHES MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	86				5	79	0	1	0	1	
BETHESDA MEMORIAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	315				17	289	2	2	0	5	
BIRTH & BEYOND												
<i>Subtotal:</i>	<i>Patients:</i>	1				1	0	0	0	0	0	

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:
BIRTH CENTER OF GAINESVILLE												
<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>	
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>165</i>				<i>7</i>	<i>156</i>	<i>0</i>	<i>0</i>	<i>1</i>	<i>1</i>	
BRANDON REGIONAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>329</i>				<i>22</i>	<i>301</i>	<i>3</i>	<i>0</i>	<i>0</i>	<i>3</i>	
BROWARD GENERAL MED CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>346</i>				<i>15</i>	<i>299</i>	<i>4</i>	<i>2</i>	<i>0</i>	<i>26</i>	
CAPE CANAVERAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>57</i>				<i>7</i>	<i>49</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>1</i>	
CAPE CORAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>136</i>				<i>3</i>	<i>129</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>4</i>	
CAPITAL REG. MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>86</i>				<i>4</i>	<i>78</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>4</i>	
CENTRAL FLA REG HOSP												
<i>Subtotal:</i>	<i>Patients:</i>	<i>44</i>				<i>0</i>	<i>44</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
CITRUS MEMORIAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>51</i>				<i>1</i>	<i>50</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>47</i>				<i>0</i>	<i>45</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:
CORAL SPRINGS MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>193</i>				<i>8</i>	<i>180</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>4</i>	
COUNTRYSIDE BIRTHING PLACE												
<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>	
DESOTO MEMORIAL HOSP												
<i>Subtotal:</i>	<i>Patients:</i>	<i>55</i>				<i>1</i>	<i>54</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
FLAGLER HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>112</i>				<i>0</i>	<i>109</i>	<i>3</i>	<i>0</i>	<i>0</i>	<i>0</i>	
FLORIDA HOSP CELEBRATION HLTH												
<i>Subtotal:</i>	<i>Patients:</i>	<i>127</i>				<i>0</i>	<i>125</i>	<i>1</i>	<i>1</i>	<i>0</i>	<i>0</i>	
FLORIDA HOSPITAL - ALTAMONTE												
<i>Subtotal:</i>	<i>Patients:</i>	<i>82</i>				<i>0</i>	<i>81</i>	<i>1</i>	<i>0</i>	<i>0</i>	<i>0</i>	
FLORIDA HOSPITAL - DELAND												
<i>Subtotal:</i>	<i>Patients:</i>	<i>87</i>				<i>1</i>	<i>85</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>1</i>	
FLORIDA HOSPITAL - WATERMAN												
<i>Subtotal:</i>	<i>Patients:</i>	<i>88</i>				<i>4</i>	<i>78</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>5</i>	
FLORIDA HOSPITAL EAST												
<i>Subtotal:</i>	<i>Patients:</i>	<i>3</i>				<i>0</i>	<i>3</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
FLORIDA HOSPITAL HEARTLAND												
<i>Subtotal:</i>	<i>Patients:</i>	<i>82</i>				<i>8</i>	<i>71</i>	<i>0</i>	<i>2</i>	<i>0</i>	<i>1</i>	
FLORIDA HOSPITAL ORLANDO - LAB												
<i>Subtotal:</i>	<i>Patients:</i>	<i>307</i>				<i>1</i>	<i>298</i>	<i>2</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:
FLORIDA HOSPITAL ORMOND												
<i>Subtotal:</i>	<i>Patients:</i>	<i>73</i>				<i>7</i>	<i>64</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>1</i>	
FLORIDA HOSPITAL-ZEPHYRHILLS												
<i>Subtotal:</i>	<i>Patients:</i>	<i>47</i>				<i>4</i>	<i>36</i>	<i>0</i>	<i>5</i>	<i>0</i>	<i>2</i>	
FRUITFUL VINE MIDWIFERY SERV												
<i>Subtotal:</i>	<i>Patients:</i>	<i>11</i>				<i>2</i>	<i>3</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>6</i>	
FT WALTON BCH MED CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>118</i>				<i>3</i>	<i>115</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
GLADES GENERAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>44</i>				<i>2</i>	<i>38</i>	<i>0</i>	<i>4</i>	<i>0</i>	<i>0</i>	
GOOD SAMARITAN HOSP												
<i>Subtotal:</i>	<i>Patients:</i>	<i>56</i>				<i>5</i>	<i>48</i>	<i>0</i>	<i>0</i>	<i>1</i>	<i>2</i>	
GULF BREEZE HOSPITAL												
<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>	
GULF COAST HOSP - FT MYERS												
<i>Subtotal:</i>	<i>Patients:</i>	<i>211</i>				<i>1</i>	<i>205</i>	<i>0</i>	<i>3</i>	<i>0</i>	<i>2</i>	
GULF COAST MED CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>178</i>				<i>5</i>	<i>160</i>	<i>1</i>	<i>0</i>	<i>0</i>	<i>12</i>	
HALIFAX MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>221</i>				<i>0</i>	<i>218</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>2</i>	
HEALTH CENTRAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>102</i>				<i>1</i>	<i>95</i>	<i>2</i>	<i>3</i>	<i>0</i>	<i>1</i>	

