

# Hearing Report

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

**Report Criteria:**

**Determination**

**Status**

**Group By**

Hospital

**Diagnosis**

**Center**

**Report Format** Current Status

**Diagnosis Type**

**Report Type** Summary

Date Printed: 1/8/2008

| 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: 5</i>   |      |      |              | 2            | 2    | 0                       | 0        | 0            | 1            |                      |
| <b>A BIRTH CENTER</b>                 |              |                      |      |      |              |              |      |                         |          |              |              |                      |
| <i>Subtotal:</i>                      |              | <i>Patients: 6</i>   |      |      |              | 0            | 1    | 0                       | 0        | 0            | 5            |                      |
| <b>A MOTHER'S NATURE HOME BIRTHS</b>  |              |                      |      |      |              |              |      |                         |          |              |              |                      |
| <i>Subtotal:</i>                      |              | <i>Patients: 1</i>   |      |      |              | 1            | 0    | 0                       | 0        | 0            | 0            |                      |
| <b>A WOMAN'S TOUCH IN HEALTH CARE</b> |              |                      |      |      |              |              |      |                         |          |              |              |                      |
| <i>Subtotal:</i>                      |              | <i>Patients: 4</i>   |      |      |              | 0            | 0    | 0                       | 0        | 0            | 4            |                      |
| <b>ALL CHILDREN'S HOSPITAL</b>        |              |                      |      |      |              |              |      |                         |          |              |              |                      |
| <i>Subtotal:</i>                      |              | <i>Patients: 40</i>  |      |      |              | 7            | 28   | 0                       | 0        | 0            | 5            |                      |
| <b>ALL NATURAL BIRTH CENTER</b>       |              |                      |      |      |              |              |      |                         |          |              |              |                      |
| <i>Subtotal:</i>                      |              | <i>Patients: 1</i>   |      |      |              | 1            | 0    | 0                       | 0        | 0            | 0            |                      |
| <b>ARNOLD PALMER HOSP</b>             |              |                      |      |      |              |              |      |                         |          |              |              |                      |
| <i>Subtotal:</i>                      |              | <i>Patients: 12</i>  |      |      |              | 1            | 11   | 0                       | 0        | 0            | 0            |                      |
| <b>BAPTIST HOSP OF MIAMI</b>          |              |                      |      |      |              |              |      |                         |          |              |              |                      |
| <i>Subtotal:</i>                      |              | <i>Patients: 390</i> |      |      |              | 2            | 360  | 0                       | 0        | 0            | 28           |                      |

