



EHDDI Web Application Guide

This guide describes how to use the EHDDI web application for reporting diagnostic information to the Department of Health.



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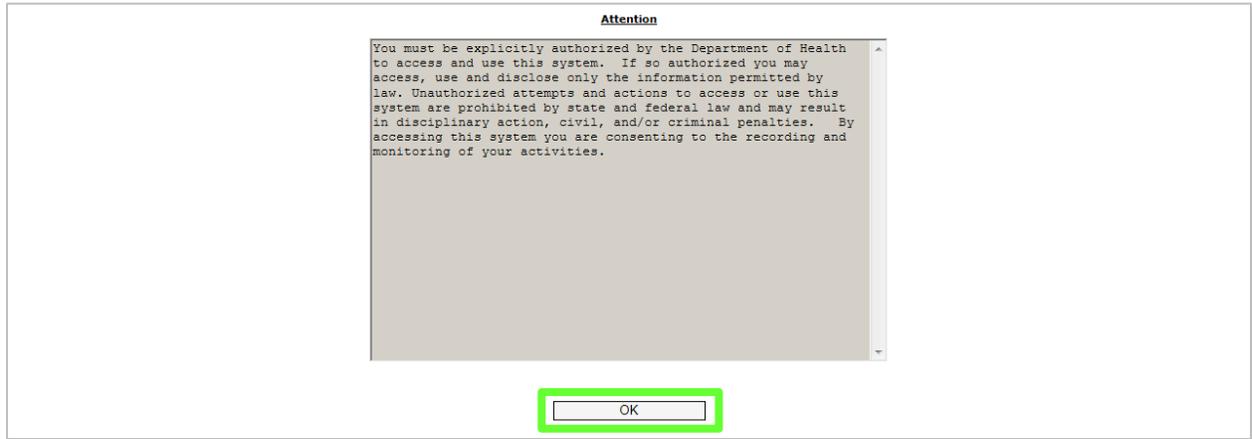
DOH 344-054 March 2015

For persons with disabilities, this document is available on request in other formats. To submit a request please call 1-800-525-0127 (TDD/TTY 711)

Using the EHDDI Web Application

Log-in Banner for Confidential Internet Applications

When you login, you will first see a banner that is required by the Department of Health for confidential web applications.



- 1) Select OK.

Homepage

After you select OK, you will be taken to the Audiologists Home/Patient Search page. From this page you can access and search for infants who have been referred to your clinic. The EHDDI program knows if an infant has been referred to your clinic through communications with the infant's Primary Care Provider (PCP), the hospital hearing screening coordinator, your audiology clinic, or another audiology clinic. If you do not find an infant in our system for whom you want to enter diagnostic results, please contact the EHDDI program and we will 'push the baby through' to your clinic. You will then see the infant in the pending patients grid or be able to search for the infant.

The Homepage is divided into two sections. The top half is where you can search for infants and the bottom half is where you can view and access records of infants the EHDDI program has been told have been referred to your clinic.

Search patients assigned to you

EHDDI #

Child's Name

Date of Birth

Mother's Last Name

Mom's First Name

Sex

Medical Record #

Patients currently referred to you

Select	Referral Status	Referral Date	Patient #	Child's Name	Birth Date	Sex	Mom's Last Name	Mom's First Name	Record Status
Select	In Progress	03/04/2014	20112440345	BABY BOY	01/09/2014	Male	MOUSE	MINNIE	
Select	Not Entered	07/15/2013	20112440486	BABY BOY	04/01/2013	Male	MARIAN	MAID	
Select	Not Entered	07/24/2013	20112490296	BABY GIRL	04/15/2013	Female	FIELDMOUSE	FERDIE	
Select	Not Entered	03/06/2014	20112490322	BABY BOY	09/12/2013	Male	GODMOTHER	FAIRY	
Select	Not Entered	03/06/2014	20112490418	BABY GIRL	08/08/2013	Female	COW	CLARABEL	
Select	Not Entered	03/05/2014	20112500130	BABY GIRL	01/19/2014	Female	DUCK	DAISY	
Select	Not Entered	03/05/2014	20112500143	BABY BOY	02/28/2014	Male	MULAN	HUA	
Select	Not Entered	01/08/2014	20112510084	BABY BOY	06/30/2013	Male	DARLING	WENDY	
Select	Not Entered	03/11/2014	20112510117	BABY GIRL	12/24/2013	Female	CLUCK	CLARA	

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Searching for Infants

Search for infants referred to your clinic in the top portion of the homepage. Use an asterisk as a wild card character. Below are directions for an example search for a child with a mother's last name of Duck.