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HEALTH PARK MEDICAL CTR/LEE												
<i>Subtotal:</i>	<i>Patients:</i>	338				2	308	1	22	0	5	
HEART OF FLORIDA HOSP												
<i>Subtotal:</i>	<i>Patients:</i>	113				1	109	0	2	0	1	
HELEN ELLIS MEMORIAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	54				1	51	0	1	0	1	
HERITAGE BIRTH SERVICES												
<i>Subtotal:</i>	<i>Patients:</i>	1				0	0	0	0	0	1	
HIALEAH HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	153				0	150	1	0	0	2	
HIGHLANDS REG MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	29				1	26	0	0	1	1	
HOLLYWOOD BIRTH CENTER, INC												
<i>Subtotal:</i>	<i>Patients:</i>	7				6	1	0	0	0	0	
HOLMES REG MED CTR												
<i>Subtotal:</i>	<i>Patients:</i>	235				1	233	0	1	0	0	
HOLY CROSS HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	109				10	89	0	1	0	9	
HOME BIRTH												
<i>Subtotal:</i>	<i>Patients:</i>	26				11	5	0	0	0	10	
HOME BIRTH INC												
<i>Subtotal:</i>	<i>Patients:</i>	1				0	1	0	0	0	0	

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:
HOMESTEAD HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>99</i>				<i>1</i>	<i>97</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>1</i>	
INDIAN RIVER MEMORIAL HOSP												
<i>Subtotal:</i>	<i>Patients:</i>	<i>115</i>				<i>4</i>	<i>111</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
JACKSON HOSPITAL - MARIANNA												
<i>Subtotal:</i>	<i>Patients:</i>	<i>50</i>				<i>3</i>	<i>47</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
JACKSON MEMORIAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>471</i>				<i>16</i>	<i>449</i>	<i>2</i>	<i>3</i>	<i>1</i>	<i>0</i>	
JACKSON NORTH MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>139</i>				<i>14</i>	<i>118</i>	<i>0</i>	<i>3</i>	<i>0</i>	<i>4</i>	
JACKSON SOUTH COMM HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>133</i>				<i>4</i>	<i>129</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
JOE DIMAGGIO CHILDRENS HOSP												
<i>Subtotal:</i>	<i>Patients:</i>	<i>42</i>				<i>2</i>	<i>31</i>	<i>5</i>	<i>1</i>	<i>0</i>	<i>3</i>	
JUPITER MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>97</i>				<i>0</i>	<i>91</i>	<i>2</i>	<i>0</i>	<i>0</i>	<i>4</i>	
KENDALL MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>164</i>				<i>10</i>	<i>151</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>2</i>	
LABOR OF LOVE - DUNEDIN												
<i>Subtotal:</i>	<i>Patients:</i>	<i>4</i>				<i>0</i>	<i>3</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>1</i>	
LABOR OF LOVE BIRTH CTR (LUTZ)												
<i>Subtotal:</i>	<i>Patients:</i>	<i>8</i>				<i>1</i>	<i>1</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>6</i>	