| 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: |
|---|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| <b>BAPTIST HOSPITAL PENSACOLA</b>         |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>91</i>    |      |      |              | <i>0</i>     | <i>89</i>  | <i>0</i>                | <i>2</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>BAPTIST MED CTR - NASSAU</b>           |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>40</i>    |      |      |              | <i>0</i>     | <i>40</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>BAPTIST MED CTR OF JAX</b>             |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>198</i>   |      |      |              | <i>0</i>     | <i>193</i> | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>5</i>     |                      |
| <b>BAPTIST MEDICAL CTR SOUTH</b>          |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>134</i>   |      |      |              | <i>3</i>     | <i>129</i> | <i>0</i>                | <i>2</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>BAY MEDICAL CENTER</b>                 |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>47</i>    |      |      |              | <i>1</i>     | <i>44</i>  | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>BAYFRONT MEDICAL CENTER</b>            |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>186</i>   |      |      |              | <i>31</i>    | <i>141</i> | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>13</i>    |                      |
| <b>BAYFRONT MEDICAL CENTER LABORATORY</b> |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>68</i>    |      |      |              | <i>17</i>    | <i>48</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>3</i>     |                      |
| <b>BEACHES MEDICAL CENTER</b>             |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>106</i>   |      |      |              | <i>11</i>    | <i>93</i>  | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>BETHESDA MEMORIAL HOSPITAL</b>         |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>276</i>   |      |      |              | <i>1</i>     | <i>267</i> | <i>2</i>                | <i>1</i> | <i>0</i>     | <i>5</i>     |                      |
| <b>BIRTH CENTER OF GAINESVILLE</b>        |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>3</i>     |      |      |              | <i>1</i>     | <i>0</i>   | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>BOCA RATON COMM HOSP</b>               |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>147</i>   |      |      |              | <i>3</i>     | <i>142</i> | <i>2</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: |
|-------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| <b>BRANDON REGIONAL HOSPITAL</b>    |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>301</i>   |      |      |              | <i>1</i>     | <i>295</i> | <i>3</i>                | <i>1</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>BROWARD GENERAL MED CTR</b>      |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>363</i>   |      |      |              | <i>2</i>     | <i>344</i> | <i>2</i>                | <i>0</i> | <i>0</i>     | <i>15</i>    |                      |
| <b>CAPE CANAVERAL HOSPITAL</b>      |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>48</i>    |      |      |              | <i>4</i>     | <i>43</i>  | <i>1</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>CAPE CORAL HOSPITAL</b>          |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>141</i>   |      |      |              | <i>0</i>     | <i>126</i> | <i>1</i>                | <i>9</i> | <i>0</i>     | <i>5</i>     |                      |
| <b>CAPITAL REG. MEDICAL CENTER</b>  |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>71</i>    |      |      |              | <i>6</i>     | <i>57</i>  | <i>0</i>                | <i>3</i> | <i>0</i>     | <i>5</i>     |                      |
| <b>CENTRAL FLA REG HOSP</b>         |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>70</i>    |      |      |              | <i>0</i>     | <i>70</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>CITRUS MEMORIAL HOSPITAL</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>57</i>    |      |      |              | <i>1</i>     | <i>56</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>COMM HOSP OF NPR/BIRTHPLACE</b>  |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>63</i>    |      |      |              | <i>3</i>     | <i>59</i>  | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>CORAL SPRINGS MEDICAL CENTER</b> |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>194</i>   |      |      |              | <i>1</i>     | <i>190</i> | <i>1</i>                | <i>0</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>COUNTRYSIDE BIRTHING PLACE</b>   |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>3</i>     |      |      |              | <i>3</i>     | <i>0</i>   | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>DESOTO MEMORIAL HOSP</b>         |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>59</i>    |      |      |              | <i>0</i>     | <i>55</i>  | <i>2</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: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| <b>FLA WEST COAST BIRTHING CTR</b>    |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <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>     |                      |
| <b>FLAGLER HOSPITAL</b>               |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>101</i>   |      |      |              | <i>0</i>     | <i>100</i> | <i>1</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>FLORIDA HOSP CELEBRATION HLTH</b>  |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>157</i>   |      |      |              | <i>0</i>     | <i>156</i> | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>FLORIDA HOSPITAL - ALTAMONTE</b>   |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>75</i>    |      |      |              | <i>0</i>     | <i>73</i>  | <i>1</i>                | <i>1</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>FLORIDA HOSPITAL - DELAND</b>      |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>89</i>    |      |      |              | <i>2</i>     | <i>85</i>  | <i>0</i>                | <i>2</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>FLORIDA HOSPITAL - KISSIMMEE</b>   |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <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>     |                      |
