

# Hearing Report

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

**Report Criteria:**

**Determination**

**Status**

**Group By**

Hospital

**Diagnosis**

**Center**

**Report Format** Current Status

**Diagnosis Type**

**Report Type**

Summary

Date Printed: 1/7/2009

| 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: 18</i> |      |      |              | 5            | 11   | 0                       | 0        | 0            | 2            |                      |
| <b>A BIRTH CENTER</b>                |              |                     |      |      |              |              |      |                         |          |              |              |                      |
| <i>Subtotal:</i>                     |              | <i>Patients: 3</i>  |      |      |              | 1            | 0    | 0                       | 0        | 0            | 2            |                      |
| <b>A LOVING START</b>                |              |                     |      |      |              |              |      |                         |          |              |              |                      |
| <i>Subtotal:</i>                     |              | <i>Patients: 3</i>  |      |      |              | 1            | 0    | 0                       | 0        | 0            | 2            |                      |
| <b>A MOTHER'S NATURE HOME BIRTHS</b> |              |                     |      |      |              |              |      |                         |          |              |              |                      |
| <i>Subtotal:</i>                     |              | <i>Patients: 2</i>  |      |      |              | 2            | 0    | 0                       | 0        | 0            | 0            |                      |
| <b>ALL BRIGHT BEGINNINGS</b>         |              |                     |      |      |              |              |      |                         |          |              |              |                      |
| <i>Subtotal:</i>                     |              | <i>Patients: 2</i>  |      |      |              | 0            | 0    | 0                       | 1        | 0            | 1            |                      |
| <b>ALL CHILDREN'S HOSPITAL</b>       |              |                     |      |      |              |              |      |                         |          |              |              |                      |
| <i>Subtotal:</i>                     |              | <i>Patients: 45</i> |      |      |              | 0            | 26   | 1                       | 1        | 1            | 16           |                      |
| <b>ARNOLD PALMER HOSP</b>            |              |                     |      |      |              |              |      |                         |          |              |              |                      |
| <i>Subtotal:</i>                     |              | <i>Patients: 1</i>  |      |      |              | 0            | 1    | 0                       | 0        | 0            | 0            |                      |
| <b>BABY LOVE BIRTH CENTER</b>        |              |                     |      |      |              |              |      |                         |          |              |              |                      |
| <i>Subtotal:</i>                     |              | <i>Patients: 1</i>  |      |      |              | 0            | 0    | 0                       | 0        | 0            | 1            |                      |

| 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 HOSP OF MIAMI</b>              |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>399</i>   |      |      |              | <i>4</i>     | <i>368</i> | <i>2</i>                | <i>2</i> | <i>0</i>     | <i>23</i>    |                      |
| <b>BAPTIST HOSPITAL PENSACOLA</b>         |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>80</i>    |      |      |              | <i>4</i>     | <i>69</i>  | <i>0</i>                | <i>6</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>BAPTIST MED CTR - NASSAU</b>           |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>36</i>    |      |      |              | <i>0</i>     | <i>33</i>  | <i>0</i>                | <i>3</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>BAPTIST MED CTR OF JAX</b>             |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>239</i>   |      |      |              | <i>0</i>     | <i>224</i> | <i>0</i>                | <i>3</i> | <i>0</i>     | <i>12</i>    |                      |
| <b>BAPTIST MEDICAL CTR SOUTH</b>          |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>125</i>   |      |      |              | <i>1</i>     | <i>122</i> | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>BARTOW REGIONAL MEDICAL 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>BAY MEDICAL CENTER</b>                 |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>47</i>    |      |      |              | <i>1</i>     | <i>45</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>BAYFRONT MEDICAL CENTER</b>            |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>274</i>   |      |      |              | <i>0</i>     | <i>262</i> | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>11</i>    |                      |
| <b>BAYFRONT MEDICAL CENTER LABORATORY</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>BEACHES MEDICAL CENTER</b>             |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>104</i>   |      |      |              | <i>5</i>     | <i>99</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>BERT-FISH MED CTR INC</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>     |                      |