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LABOR OF LOVE BIRTH CTR LAKE												
<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>	
LAKELAND REG MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>323</i>				<i>1</i>	<i>304</i>	<i>0</i>	<i>18</i>	<i>0</i>	<i>0</i>	
LAKESWOOD RANCH MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>79</i>				<i>4</i>	<i>72</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>3</i>	
LAWNWOOD REGIONAL MEDICAL CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>126</i>				<i>1</i>	<i>121</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>3</i>	
LEESBURG REGIONAL MEDICAL CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>132</i>				<i>2</i>	<i>129</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>0</i>	
LOWER KEYS MEDICAL CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>51</i>				<i>0</i>	<i>51</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
MADISON COUNTY MEMORIAL HOSP												
<i>Subtotal:</i>	<i>Patients:</i>	<i>3</i>				<i>0</i>	<i>2</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>0</i>	
MAMA'S CRADLE												
<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>	
MANATEE MEMORIAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>197</i>				<i>3</i>	<i>181</i>	<i>0</i>	<i>6</i>	<i>0</i>	<i>7</i>	
MARTIN MEMORIAL MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>169</i>				<i>4</i>	<i>163</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>1</i>	
MEASE COUNTRYSIDE HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>141</i>				<i>2</i>	<i>134</i>	<i>0</i>	<i>1</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:
MEMORIAL HOSPITAL JACKSONVILLE												
<i>Subtotal:</i>	<i>Patients:</i>	<i>209</i>				<i>9</i>	<i>190</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>9</i>	
MEMORIAL HOSPITAL MIRAMAR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>188</i>				<i>3</i>	<i>180</i>	<i>1</i>	<i>0</i>	<i>0</i>	<i>4</i>	
MEMORIAL HOSPITAL WEST												
<i>Subtotal:</i>	<i>Patients:</i>	<i>458</i>				<i>7</i>	<i>441</i>	<i>0</i>	<i>2</i>	<i>0</i>	<i>8</i>	
MEMORIAL REG HOSP - HOLLYWOOD												
<i>Subtotal:</i>	<i>Patients:</i>	<i>318</i>				<i>4</i>	<i>309</i>	<i>0</i>	<i>2</i>	<i>0</i>	<i>3</i>	
MERCY HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>107</i>				<i>6</i>	<i>92</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>8</i>	
MIAMI BEACH MATERNITY CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>39</i>				<i>2</i>	<i>33</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>4</i>	
MIAMI CHILDREN'S HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>34</i>				<i>16</i>	<i>6</i>	<i>0</i>	<i>2</i>	<i>0</i>	<i>10</i>	
MORTON F PLANT HOSP												
<i>Subtotal:</i>	<i>Patients:</i>	<i>329</i>				<i>2</i>	<i>325</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>2</i>	
MT SINAI MED CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>157</i>				<i>3</i>	<i>139</i>	<i>1</i>	<i>0</i>	<i>0</i>	<i>14</i>	
MUNROE REG MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>260</i>				<i>0</i>	<i>252</i>	<i>8</i>	<i>0</i>	<i>0</i>	<i>0</i>	
NATURAL CHOICE BIRTH SERVICES												
<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:
NO HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>103</i>				<i>39</i>	<i>63</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>0</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 BROWARD MEDICAL 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>	
NORTH COLLIER HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>384</i>				<i>25</i>	<i>351</i>	<i>0</i>	<i>0</i>	<i>1</i>	<i>7</i>	
NORTH FLORIDA REG MED CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>180</i>				<i>0</i>	<i>177</i>	<i>2</i>	<i>1</i>	<i>0</i>	<i>0</i>	
NORTH OKALOOSA MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>53</i>				<i>16</i>	<i>15</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>22</i>	
NORTH SHORE MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>166</i>				<i>0</i>	<i>162</i>	<i>2</i>	<i>0</i>	<i>0</i>	<i>2</i>	
NORTHWEST MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>181</i>				<i>15</i>	<i>155</i>	<i>1</i>	<i>6</i>	<i>0</i>	<i>4</i>	