| <b>FLORIDA HOSPITAL - WATERMAN</b>    |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>96</i>    |      |      |              | <i>3</i>     | <i>87</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>6</i>     |                      |
| <b>FLORIDA HOSPITAL HEARTLAND</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>89</i>    |      |      |              | <i>1</i>     | <i>84</i>  | <i>0</i>                | <i>4</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>FLORIDA HOSPITAL ORLANDO - LAB</b> |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>286</i>   |      |      |              | <i>0</i>     | <i>275</i> | <i>0</i>                | <i>6</i> | <i>0</i>     | <i>5</i>     |                      |
| <b>FLORIDA HOSPITAL ORMOND</b>        |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>88</i>    |      |      |              | <i>0</i>     | <i>86</i>  | <i>0</i>                | <i>2</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>FLORIDA HOSPITAL-ZEPHYRHILLS</b>   |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>65</i>    |      |      |              | <i>5</i>     | <i>55</i>  | <i>0</i>                | <i>4</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: |
|-------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|-----------|--------------|--------------|----------------------|
| <b>FRUITFUL VINE MIDWIFERY SERV</b> |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>13</i>    |      |      |              | <i>2</i>     | <i>2</i>   | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>9</i>     |                      |
| <b>FT WALTON BCH MED CTR</b>        |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>121</i>   |      |      |              | <i>5</i>     | <i>116</i> | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>GINA GELORMINI</b>               |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <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>     |                      |
| <b>GLADES GENERAL HOSPITAL</b>      |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>44</i>    |      |      |              | <i>5</i>     | <i>37</i>  | <i>0</i>                | <i>2</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>GOOD SAMARITAN HOSP</b>          |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>58</i>    |      |      |              | <i>2</i>     | <i>53</i>  | <i>0</i>                | <i>3</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>GULF COAST HOSP - FT MYERS</b>   |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>227</i>   |      |      |              | <i>0</i>     | <i>217</i> | <i>1</i>                | <i>9</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>GULF COAST MED CTR</b>           |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>191</i>   |      |      |              | <i>0</i>     | <i>180</i> | <i>0</i>                | <i>4</i>  | <i>0</i>     | <i>7</i>     |                      |
| <b>HALIFAX MEDICAL CENTER</b>       |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>190</i>   |      |      |              | <i>2</i>     | <i>184</i> | <i>2</i>                | <i>2</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>HEALTH CENTRAL HOSPITAL</b>      |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>82</i>    |      |      |              | <i>2</i>     | <i>78</i>  | <i>0</i>                | <i>1</i>  | <i>0</i>     | <i>1</i>     |                      |
| <b>HEALTH PARK MEDICAL CTR/LEE</b>  |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>317</i>   |      |      |              | <i>1</i>     | <i>292</i> | <i>2</i>                | <i>11</i> | <i>0</i>     | <i>11</i>    |                      |
| <b>HEART 2 HEART BIRTH CENTER</b>   |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>8</i>     |      |      |              | <i>2</i>     | <i>0</i>   | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>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: |
|--------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| <b>HEART OF FLORIDA HOSP</b>         |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>105</i>   |      |      |              | <i>4</i>     | <i>93</i>  | <i>0</i>                | <i>7</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>HELEN ELLIS MEMORIAL HOSPITAL</b> |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>64</i>    |      |      |              | <i>6</i>     | <i>56</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>HIALEAH HOSPITAL</b>              |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>155</i>   |      |      |              | <i>0</i>     | <i>153</i> | <i>1</i>                | <i>0</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>HIGHLANDS REG MEDICAL CENTER</b>  |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>37</i>    |      |      |              | <i>1</i>     | <i>26</i>  | <i>0</i>                | <i>2</i> | <i>0</i>     | <i>8</i>     |                      |
| <b>HOLLYWOOD BIRTH CENTER, INC</b>   |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>8</i>     |      |      |              | <i>6</i>     | <i>1</i>   | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>HOLMES REG MED CTR</b>            |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>243</i>   |      |      |              | <i>1</i>     | <i>241</i> | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>HOLY CROSS HOSPITAL</b>           |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>134</i>   |      |      |              | <i>19</i>    | <i>108</i> | <i>1</i>                | <i>1</i> | <i>0</i>     | <i>5</i>     |                      |
| <b>HOME BIRTH</b>                    |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>31</i>    |      |      |              | <i>19</i>    | <i>7</i>   | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>5</i>     |                      |
| <b>HOMESTEAD HOSPITAL</b>            |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>123</i>   |      |      |              | <i>1</i>     | <i>122</i> | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>INDIAN RIVER MEMORIAL HOSP</b>    |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>135</i>   |      |      |              | <i>1</i>     | <i>131</i> | <i>0</i>                | <i>1</i> | <i>1</i>     | <i>1</i>     |                      |