| 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>BETHESDA MEMORIAL HOSPITAL</b>    |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>275</i>   |      |      |              | <i>0</i>     | <i>266</i> | <i>3</i>                | <i>2</i> | <i>1</i>     | <i>3</i>     |                      |
| <b>BIRTH CENTER OF GAINESVILLE</b>   |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>5</i>     |      |      |              | <i>3</i>     | <i>0</i>   | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>BIRTHWAYS FAMILY BIRTH CENTER</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>BLESSED BE MIDWIFERY</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>BOCA RATON COMM HOSP</b>          |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>151</i>   |      |      |              | <i>0</i>     | <i>150</i> | <i>1</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>BRANDON REGIONAL HOSPITAL</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>311</i>   |      |      |              | <i>1</i>     | <i>303</i> | <i>4</i>                | <i>1</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>BREATH OF LIFE BIRTH CENTER</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>BROWARD GENERAL MED CTR</b>       |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>296</i>   |      |      |              | <i>0</i>     | <i>284</i> | <i>1</i>                | <i>0</i> | <i>0</i>     | <i>11</i>    |                      |
| <b>CAPE CANAVERAL HOSPITAL</b>       |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>69</i>    |      |      |              | <i>0</i>     | <i>68</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>113</i>   |      |      |              | <i>0</i>     | <i>108</i> | <i>2</i>                | <i>2</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>CAPITAL REG. MEDICAL CENTER</b>   |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>78</i>    |      |      |              | <i>2</i>     | <i>73</i>  | <i>0</i>                | <i>2</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>CENTRAL FLA REG HOSP</b>               |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>46</i>    |      |      |              | <i>0</i>     | <i>43</i>  | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>CITRUS MEMORIAL HOSPITAL</b>           |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>64</i>    |      |      |              | <i>0</i>     | <i>62</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>COLUMBIA HOSPITAL WPB</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>COMM HOSP OF NPR/BIRTHPLACE</b>        |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>59</i>    |      |      |              | <i>0</i>     | <i>59</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>CONSCIOUS CHILDBIRTH INC</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>CORAL SPRINGS MEDICAL CENTER</b>       |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>200</i>   |      |      |              | <i>1</i>     | <i>197</i> | <i>1</i>                | <i>1</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>COUNTRYSIDE BIRTHING PLACE</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>DESOTO MEMORIAL HOSP</b>               |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>41</i>    |      |      |              | <i>0</i>     | <i>41</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>DOCTORS MEMORIAL HOSP</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>FAMILY BIRTHPLCE &amp; WOMEN'S CTR</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>FLAGLER HOSPITAL</b>                   |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                          | <i>Patients:</i> | <i>98</i>    |      |      |              | <i>0</i>     | <i>96</i>  | <i>1</i>                | <i>0</i> | <i>0</i>     | <i>1</i>     |                      |