ORANGE PARK MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>187</i>				<i>4</i>	<i>178</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>5</i>	
ORLANDO REG SOUTH SEMINOLE												
<i>Subtotal:</i>	<i>Patients:</i>	<i>142</i>				<i>6</i>	<i>134</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>2</i>	
OSCEOLA REGIONAL MED CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>197</i>				<i>4</i>	<i>190</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:
OUT-OF-STATE HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>13</i>				<i>9</i>	<i>3</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>1</i>	
PALMETTO BAY MATERNITY 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>	
PALMETTO GENERAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>205</i>				<i>1</i>	<i>194</i>	<i>3</i>	<i>0</i>	<i>0</i>	<i>7</i>	
PALMS WEST HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>107</i>				<i>1</i>	<i>104</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>2</i>	
PARRISH MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>70</i>				<i>0</i>	<i>67</i>	<i>2</i>	<i>1</i>	<i>0</i>	<i>0</i>	
PASCO REGIONAL MEDICAL CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>28</i>				<i>3</i>	<i>25</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
PATIENCE CORNER												
<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>	
PEACE RIVER REGIONAL MED. CTR.												
<i>Subtotal:</i>	<i>Patients:</i>	<i>99</i>				<i>1</i>	<i>94</i>	<i>2</i>	<i>0</i>	<i>0</i>	<i>2</i>	
PHYSICIAN'S REG MEDICAL CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>14</i>				<i>0</i>	<i>14</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
PLANTATION GENERAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>284</i>				<i>12</i>	<i>256</i>	<i>1</i>	<i>10</i>	<i>0</i>	<i>5</i>	
PUTNAM COMMUNITY MED CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>46</i>				<i>2</i>	<i>41</i>	<i>0</i>	<i>3</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:
REGENCY MEDICAL CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>157</i>				<i>1</i>	<i>155</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>0</i>	
ROSEMARY BIRTHING HOME INC.												
<i>Subtotal:</i>	<i>Patients:</i>	<i>4</i>				<i>0</i>	<i>4</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
SACRED HEART HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>338</i>				<i>0</i>	<i>321</i>	<i>2</i>	<i>0</i>	<i>0</i>	<i>15</i>	
SANTA ROSA MEDICAL CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>22</i>				<i>0</i>	<i>21</i>	<i>1</i>	<i>0</i>	<i>0</i>	<i>0</i>	
SARASOTA MEMORIAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>303</i>				<i>1</i>	<i>293</i>	<i>2</i>	<i>3</i>	<i>0</i>	<i>4</i>	
SEVEN RIVERS COMM HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>35</i>				<i>1</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>113</i>				<i>2</i>	<i>105</i>	<i>1</i>	<i>1</i>	<i>0</i>	<i>4</i>	
SHANDS AT JACKSONVILLE												
<i>Subtotal:</i>	<i>Patients:</i>	<i>328</i>				<i>31</i>	<i>268</i>	<i>1</i>	<i>9</i>	<i>0</i>	<i>19</i>	
SHANDS AT LAKE SHORE HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>59</i>				<i>10</i>	<i>42</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>6</i>	
SHANDS HOSP AT THE UNIV OF FLA												
<i>Subtotal:</i>	<i>Patients:</i>	<i>232</i>				<i>8</i>	<i>206</i>	<i>0</i>	<i>3</i>	<i>0</i>	<i>15</i>	
SOUTH FLA BAPTIST HOSP												
<i>Subtotal:</i>	<i>Patients:</i>	<i>48</i>				<i>7</i>	<i>39</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:
SOUTH LAKE MEMORIAL HOSP												
<i>Subtotal:</i>	<i>Patients:</i>	<i>56</i>				<i>0</i>	<i>53</i>	<i>0</i>	<i>2</i>	<i>0</i>	<i>1</i>	
SOUTH MIAMI HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>328</i>				<i>1</i>	<i>312</i>	<i>2</i>	<i>2</i>	<i>0</i>	<i>11</i>	
SPECIAL DELIVERY CHILDBRTH SER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>2</i>				<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>2</i>	
SPRING HILL REGIONAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>147</i>				<i>6</i>	<i>136</i>	<i>0</i>	<i>0</i>	<i>1</i>	<i>4</i>	
