May 5, 2016

Audience: Public Health Audiologists

Purpose: To clarify who is invited to participate in the Neonatal Follow-up Clinic (NFUP). Additional information is also provided regarding follow-up opportunities on Vancouver Island.

Mandate: The Neonatal Follow-Up Program is a program run out of the BC Women’s Hospital. The program was started in 1983 to collect audit information about quality of survival of specific categories of high risk infants in the Province of British Columbia.

Overall Goals of the NFUP:

2. To ascertain impairment early in this high-risk population to promote early application of interventional techniques to minimize the severity of perinatally acquired disability.
3. To provide an educational experience in developmental assessment and the long term effects of perinatal/neonatal intensive care for learners in perinatal/neonatal care training programs, as well as learners from Nursing, Physiotherapy, Occupational Therapy, Speech & Language Therapy, and Psychology.
4. To promote and carry out research to further knowledge of the long-term effects of selected aspects of perinatal and neonatal management.
5. To co-operate with perinatal follow-up programs across Canada and internationally in assessing patients belonging to those programs who move to British Columbia.

The Program is multidisciplinary and provides comprehensive age appropriate, sequential neuro-developmental assessments at 4, 8, 18 months, 3 years and 4.5 years for most enrolled children. For children who meet our criteria for follow-up related to ECMO treatment, they continue to be followed at 8 years, 11 years, 14 years and 17 years.

Children are routinely seen for an audio assessment at 8 months and 3 years unless they have recently been seen in the community. All children born with CDH or have had ECMO treatment are additionally seen by Audiology at 4 and 18 months.

NFU program criteria, must meet one of the following:

1. Birthweight 800 grams or less or verified gestational age 25 weeks or less.
2. Intra-parenchymal cerebral infarct (“Grade 4 Intraventricular Hemorrhage”).
3. Periventricular Leukomalacia (PVL) with cyst formation.
4. ECMO (ECLS) patients – BCCH or out of province transfer.
5. Congenital Diaphragmatic Hernia (CDH)
6. Retinopathy of prematurity, Grade 4, or lazered ROP in the newborn period (usually stage 3+) disease or any grade of ROP treated with Avastin
7. Infants discharged home on oxygen
8. Patient on an approved and funded study.
9. Other unusual perinatal situations at the Programme Director’s discretion.

Note: Infants that are referred from another Canadian or international centre that do not meet the BCWH NFU criteria are offered a onetime visit to help connect them to local services that may available in their community.

While Gastrochisis is not a recruitment criteria, it has been noted at they are at increased risk for hearing loss including ANSD so we are working on educating our neonatologists about this condition and are encouraging Audiology referrals.

Infants are referred to the BCWH NFU clinic by two methods, either:

The Neonatal Follow-up nurse - who identifies BCWH NICU babies that meet the criteria.

From other provincial NICU’s, IDP Consultants, local physicians and pediatricians, allied health therapists or early intervention programs that identify infants that meet the criteria.

Once a child is identified, the program confirms eligibility via hospital records and enters the contact information in the NFU database. The family is contacted and invited to participate in the program.

The best way to find out if a baby is enrolled (if the information is not in BEST) is to contact the NFU team Audiologist (currently Laurie Usher).

We enter up to date NFU enrollment in BEST monthly. If we already have access to the BEST record we put a note in “notifications” that the child will be seen through NFU at 8 months. If we don’t have access to the BEST record we request it and in the “request” comments we indicate they are enrolled and we plan to see baby at 8 months.

Victoria General Hospital NFU program criteria, must meet one of the following:

1. Birth weight (less than or equal to 1250 gm)
2. Gestation less than 29 weeks
3. Perinatal Asphyxia (defined as base deficit less than -12, APGAR less than 4 @ 5 min. and moderate to severe HIE as per the SARNAT tool).
4. Intraventricular Hemorrhage Grade 3 or 4
5. Periventricular Leukomalacia
6. Congenital Diaphragmatic Hernia
7. Intrauterine Growth Restriction (less than 3rd percentile and after triage with Neonatologist)
8. Hypoglycemia (less than 2.0 mmol/L in two determinations despite treatment and after triage).
9. Hyperbilirubinemia (greater than 380 umol/L within 48 hr).
10. Other (i.e. seizures unrelated to HIE or surgery resulting from prematurity)
11. Specific Referrals after consultation with Neonatologist on service or other follow-up clinics.

Please don’t hesitate to contact NFU Team Audiologists at 604-875-2345 Local 7049 if you have questions, concerns or suggestions in order reduce duplications and keep communication clear.