| Medical Rec. No:                      | Parent Name:     | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass       | Passed with Risk Factor | Referred  | Hearing Loss | Not Screened | Not Screened Reason: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|-----------|--------------|--------------|----------------------|
| <b>FLORIDA HOSP CELEBRATION HLTH</b>  |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>99</i>    |      |      |              | <i>1</i>     | <i>95</i>  | <i>0</i>                | <i>2</i>  | <i>1</i>     | <i>0</i>     |                      |
| <b>FLORIDA HOSPITAL - ALTAMONTE</b>   |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>75</i>    |      |      |              | <i>0</i>     | <i>73</i>  | <i>0</i>                | <i>2</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>FLORIDA HOSPITAL - DELAND</b>      |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>88</i>    |      |      |              | <i>0</i>     | <i>88</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>85</i>    |      |      |              | <i>2</i>     | <i>72</i>  | <i>0</i>                | <i>6</i>  | <i>0</i>     | <i>5</i>     |                      |
| <b>FLORIDA HOSPITAL HEARTLAND</b>     |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>82</i>    |      |      |              | <i>0</i>     | <i>80</i>  | <i>0</i>                | <i>2</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>FLORIDA HOSPITAL ORLANDO - LAB</b> |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>408</i>   |      |      |              | <i>1</i>     | <i>380</i> | <i>2</i>                | <i>12</i> | <i>0</i>     | <i>13</i>    |                      |
| <b>FLORIDA HOSPITAL ORMOND</b>        |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>70</i>    |      |      |              | <i>0</i>     | <i>68</i>  | <i>0</i>                | <i>1</i>  | <i>0</i>     | <i>1</i>     |                      |
| <b>FLORIDA HOSPITAL-ZEPHYRHILLS</b>   |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>38</i>    |      |      |              | <i>0</i>     | <i>35</i>  | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>3</i>     |                      |
| <b>FRUITFUL VINE MIDWIFERY SERV</b>   |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>13</i>    |      |      |              | <i>8</i>     | <i>4</i>   | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>1</i>     |                      |
| <b>FT WALTON BCH MED CTR</b>          |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>92</i>    |      |      |              | <i>0</i>     | <i>87</i>  | <i>2</i>                | <i>0</i>  | <i>0</i>     | <i>3</i>     |                      |
| <b>GINA GELORMINI</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>     |                      |

| 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>GLADES GENERAL HOSPITAL</b>       |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>40</i>    |      |      |              | <i>2</i>     | <i>30</i>  | <i>0</i>                | <i>7</i>  | <i>0</i>     | <i>1</i>     |                      |
| <b>GOOD SAMARITAN HOSP</b>           |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>65</i>    |      |      |              | <i>2</i>     | <i>62</i>  | <i>0</i>                | <i>1</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>GULF COAST HOSP - FT MYERS</b>    |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>199</i>   |      |      |              | <i>0</i>     | <i>195</i> | <i>0</i>                | <i>2</i>  | <i>0</i>     | <i>2</i>     |                      |
| <b>GULF COAST MED CTR</b>            |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>173</i>   |      |      |              | <i>2</i>     | <i>155</i> | <i>0</i>                | <i>2</i>  | <i>0</i>     | <i>14</i>    |                      |
| <b>HALIFAX MEDICAL CENTER</b>        |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>220</i>   |      |      |              | <i>0</i>     | <i>211</i> | <i>5</i>                | <i>4</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>HEALTH CENTRAL HOSPITAL</b>       |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>103</i>   |      |      |              | <i>2</i>     | <i>92</i>  | <i>0</i>                | <i>5</i>  | <i>0</i>     | <i>4</i>     |                      |
| <b>HEALTH PARK MEDICAL CTR/LEE</b>   |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>305</i>   |      |      |              | <i>0</i>     | <i>271</i> | <i>1</i>                | <i>14</i> | <i>0</i>     | <i>19</i>    |                      |
| <b>HEART 2 HEART BIRTH CENTER</b>    |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>7</i>     |      |      |              | <i>1</i>     | <i>1</i>   | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>5</i>     |                      |
| <b>HEART OF FLORIDA HOSP</b>         |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>90</i>    |      |      |              | <i>1</i>     | <i>85</i>  | <i>0</i>                | <i>4</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>HEARTS N HANDS HOMEBIRTH</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>HELEN ELLIS MEMORIAL HOSPITAL</b> |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>54</i>    |      |      |              | <i>0</i>     | <i>53</i>  | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>1</i>     |                      |