ST JOSEPH WOMEN HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>671</i>				<i>23</i>	<i>622</i>	<i>5</i>	<i>1</i>	<i>1</i>	<i>19</i>	
ST LUCIE MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>96</i>				<i>5</i>	<i>91</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
ST LUKES HOSPITAL-FAMILY BIRTH												
<i>Subtotal:</i>	<i>Patients:</i>	<i>120</i>				<i>4</i>	<i>112</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>3</i>	
ST MARY'S HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>335</i>				<i>16</i>	<i>290</i>	<i>0</i>	<i>2</i>	<i>0</i>	<i>27</i>	
ST PETE GENERAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>125</i>				<i>0</i>	<i>125</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>187</i>				<i>11</i>	<i>173</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>3</i>	
TALLAHASSEE MEM REG MED CTR												
<i>Subtotal:</i>	<i>Patients:</i>	<i>347</i>				<i>4</i>	<i>318</i>	<i>15</i>	<i>1</i>	<i>1</i>	<i>8</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:
TAMPA GENERAL HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>460</i>				<i>2</i>	<i>421</i>	<i>0</i>	<i>13</i>	<i>1</i>	<i>23</i>	
THE BIRTH COTTAGE												
<i>Subtotal:</i>	<i>Patients:</i>	<i>8</i>				<i>1</i>	<i>6</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>1</i>	
THE BIRTH PLACE/JENNIE JOSEPH												
<i>Subtotal:</i>	<i>Patients:</i>	<i>12</i>				<i>2</i>	<i>7</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>6</i>				<i>4</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>2</i>	
THE FAMILY BIRTH CTR@ FT MYERS												
<i>Subtotal:</i>	<i>Patients:</i>	<i>7</i>				<i>1</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>6</i>	
THE WOMEN'S CTR MART CO												
<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>	
UNIV OF MIAMI SCHOOL OF MED												
<i>Subtotal:</i>	<i>Patients:</i>	<i>3</i>				<i>0</i>	<i>3</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
UNIVERSITY COMMUNITY HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>216</i>				<i>4</i>	<i>202</i>	<i>0</i>	<i>2</i>	<i>0</i>	<i>8</i>	
USAF 6TH MEDICAL GRP/SGSC												
<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>	
USAF HOSP EGLIN												
<i>Subtotal:</i>	<i>Patients:</i>	<i>67</i>				<i>1</i>	<i>63</i>	<i>0</i>	<i>2</i>	<i>1</i>	<i>0</i>	
USN HOSP JAX- NAS												
<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:
USN HOSPITAL PENSACOLA												
<i>Subtotal:</i>	<i>Patients:</i>	<i>51</i>				<i>1</i>	<i>50</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
WELLINGTON REG MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>231</i>				<i>1</i>	<i>230</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
WEST BOCA MEDICAL CENTER												
<i>Subtotal:</i>	<i>Patients:</i>	<i>207</i>				<i>0</i>	<i>186</i>	<i>2</i>	<i>8</i>	<i>0</i>	<i>11</i>	
WEST FLORIDA HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>44</i>				<i>1</i>	<i>43</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
WINNIE PALMER HOSPITAL												
<i>Subtotal:</i>	<i>Patients:</i>	<i>1,157</i>				<i>6</i>	<i>1,147</i>	<i>0</i>	<i>0</i>	<i>1</i>	<i>3</i>	
WINTER PARK BIRTHING COTTAGE												
<i>Subtotal:</i>	<i>Patients:</i>	<i>9</i>				<i>6</i>	<i>3</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	
WINTER PARK MEMORIAL HOSP												
<i>Subtotal:</i>	<i>Patients:</i>	<i>168</i>				<i>0</i>	<i>167</i>	<i>0</i>	<i>1</i>	<i>0</i>	<i>0</i>	
WUESTHOFF HOSPITAL - MELBOURNE												
<i>Subtotal:</i>	<i>Patients:</i>	<i>46</i>				<i>8</i>	<i>36</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>2</i>	
WUESTHOFF HOSPITAL-ROCKLEDGE												
<i>Subtotal:</i>	<i>Patients:</i>	<i>42</i>				<i>0</i>	<i>37</i>	<i>0</i>	<i>2</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:

Totals:

Not Reported: 659
 Pass: 18,600
 Passed with Risk Factor: 90
 Referred: 191
 Hearing Loss: 11
 Not Screened: 557
 Total: 20,108

Not Screened Reason Counts:

1. Other: 111
2. Transferred: 13
3. Not yet screened NICU: 315
4. Missing Result: 44
5. Parent Refused: 44
6. Previously screened: 22
7. Missed: 8

Risk Factor Counts:

1. Low Birth Weight: 80
2. PPHN: 12
3. Family History: 82
4. ECMO: 1
5. Hyperbilirubinemia: 4