| <b>JACKSON HOSPITAL - MARIANNA</b>   |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>60</i>    |      |      |              | <i>4</i>     | <i>56</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: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|-----------|--------------|--------------|----------------------|
| <b>JACKSON MEMORIAL HOSPITAL</b>      |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>535</i>   |      |      |              | <i>32</i>    | <i>479</i> | <i>2</i>                | <i>6</i>  | <i>0</i>     | <i>16</i>    |                      |
| <b>JACKSON NORTH MEDICAL CENTER</b>   |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>144</i>   |      |      |              | <i>14</i>    | <i>117</i> | <i>1</i>                | <i>9</i>  | <i>0</i>     | <i>3</i>     |                      |
| <b>JACKSON SOUTH COMM HOSPITAL</b>    |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>121</i>   |      |      |              | <i>7</i>     | <i>113</i> | <i>1</i>                | <i>0</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>JOE DIMAGGIO CHILDRENS HOSP</b>    |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>42</i>    |      |      |              | <i>5</i>     | <i>26</i>  | <i>1</i>                | <i>2</i>  | <i>0</i>     | <i>8</i>     |                      |
| <b>JUPITER MEDICAL CENTER</b>         |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>91</i>    |      |      |              | <i>0</i>     | <i>88</i>  | <i>1</i>                | <i>2</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>KENDALL MEDICAL CENTER</b>         |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>204</i>   |      |      |              | <i>1</i>     | <i>201</i> | <i>0</i>                | <i>2</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>LABOR OF LOVE - DUNEDIN</b>        |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <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>     |                      |
| <b>LABOR OF LOVE BIRTH CTR (LUTZ)</b> |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>7</i>     |      |      |              | <i>3</i>     | <i>1</i>   | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>3</i>     |                      |
| <b>LABOR OF LOVE BIRTH CTR LAKE</b>   |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>3</i>     |      |      |              | <i>1</i>     | <i>0</i>   | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>2</i>     |                      |
| <b>LAKELAND REG MEDICAL CENTER</b>    |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>345</i>   |      |      |              | <i>0</i>     | <i>326</i> | <i>0</i>                | <i>16</i> | <i>0</i>     | <i>3</i>     |                      |
| <b>LAKWOOD RANCH MEDICAL CENTER</b>   |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>89</i>    |      |      |              | <i>5</i>     | <i>79</i>  | <i>2</i>                | <i>0</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: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|-----------|--------------|--------------|----------------------|
| <b>LAWNWOOD REGIONAL MEDICAL CTR</b>  |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>121</i>   |      |      |              | <i>1</i>     | <i>114</i> | <i>0</i>                | <i>5</i>  | <i>0</i>     | <i>1</i>     |                      |
| <b>LEESBURG REGIONAL MEDICAL CTR</b>  |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>123</i>   |      |      |              | <i>0</i>     | <i>119</i> | <i>0</i>                | <i>3</i>  | <i>0</i>     | <i>1</i>     |                      |
| <b>LOWER KEYS MEDICAL CTR</b>         |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>40</i>    |      |      |              | <i>1</i>     | <i>39</i>  | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>MAMA'S CRADLE</b>                  |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <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>     |                      |
| <b>MANATEE MEMORIAL HOSPITAL</b>      |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>216</i>   |      |      |              | <i>3</i>     | <i>194</i> | <i>0</i>                | <i>13</i> | <i>2</i>     | <i>4</i>     |                      |
| <b>MARTIN MEMORIAL MEDICAL CENTER</b> |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>213</i>   |      |      |              | <i>2</i>     | <i>208</i> | <i>1</i>                | <i>1</i>  | <i>0</i>     | <i>1</i>     |                      |
| <b>MEASE COUNTRYSIDE HOSPITAL</b>     |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>182</i>   |      |      |              | <i>0</i>     | <i>176</i> | <i>2</i>                | <i>1</i>  | <i>0</i>     | <i>3</i>     |                      |
| <b>MEMORIAL HOSPITAL JACKSONVILLE</b> |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>245</i>   |      |      |              | <i>16</i>    | <i>216</i> | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>13</i>    |                      |
| <b>MEMORIAL HOSPITAL MIRAMAR</b>      |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>227</i>   |      |      |              | <i>0</i>     | <i>224</i> | <i>0</i>                | <i>2</i>  | <i>0</i>     | <i>1</i>     |                      |
| <b>MEMORIAL HOSPITAL WEST</b>         |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>408</i>   |      |      |              | <i>1</i>     | <i>401</i> | <i>0</i>                | <i>3</i>  | <i>0</i>     | <i>3</i>     |                      |
| <b>MEMORIAL REG HOSP - HOLLYWOOD</b>  |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>345</i>   |      |      |              | <i>9</i>     | <i>315</i> | <i>0</i>                | <i>11</i> | <i>1</i>     | <i>9</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: |
|--------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| <b>MERCY HOSPITAL</b>                |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>122</i>   |      |      |              | <i>11</i>    | <i>101</i> | <i>1</i>                | <i>1</i> | <i>0</i>     | <i>8</i>     |                      |