| Medical Rec. No:                    | Parent Name:     | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass       | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|-------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| <b>HIALEAH HOSPITAL</b>             |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>141</i>   |      |      |              | <i>0</i>     | <i>136</i> | <i>4</i>                | <i>0</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>HIGHLANDS REG MEDICAL CENTER</b> |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>25</i>    |      |      |              | <i>0</i>     | <i>24</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>HOLISTIC 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>HOLLYWOOD BIRTH CENTER, INC</b>  |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>6</i>     |      |      |              | <i>2</i>     | <i>3</i>   | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>HOLMES REG MED CTR</b>           |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>221</i>   |      |      |              | <i>1</i>     | <i>220</i> | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>HOLY CROSS HOSPITAL</b>          |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>110</i>   |      |      |              | <i>0</i>     | <i>106</i> | <i>0</i>                | <i>2</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>HOME BIRTH</b>                   |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>38</i>    |      |      |              | <i>20</i>    | <i>8</i>   | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>10</i>    |                      |
| <b>HOMESTEAD HOSPITAL</b>           |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>145</i>   |      |      |              | <i>1</i>     | <i>140</i> | <i>2</i>                | <i>0</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>INDIAN RIVER MEMORIAL HOSP</b>   |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>118</i>   |      |      |              | <i>1</i>     | <i>115</i> | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>JACKSON HOSPITAL - MARIANNA</b>  |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>26</i>    |      |      |              | <i>0</i>     | <i>24</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>JACKSON MEMORIAL HOSPITAL</b>    |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                    | <i>Patients:</i> | <i>491</i>   |      |      |              | <i>1</i>     | <i>462</i> | <i>1</i>                | <i>5</i> | <i>0</i>     | <i>22</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 NORTH MEDICAL CENTER</b>   |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>145</i>   |      |      |              | <i>21</i>    | <i>113</i> | <i>0</i>                | <i>4</i>  | <i>0</i>     | <i>7</i>     |                      |
| <b>JACKSON SOUTH COMM HOSPITAL</b>    |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>128</i>   |      |      |              | <i>13</i>    | <i>115</i> | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>JOE DIMAGGIO CHILDRENS HOSP</b>    |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>39</i>    |      |      |              | <i>2</i>     | <i>24</i>  | <i>2</i>                | <i>0</i>  | <i>1</i>     | <i>10</i>    |                      |
| <b>JUPITER MEDICAL CENTER</b>         |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>103</i>   |      |      |              | <i>0</i>     | <i>99</i>  | <i>1</i>                | <i>1</i>  | <i>0</i>     | <i>2</i>     |                      |
| <b>KENDALL MEDICAL CENTER</b>         |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>180</i>   |      |      |              | <i>2</i>     | <i>170</i> | <i>0</i>                | <i>1</i>  | <i>0</i>     | <i>7</i>     |                      |
| <b>LABOR OF LOVE - DUNEDIN</b>        |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>11</i>    |      |      |              | <i>2</i>     | <i>4</i>   | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>5</i>     |                      |
| <b>LABOR OF LOVE BIRTH CTR (LUTZ)</b> |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>6</i>     |      |      |              | <i>2</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>11</i>    |      |      |              | <i>7</i>     | <i>3</i>   | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>1</i>     |                      |
| <b>LAKELAND REG MEDICAL CENTER</b>    |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>339</i>   |      |      |              | <i>1</i>     | <i>322</i> | <i>1</i>                | <i>10</i> | <i>0</i>     | <i>5</i>     |                      |
| <b>LAKEWOOD RANCH MEDICAL CENTER</b>  |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>96</i>    |      |      |              | <i>1</i>     | <i>94</i>  | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>1</i>     |                      |
| <b>LAWNWOOD REGIONAL MEDICAL CTR</b>  |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>94</i>    |      |      |              | <i>0</i>     | <i>89</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: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| <b>LEESBURG REGIONAL MEDICAL CTR</b>  |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>105</i>   |      |      |              | <i>0</i>     | <i>103</i> | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>LOWER KEYS MEDICAL CTR</b>         |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>34</i>    |      |      |              | <i>0</i>     | <i>33</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>MADISON COUNTY MEMORIAL HOSP</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>MAMA'S CRADLE</b>                  |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <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>     |                      |
| <b>MANATEE MEMORIAL HOSPITAL</b>      |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>194</i>   |      |      |              | <i>7</i>     | <i>177</i> | <i>0</i>                | <i>5</i> | <i>0</i>     | <i>5</i>     |                      |
| <b>MARTIN MEMORIAL MEDICAL CENTER</b> |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>180</i>   |      |      |              | <i>0</i>     | <i>175</i> | <i>4</i>                | <i>1</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>MEASE COUNTRYSIDE HOSPITAL</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>156</i>   |      |      |              | <i>1</i>     | <i>151</i> | <i>2</i>                | <i>0</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>MEMORIAL HOSPITAL JACKSONVILLE</b> |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>185</i>   |      |      |              | <i>0</i>     | <i>181</i> | <i>2</i>                | <i>0</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>MEMORIAL HOSPITAL MIRAMAR</b>      |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>271</i>   |      |      |              | <i>1</i>     | <i>265</i> | <i>2</i>                | <i>2</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>MEMORIAL HOSPITAL WEST</b>         |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>415</i>   |      |      |              | <i>0</i>     | <i>412</i> | <i>1</i>                | <i>0</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>MEMORIAL REG HOSP - HOLLYWOOD</b>  |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>337</i>   |      |      |              | <i>0</i>     | <i>330</i> | <i>1</i>                | <i>3</i> | <i>0</i>     | <i>3</i>     |                      |