- 1) Type du* in the Mother's Last Name field.
- 2) Select Search.

Audiologists Home Patient Search Help Contact EHDDI Logoff Change Password

Search patients assigned to you

EHDDI #

Child's Name

Date of Birth

Mother's Last Name

Mom's First Name

Sex

Medical Record #

Patients currently referred to you

Select	Referral Status	Referral Date	Patient #	Child's Name	Birth Date	Sex	Mom's Last Name	Mom's First Name	Record Status
Select	In Progress	03/04/2014	20112440345	BABY BOY	01/09/2014	Male	MOUSE	MINNIE	
Select	Not Entered	07/15/2013	20112440486	BABY BOY	04/01/2013	Male	MARIAN	MAID	
Select	Not Entered	07/24/2013	20112490296	BABY GIRL	04/15/2013	Female	FIELDMOUSE	FERDIE	
Select	Not Entered	03/06/2014	20112490322	BABY BOY	09/12/2013	Male	GODMOTHER	FAIRY	
Select	Not Entered	03/06/2014	20112490418	BABY GIRL	08/08/2013	Female	COW	CLARABEL	
Select	Not Entered	03/05/2014	20112500130	BABY GIRL	01/19/2014	Female	DUCK	DAISY	
Select	Not Entered	03/05/2014	20112500143	BABY BOY	02/28/2014	Male	MULAN	HUA	
Select	Not Entered	01/08/2014	20112510084	BABY BOY	06/30/2013	Male	DARLING	WENDY	
Select	Not Entered	03/11/2014	20112510117	BABY GIRL	12/24/2013	Female	CLUCK	CLARA	

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3) Patients who meet the search criteria will appear next to the patient search. Click Select next to the infant record you want to access.

Audiologists Home Patient Search Help Contact EHDDI Logoff Change Password

Search patients assigned to you

EHDDI #

Child's Name

Date of Birth

Mother's Last Name

Mom's First Name

Sex

Medical Record #

Patients currently referred to you

Drag a column here...

Select	NBS #	Patient #	Child Name	Sex	Twin	Birth Date	Mother Last	Mother First
Select	20141250013	201412500130	BABY GIRL	Female	Single	01/19/2014	DUCK	DAISY

No data to display

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Using the Pending Patients Grid

The bottom portion of your homepage lists infants who have been referred to your clinic and the EHDDI program has identified as needing a diagnostic evaluation. These are infants who:

- Do not have a final diagnostic evaluation reported.
- Are indicated as being seen at your clinic and are not considered lost.
- Do not have a future diagnostic evaluation indicated in Referral section.

The grid contains the child's name, date of birth, gender, hospital of birth, and mother's first and last name. It also has the following information:

- Referral Status – if there have been previous diagnostic evaluations entered for the infant
 - Not Entered – no diagnostic evaluations have been entered for the infant
 - In Progress – diagnostic results have been entered for the infant
- Referral Date – the date when the EHDDI program was informed that the infant was referred to your audiology clinic

You can sort the grid using the down caret character (v) next to the name of each column and filter the grid using the row just below the column headings. Click on 'Select' to go to the Physiologic Test/Hearing Loss Section for an infant. In the following example, you will be shown how to use the pending patients grid to find and go into the patient record of an infant whose mother's first name is 'Daisy.'

- 1) Type da in the open field just below the Mother's First Name column heading.

Search patients assigned to you

EHDDI #
Child's Name
Date of Birth
Mother's Last Name
Mom's First Name
Sex
Medical Record #