| <b>MIAMI BEACH MATERNITY CTR</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>30</i>    |      |      |              | <i>2</i>     | <i>25</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>3</i>     |                      |
| <b>MIAMI CHILDREN'S HOSPITAL</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>23</i>    |      |      |              | <i>4</i>     | <i>4</i>   | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>15</i>    |                      |
| <b>MORTON F PLANT HOSP</b>           |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>307</i>   |      |      |              | <i>0</i>     | <i>301</i> | <i>2</i>                | <i>3</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>MT SINAI MED CTR</b>              |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>157</i>   |      |      |              | <i>1</i>     | <i>153</i> | <i>0</i>                | <i>3</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>MUNROE REG MEDICAL CENTER</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>250</i>   |      |      |              | <i>2</i>     | <i>238</i> | <i>8</i>                | <i>0</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>NATURAL BIRTH CENTER</b>          |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <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>     |                      |
| <b>NO HOSPITAL</b>                   |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>45</i>    |      |      |              | <i>15</i>    | <i>25</i>  | <i>1</i>                | <i>1</i> | <i>0</i>     | <i>3</i>     |                      |
| <b>NORTH COLLIER HOSPITAL</b>        |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>341</i>   |      |      |              | <i>2</i>     | <i>336</i> | <i>0</i>                | <i>0</i> | <i>1</i>     | <i>2</i>     |                      |
| <b>NORTH FLORIDA REG MED CTR</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>207</i>   |      |      |              | <i>0</i>     | <i>206</i> | <i>1</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>NORTH OKALOOSA MEDICAL CENTER</b> |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>44</i>    |      |      |              | <i>10</i>    | <i>17</i>  | <i>0</i>                | <i>2</i> | <i>0</i>     | <i>15</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: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| <b>NORTH RIDGE HOSPITAL/MATERNITY</b> |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <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>     |                      |
| <b>NORTH SHORE MEDICAL CENTER</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>201</i>   |      |      |              | <i>0</i>     | <i>198</i> | <i>2</i>                | <i>0</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>NORTHWEST MEDICAL CENTER</b>       |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>166</i>   |      |      |              | <i>6</i>     | <i>151</i> | <i>0</i>                | <i>2</i> | <i>0</i>     | <i>7</i>     |                      |
| <b>ORANGE PARK MEDICAL CENTER</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>176</i>   |      |      |              | <i>2</i>     | <i>164</i> | <i>1</i>                | <i>0</i> | <i>0</i>     | <i>9</i>     |                      |
| <b>ORLANDO REG SOUTH SEMINOLE</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>151</i>   |      |      |              | <i>2</i>     | <i>147</i> | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>OSCEOLA REGIONAL MED CTR</b>       |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>207</i>   |      |      |              | <i>13</i>    | <i>191</i> | <i>0</i>                | <i>2</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>OUT-OF-STATE HOSPITAL</b>          |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>9</i>     |      |      |              | <i>6</i>     | <i>2</i>   | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>PALMETTO BAY MATERNITY CENTER</b>  |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <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>     |                      |
| <b>PALMETTO GENERAL HOSPITAL</b>      |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>167</i>   |      |      |              | <i>0</i>     | <i>158</i> | <i>1</i>                | <i>1</i> | <i>0</i>     | <i>7</i>     |                      |
| <b>PALMS WEST HOSPITAL</b>            |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>86</i>    |      |      |              | <i>0</i>     | <i>82</i>  | <i>0</i>                | <i>4</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>PARRISH MEDICAL CENTER</b>         |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>71</i>    |      |      |              | <i>0</i>     | <i>71</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: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|-----------|--------------|--------------|----------------------|
| <b>PASCO REGIONAL MEDICAL CTR</b>     |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>21</i>    |      |      |              | <i>0</i>     | <i>19</i>  | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>2</i>     |                      |
| <b>PEACE RIVER REGIONAL MED. CTR.</b> |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>136</i>   |      |      |              | <i>8</i>     | <i>118</i> | <i>2</i>                | <i>5</i>  | <i>0</i>     | <i>3</i>     |                      |
| <b>PHYSICIAN'S REG MEDICAL CTR</b>    |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>28</i>    |      |      |              | <i>1</i>     | <i>27</i>  | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>PLANTATION GENERAL HOSPITAL</b>    |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>300</i>   |      |      |              | <i>0</i>     | <i>273</i> | <i>8</i>                | <i>11</i> | <i>0</i>     | <i>8</i>     |                      |
| <b>PUTNAM COMMUNITY MED CTR</b>       |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>37</i>    |      |      |              | <i>9</i>     | <i>27</i>  | <i>0</i>                | <i>1</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>REGENCY MEDICAL CTR</b>            |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>185</i>   |      |      |              | <i>0</i>     | <i>184</i> | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>1</i>     |                      |