| Medical Rec. No:                     | Parent Name:     | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass       | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|--------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| <b>MERCY HOSPITAL</b>                |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>126</i>   |      |      |              | <i>0</i>     | <i>124</i> | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>MIAMI BEACH MATERNITY CTR</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>34</i>    |      |      |              | <i>2</i>     | <i>29</i>  | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>MIAMI CHILDREN'S HOSPITAL</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>26</i>    |      |      |              | <i>3</i>     | <i>9</i>   | <i>0</i>                | <i>1</i> | <i>1</i>     | <i>12</i>    |                      |
| <b>MORTON F PLANT HOSP</b>           |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>267</i>   |      |      |              | <i>0</i>     | <i>263</i> | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>3</i>     |                      |
| <b>MT SINAI MED CTR</b>              |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>147</i>   |      |      |              | <i>2</i>     | <i>143</i> | <i>1</i>                | <i>1</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>MUNROE REG MEDICAL CENTER</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>240</i>   |      |      |              | <i>0</i>     | <i>234</i> | <i>5</i>                | <i>0</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>NO HOSPITAL</b>                   |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>33</i>    |      |      |              | <i>17</i>    | <i>15</i>  | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>NORTH BAY HOSPITAL</b>            |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <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>     |                      |
| <b>NORTH FLORIDA REG MED CTR</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>200</i>   |      |      |              | <i>0</i>     | <i>196</i> | <i>4</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>NORTH NAPLES NCH HOSPITAL</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>290</i>   |      |      |              | <i>2</i>     | <i>283</i> | <i>0</i>                | <i>4</i> | <i>0</i>     | <i>1</i>     |                      |
| <b>NORTH OKALOOSA MEDICAL CENTER</b> |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>48</i>    |      |      |              | <i>5</i>     | <i>19</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>24</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 SHORE MEDICAL CENTER</b>    |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>166</i>   |      |      |              | <i>1</i>     | <i>156</i> | <i>1</i>                | <i>1</i> | <i>0</i>     | <i>7</i>     |                      |
| <b>NORTHWEST MEDICAL CENTER</b>      |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>137</i>   |      |      |              | <i>2</i>     | <i>129</i> | <i>1</i>                | <i>5</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>ORANGE PARK MEDICAL CENTER</b>    |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>203</i>   |      |      |              | <i>1</i>     | <i>196</i> | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>6</i>     |                      |
| <b>ORLANDO REG SOUTH SEMINOLE</b>    |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>97</i>    |      |      |              | <i>0</i>     | <i>94</i>  | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>OSCEOLA REGIONAL MED CTR</b>      |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>199</i>   |      |      |              | <i>0</i>     | <i>196</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>8</i>     |      |      |              | <i>4</i>     | <i>0</i>   | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>4</i>     |                      |
| <b>PALM BCH GARDENS MED CTR</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 BAY MATERNITY CENTER</b> |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>5</i>     |      |      |              | <i>0</i>     | <i>5</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>177</i>   |      |      |              | <i>0</i>     | <i>168</i> | <i>2</i>                | <i>0</i> | <i>0</i>     | <i>7</i>     |                      |
| <b>PALMS WEST HOSPITAL</b>           |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>101</i>   |      |      |              | <i>0</i>     | <i>100</i> | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>PARRISH MEDICAL CENTER</b>        |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>59</i>    |      |      |              | <i>0</i>     | <i>57</i>  | <i>1</i>                | <i>0</i> | <i>0</i>     | <i>1</i>     |                      |