Search Reset

Patients currently referred to you

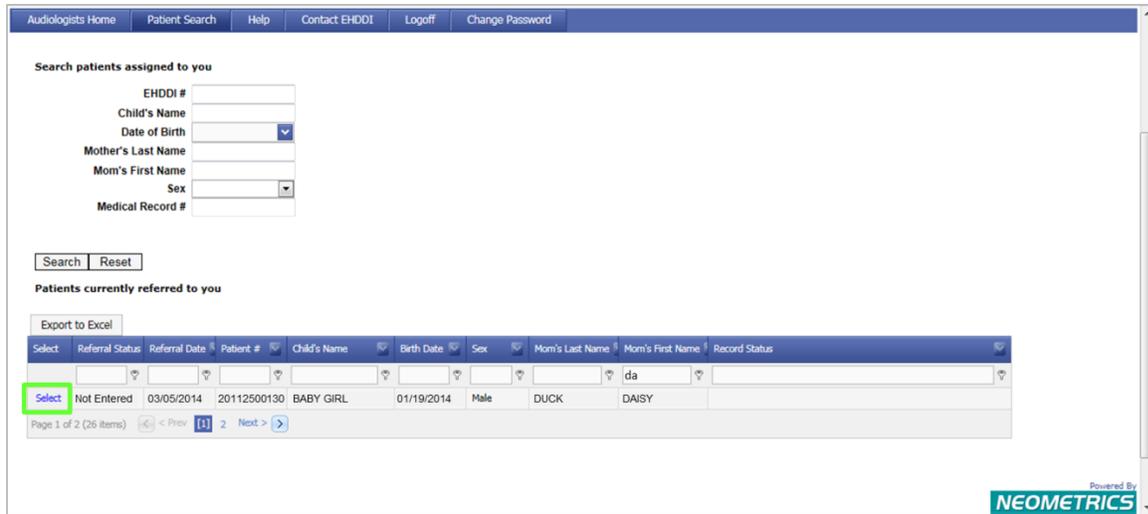
Export to Excel

Select	Referral Status	Referral Date	Patient #	Child's Name	Birth Date	Sex	Mom's Last Name	Mom's First Name	Record Status
Select	In Progress	03/04/2014	20112440345	BABY BOY	01/09/2014	Male	MOUSE	MINNIE	
Select	Not Entered	07/15/2013	20112440486	BABY BOY	04/01/2013	Male	MARIAN	MAID	
Select	Not Entered	07/24/2013	20112490296	BABY GIRL	04/15/2013	Female	FIELDMOUSE	FERDIE	
Select	Not Entered	03/06/2014	20112490322	BABY BOY	09/12/2013	Male	GODMOTHER	FAIRY	
Select	Not Entered	03/06/2014	20112490418	BABY GIRL	08/08/2013	Female	COW	CLARABEL	
Select	Not Entered	03/05/2014	20112500130	BABY GIRL	01/19/2014	Female	DUCK	DAISY	
Select	Not Entered	03/05/2014	20112500143	BABY BOY	02/28/2014	Male	MULAN	HUA	
Select	Not Entered	01/08/2014	20112510084	BABY BOY	06/30/2013	Male	DARLING	WENDY	
Select	Not Entered	03/11/2014	20112510117	BABY GIRL	12/24/2013	Female	CLUCK	CLARA	

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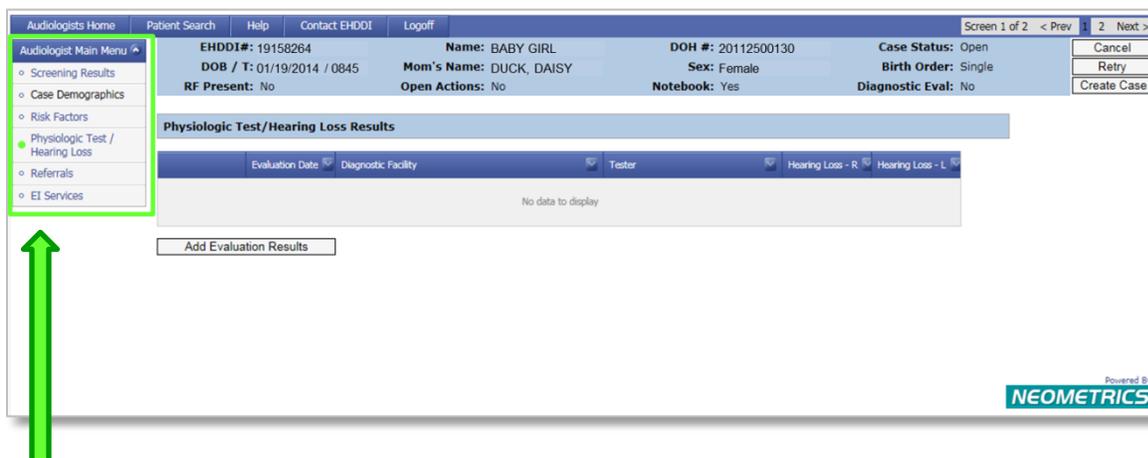
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- 3) Now only patients who meet this criterion will be seen in the pending patients grid. Click Select next to the infant record you want to access.