| <b>ROSEMARY BIRTHING HOME INC.</b>    |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <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>     |                      |
| <b>SACRED HEART EMERALD COAST</b>     |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>45</i>    |      |      |              | <i>0</i>     | <i>44</i>  | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>1</i>     |                      |
| <b>SACRED HEART HOSPITAL</b>          |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>357</i>   |      |      |              | <i>0</i>     | <i>346</i> | <i>6</i>                | <i>1</i>  | <i>0</i>     | <i>4</i>     |                      |
| <b>SANPERE ,ALICE, LM</b>             |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <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>     |                      |
| <b>SANTA ROSA MEDICAL CTR</b>         |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>33</i>    |      |      |              | <i>0</i>     | <i>31</i>  | <i>1</i>                | <i>1</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: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|-----------|--------------|--------------|----------------------|
| <b>SARASOTA MEMORIAL HOSPITAL</b>     |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>305</i>   |      |      |              | <i>0</i>     | <i>297</i> | <i>8</i>                | <i>0</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>SERRELL KATHY, MWF</b>             |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <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>     |                      |
| <b>SEVEN RIVERS COMM HOSPITAL</b>     |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>31</i>    |      |      |              | <i>1</i>     | <i>30</i>  | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>SHANDS AT AGH</b>                  |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>93</i>    |      |      |              | <i>6</i>     | <i>75</i>  | <i>0</i>                | <i>9</i>  | <i>0</i>     | <i>3</i>     |                      |
| <b>SHANDS AT JACKSONVILLE</b>         |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>336</i>   |      |      |              | <i>11</i>    | <i>290</i> | <i>1</i>                | <i>13</i> | <i>0</i>     | <i>21</i>    |                      |
| <b>SHANDS AT LAKE SHORE HOSPITAL</b>  |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>56</i>    |      |      |              | <i>4</i>     | <i>50</i>  | <i>0</i>                | <i>2</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>SHANDS HOSP AT THE UNIV OF FLA</b> |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>269</i>   |      |      |              | <i>5</i>     | <i>239</i> | <i>5</i>                | <i>11</i> | <i>0</i>     | <i>9</i>     |                      |
| <b>SOUTH FLA BAPTIST HOSP</b>         |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>42</i>    |      |      |              | <i>2</i>     | <i>39</i>  | <i>0</i>                | <i>1</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>SOUTH LAKE MEMORIAL HOSP</b>       |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>59</i>    |      |      |              | <i>0</i>     | <i>54</i>  | <i>0</i>                | <i>2</i>  | <i>0</i>     | <i>3</i>     |                      |
| <b>SOUTH MIAMI HOSPITAL</b>           |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>374</i>   |      |      |              | <i>3</i>     | <i>352</i> | <i>4</i>                | <i>1</i>  | <i>0</i>     | <i>14</i>    |                      |
| <b>SPRING HILL REGIONAL HOSPITAL</b>  |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>174</i>   |      |      |              | <i>10</i>    | <i>138</i> | <i>0</i>                | <i>3</i>  | <i>0</i>     | <i>23</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: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| <b>ST JOSEPH WOMEN HOSPITAL</b>       |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>634</i>   |      |      |              | <i>1</i>     | <i>614</i> | <i>3</i>                | <i>4</i> | <i>0</i>     | <i>12</i>    |                      |
| <b>ST LUCIE MEDICAL CENTER</b>        |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>82</i>    |      |      |              | <i>0</i>     | <i>81</i>  | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>ST LUKES HOSPITAL-FAMILY BIRTH</b> |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>125</i>   |      |      |              | <i>5</i>     | <i>112</i> | <i>1</i>                | <i>0</i> | <i>0</i>     | <i>7</i>     |                      |
| <b>ST MARY'S HOSPITAL</b>             |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>375</i>   |      |      |              | <i>16</i>    | <i>326</i> | <i>0</i>                | <i>2</i> | <i>0</i>     | <i>31</i>    |                      |
| <b>ST PETE GENERAL HOSPITAL</b>       |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>136</i>   |      |      |              | <i>0</i>     | <i>136</i> | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>ST VINCENT'S MEDICAL CENTER</b>    |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>176</i>   |      |      |              | <i>5</i>     | <i>164</i> | <i>1</i>                | <i>1</i> | <i>0</i>     | <i>5</i>     |                      |
| <b>TALLAHASSEE MEM REG MED CTR</b>    |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>377</i>   |      |      |              | <i>0</i>     | <i>368</i> | <i>2</i>                | <i>0</i> | <i>0</i>     | <i>7</i>     |                      |
| <b>TAMPA GENERAL HOSPITAL</b>         |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>512</i>   |      |      |              | <i>4</i>     | <i>465</i> | <i>0</i>                | <i>8</i> | <i>0</i>     | <i>35</i>    |                      |
| <b>THE BIRTH CENTER</b>               |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>5</i>     |      |      |              | <i>1</i>     | <i>2</i>   | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>THE BIRTH COTTAGE</b>              |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <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>     |                      |
| <b>THE BIRTH PLACE/JENNIE JOSEPH</b>  |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <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>     |                      |