| Medical Rec. No:                      | Parent Name:     | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass       | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|----------|--------------|--------------|----------------------|
| <b>PASCO REGIONAL MEDICAL CTR</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>23</i>    |      |      |              | <i>0</i>     | <i>23</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>PEACE RIVER REGIONAL MED. CTR.</b> |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>123</i>   |      |      |              | <i>5</i>     | <i>114</i> | <i>0</i>                | <i>2</i> | <i>0</i>     | <i>2</i>     |                      |
| <b>PHYSICIAN'S REG MEDICAL CTR</b>    |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>37</i>    |      |      |              | <i>0</i>     | <i>37</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>292</i>   |      |      |              | <i>0</i>     | <i>275</i> | <i>5</i>                | <i>5</i> | <i>0</i>     | <i>7</i>     |                      |
| <b>PUTNAM COMMUNITY MED CTR</b>       |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>44</i>    |      |      |              | <i>16</i>    | <i>28</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>RAULERSON MEMORIAL HOSPITAL</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>REGENCY MEDICAL CTR</b>            |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>175</i>   |      |      |              | <i>0</i>     | <i>172</i> | <i>0</i>                | <i>3</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>ROSEMARY BIRTHING HOME INC.</b>    |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>5</i>     |      |      |              | <i>0</i>     | <i>5</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>58</i>    |      |      |              | <i>0</i>     | <i>56</i>  | <i>0</i>                | <i>2</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>SACRED HEART HOSPITAL</b>          |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>313</i>   |      |      |              | <i>1</i>     | <i>305</i> | <i>2</i>                | <i>0</i> | <i>0</i>     | <i>5</i>     |                      |
| <b>SANPERE ,ALICE, LM</b>             |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <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>     |                      |

| 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>SANTA ROSA MEDICAL CTR</b>         |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>27</i>    |      |      |              | <i>0</i>     | <i>27</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>SARASOTA MEMORIAL HOSPITAL</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>296</i>   |      |      |              | <i>0</i>     | <i>282</i> | <i>3</i>                | <i>3</i> | <i>1</i>     | <i>7</i>     |                      |
| <b>SEVEN RIVERS COMM HOSPITAL</b>     |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>20</i>    |      |      |              | <i>1</i>     | <i>16</i>  | <i>1</i>                | <i>2</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>SHANDS AT AGH</b>                  |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>123</i>   |      |      |              | <i>6</i>     | <i>104</i> | <i>0</i>                | <i>6</i> | <i>0</i>     | <i>7</i>     |                      |
| <b>SHANDS AT JACKSONVILLE</b>         |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>257</i>   |      |      |              | <i>7</i>     | <i>220</i> | <i>0</i>                | <i>9</i> | <i>0</i>     | <i>21</i>    |                      |
| <b>SHANDS AT LAKE SHORE HOSPITAL</b>  |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>53</i>    |      |      |              | <i>1</i>     | <i>52</i>  | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>SHANDS HOSP AT THE UNIV OF FLA</b> |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>279</i>   |      |      |              | <i>0</i>     | <i>260</i> | <i>5</i>                | <i>5</i> | <i>0</i>     | <i>9</i>     |                      |
| <b>SOUTH FLA BAPTIST HOSP</b>         |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>39</i>    |      |      |              | <i>1</i>     | <i>36</i>  | <i>2</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>SOUTH LAKE MEMORIAL HOSP</b>       |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>42</i>    |      |      |              | <i>1</i>     | <i>40</i>  | <i>0</i>                | <i>1</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>SOUTH MIAMI HOSPITAL</b>           |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>399</i>   |      |      |              | <i>0</i>     | <i>370</i> | <i>7</i>                | <i>1</i> | <i>0</i>     | <i>21</i>    |                      |
| <b>SPRING HILL REGIONAL HOSPITAL</b>  |                  |              |      |      |              |              |            |                         |          |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>164</i>   |      |      |              | <i>14</i>    | <i>133</i> | <i>0</i>                | <i>5</i> | <i>0</i>     | <i>12</i>    |                      |

| Medical Rec. No:                      | Parent Name:     | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass       | Passed with Risk Factor | Referred  | Hearing Loss | Not Screened | Not Screened Reason: |
|---------------------------------------|------------------|--------------|------|------|--------------|--------------|------------|-------------------------|-----------|--------------|--------------|----------------------|
| <b>ST JOSEPH WOMEN HOSPITAL</b>       |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>630</i>   |      |      |              | <i>0</i>     | <i>602</i> | <i>7</i>                | <i>4</i>  | <i>0</i>     | <i>17</i>    |                      |
| <b>ST LUCIE MEDICAL CENTER</b>        |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>80</i>    |      |      |              | <i>6</i>     | <i>72</i>  | <i>0</i>                | <i>2</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>ST LUKES HOSPITAL-FAMILY BIRTH</b> |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>117</i>   |      |      |              | <i>0</i>     | <i>116</i> | <i>1</i>                | <i>0</i>  | <i>0</i>     | <i>0</i>     |                      |
| <b>ST MARY'S HOSPITAL</b>             |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>360</i>   |      |      |              | <i>0</i>     | <i>347</i> | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>13</i>    |                      |
| <b>ST PETE GENERAL HOSPITAL</b>       |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>105</i>   |      |      |              | <i>0</i>     | <i>104</i> | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>1</i>     |                      |
| <b>ST VINCENT'S MEDICAL CENTER</b>    |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>172</i>   |      |      |              | <i>17</i>    | <i>144</i> | <i>2</i>                | <i>1</i>  | <i>0</i>     | <i>8</i>     |                      |
| <b>TALLAHASSEE MEM REG MED CTR</b>    |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>385</i>   |      |      |              | <i>0</i>     | <i>373</i> | <i>8</i>                | <i>1</i>  | <i>0</i>     | <i>3</i>     |                      |
| <b>TAMPA GENERAL HOSPITAL</b>         |                  |              |      |      |              |              |            |                         |           |              |              |                      |
| <i>Subtotal:</i>                      | <i>Patients:</i> | <i>559</i>   |      |      |              | <i>3</i>     | <i>485</i> | <i>1</i>                | <i>11</i> | <i>2</i>     | <i>57</i>    |                      |
| <b>THE 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>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>8</i>     |      |      |              | <i>4</i>     | <i>3</i>   | <i>0</i>                | <i>0</i>  | <i>0</i>     | <i>1</i>     |                      |