| 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: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|--------------|-------------------------|----------|--------------|--------------|----------------------|
| <b>THE FAMILY BIRTH CTR OF NAPLES</b> |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>5</i>     |      |      |              | <i>2</i>     | <i>0</i>     | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>3</i>     |                      |
| <b>UNIV OF MIAMI SCHOOL OF MED</b>    |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <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>     |                      |
| <b>UNIVERSITY COMMUNITY HOSPITAL</b>  |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>292</i>   |      |      |              | <i>4</i>     | <i>266</i>   | <i>0</i>                | <i>2</i> | <i>0</i>     | <i>20</i>    |                      |
| <b>USAF 6TH MEDICAL GRP/SGSC</b>      |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <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>     |                      |
| <b>USAF HOSP EGLIN</b>                |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>90</i>    |      |      |              | <i>0</i>     | <i>89</i>    | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>USN HOSP JAX- NAS</b>              |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <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>     |                      |
| <b>USN HOSPITAL PENSACOLA</b>         |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <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>     |                      |
| <b>WELLINGTON REG MEDICAL CENTER</b>  |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>205</i>   |      |      |              | <i>4</i>     | <i>198</i>   | <i>0</i>                | <i>2</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>WEST BOCA MEDICAL CENTER</b>       |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>176</i>   |      |      |              | <i>0</i>     | <i>149</i>   | <i>1</i>                | <i>8</i> | <i>0</i>     | <i>18</i>    |                      |
| <b>WEST FLORIDA HOSPITAL</b>          |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>38</i>    |      |      |              | <i>0</i>     | <i>36</i>    | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>WINNIE PALMER HOSPITAL</b>         |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>1,209</i> |      |      |              | <i>3</i>     | <i>1,184</i> | <i>1</i>                | <i>7</i> | <i>0</i>     | <i>14</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: |
|------------------|--------------|--------------|------|------|--------------|--------------|------|-------------------------|----------|--------------|--------------|----------------------|
|------------------|--------------|--------------|------|------|--------------|--------------|------|-------------------------|----------|--------------|--------------|----------------------|

**WINTER PARK BIRTHING COTTAGE**

*Subtotal: Patients: 23*      7      15      0      0      0      1

**WINTER PARK MEMORIAL HOSP**

*Subtotal: Patients: 158*      0      158      0      0      0      0

**WUESTHOFF HOSPITAL - MELBOURNE**

*Subtotal: Patients: 45*      2      41      0      2      0      0

**WUESTHOFF HOSPITAL-ROCKLEDGE**

*Subtotal: Patients: 46*      2      40      0      0      0      4

**Totals:**

Not Reported: 494  
 Pass: 19,177  
 Passed with Risk Factor: 95  
 Referred: 282  
 Hearing Loss: 5  
 Not Screened: 593  
 Total: 20,646

**Not Screened Reason Counts:**

1. Not yet screened NICU: 372
2. Other: 101
3. Transferred: 22
4. Parent Refused: 43
5. Previously screened: 16
6. Missing Result: 35
7. Missed: 4

**Risk Factor Counts:**

1. Low Birth Weight: 243
2. Family History: 84
3. PPHN: 7
4. Hyperbilirubinemia: 6
5. ECMO: 2