| Medical Rec. No:                     | Parent Name:     | Infant Name: | Sex: | DOB: | Birth Order: | Not Reported | Pass         | Passed with Risk Factor | Referred | Hearing Loss | Not Screened | Not Screened Reason: |
|--------------------------------------|------------------|--------------|------|------|--------------|--------------|--------------|-------------------------|----------|--------------|--------------|----------------------|
| <b>UNIV OF MIAMI SCHOOL OF MED</b>   |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <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>     |                      |
| <b>UNIVERSITY COMMUNITY HOSPITAL</b> |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>212</i>   |      |      |              | <i>8</i>     | <i>186</i>   | <i>2</i>                | <i>2</i> | <i>0</i>     | <i>14</i>    |                      |
| <b>USAF 6TH MEDICAL GRP/SGSC</b>     |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>7</i>     |      |      |              | <i>0</i>     | <i>7</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>61</i>    |      |      |              | <i>0</i>     | <i>60</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>3</i>     |      |      |              | <i>0</i>     | <i>2</i>     | <i>1</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>USN HOSPITAL PENSACOLA</b>        |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>47</i>    |      |      |              | <i>1</i>     | <i>46</i>    | <i>0</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>WELLINGTON REG MEDICAL CENTER</b> |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>185</i>   |      |      |              | <i>0</i>     | <i>183</i>   | <i>2</i>                | <i>0</i> | <i>0</i>     | <i>0</i>     |                      |
| <b>WEST BOCA MEDICAL CENTER</b>      |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>200</i>   |      |      |              | <i>1</i>     | <i>181</i>   | <i>3</i>                | <i>4</i> | <i>0</i>     | <i>11</i>    |                      |
| <b>WEST FLORIDA HOSPITAL</b>         |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>39</i>    |      |      |              | <i>0</i>     | <i>33</i>    | <i>0</i>                | <i>3</i> | <i>0</i>     | <i>3</i>     |                      |
| <b>WINNIE PALMER HOSPITAL</b>        |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>1,269</i> |      |      |              | <i>2</i>     | <i>1,246</i> | <i>2</i>                | <i>5</i> | <i>0</i>     | <i>14</i>    |                      |
| <b>WINTER PARK BIRTHING COTTAGE</b>  |                  |              |      |      |              |              |              |                         |          |              |              |                      |
| <i>Subtotal:</i>                     | <i>Patients:</i> | <i>8</i>     |      |      |              | <i>1</i>     | <i>4</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: |
|------------------|--------------|--------------|------|------|--------------|--------------|------|-------------------------|----------|--------------|--------------|----------------------|
|------------------|--------------|--------------|------|------|--------------|--------------|------|-------------------------|----------|--------------|--------------|----------------------|

---

**WINTER PARK MEMORIAL HOSP**

|                  |                      |  |  |  |  |   |     |   |   |   |   |  |
|------------------|----------------------|--|--|--|--|---|-----|---|---|---|---|--|
| <i>Subtotal:</i> | <i>Patients: 142</i> |  |  |  |  | 0 | 138 | 1 | 1 | 0 | 2 |  |
|------------------|----------------------|--|--|--|--|---|-----|---|---|---|---|--|

**WUESTHOFF HOSPITAL - MELBOURNE**

|                  |                     |  |  |  |  |   |    |   |   |   |   |  |
|------------------|---------------------|--|--|--|--|---|----|---|---|---|---|--|
| <i>Subtotal:</i> | <i>Patients: 39</i> |  |  |  |  | 2 | 36 | 0 | 0 | 0 | 1 |  |
|------------------|---------------------|--|--|--|--|---|----|---|---|---|---|--|

**WUESTHOFF HOSPITAL-ROCKLEDGE**

|                  |                     |  |  |  |  |   |    |   |   |   |   |  |
|------------------|---------------------|--|--|--|--|---|----|---|---|---|---|--|
| <i>Subtotal:</i> | <i>Patients: 57</i> |  |  |  |  | 0 | 55 | 0 | 1 | 0 | 1 |  |
|------------------|---------------------|--|--|--|--|---|----|---|---|---|---|--|

**Totals:**

|                          |        |
|--------------------------|--------|
| Not Reported:            | 287    |
| Pass:                    | 18,664 |
| Passed with Risk Factor: | 120    |
| Referred:                | 232    |
| Hearing Loss:            | 8      |
| Not Screened:            | 586    |
| Total                    | 19,897 |

**Not Screened Reason Counts:**

1. Other: 78
2. Not yet screened NICU: 354
3. Missed: 18
4. Parent Refused: 87
5. Transferred: 27
6. Missing Result: 20
7. Previously screened: 2

**Risk Factor Counts:**

1. Low Birth Weight: 356
2. Family History: 96
3. PPHN: 8
4. Hyperbilirubinemia: 6
5. ECMO: 7