Patient Record Sections

When you select an infant from the search or pending patients grid, you will be taken to the Physiologic Test Hearing Loss section of the patient's record.



There are six different sections that you can access in an infant's record.

- **Screening Results** - view the newborn hearing screening results that hospitals and clinics have reported to the EHDDI program
- **Case Demographics** - view and edit infant and mother's information
- **Risk Factors** - report risk factors for late onset hearing loss
- **Physiologic Test/Hearing Loss** - report the results of diagnostic testing and whether or not a hearing loss was identified
- **Referrals** – 1) report the infant as unknown, not showing to appointments, or not returning to your clinic, (2) make referrals to other audiology clinics, specialists, and the Part C program, and (3) indicate the date of the infant's next diagnostic evaluation.

- **EI Services** – view Early Intervention (EI) services that the infant’s Family Resource Coordinator reported on the infant’s first Individual Family Service Plan (IFSP)

Physiologic Test/Hearing Loss Section

In the Physiologic Test/Hearing Loss Section you report the results of diagnostic testing and whether or not a hearing loss was identified.

When you select on a patient from the home page or from search, you’ll first be directed to the Physiologic Test/Hearing Loss Section. You will see any previously reported evaluations and be able to add a new evaluation by selecting . Shown below is the diagnostic evaluation form where you report the results of the completed tests and whether or not a hearing loss was identified. **A red asterisk indicates a mandatory field.**

The screenshot shows a web application interface for entering patient data. At the top, there is a navigation bar with options like 'Patient Search', 'Help', and 'Logoff'. Below this, a header section displays patient details: EHHDI#: 19158264, Name: BABY GIRL, DOB: 01/19/2014, Mom's Name: DUCK, DAISY, DOH #: 20112500130, Sex: Female, Case Status: Open, Birth Order: Single, and Diagnostic Eval: No. A sidebar on the left contains a menu with options like 'Screening Results', 'Case Demographics', 'Risk Factors', 'Physiologic Test / Hearing Loss', 'Referrals', and 'EI Services'. The main content area is a form for entering test results. It has two columns for 'Right Ear' and 'Left Ear'. Each column has dropdown menus for 'Otoscope Examination', 'Tympanometry', 'OAE', 'ABR', and 'Behavioral Test'. Below these are radio buttons for 'Diagnosis Hearing Loss' (Yes, No, Undetermined). A red asterisk indicates that if 'Yes' is selected, the user must also specify the 'Degree of Hearing Loss', 'Configuration', and 'Type of Hearing Loss'. There are also text boxes for 'Comments' and a checkbox for 'Final Report for this Child'. At the bottom, there are 'Save', 'Save & Next', and 'Cancel' buttons.

- 1) Enter the date of the evaluation.
- 2) Report the results for any tests performed.
- 3) Indicate whether a hearing loss was diagnosed. If you did not test an ear because you previously diagnosed that ear as having or not having a hearing loss and you do not suspect that diagnosis has changed, please enter the previous diagnosis for that ear.
 - Yes – a hearing loss is present
 - No – no hearing loss is present

- Undetermined – you were unable to determine if a hearing loss was present
- 4) If a hearing loss was diagnosed, report the degree and type of hearing loss.
 - 5) If the infant was found to not have a hearing loss or was definitively diagnosed with a permanent hearing loss, check the 'Final Report for this Child' box. If an infant has a hearing loss, don't forget to report the type and degree of hearing loss to the best of your ability. If the infant has a conductive fluctuating hearing loss and you are confident the infant does not have a permanent hearing loss, indicate 'Conductive - Fluctuating' as the type of hearing loss and check the 'Final Report for this Child' box.
 - 6) Select Save

The evaluation you entered will be shown in the Physiologic Test/Hearing Loss section. Click select next to the evaluation if you want to view the results that were entered.

Evaluation Date	Diagnostic Facility	Tester	Hearing Loss - R	Hearing Loss - L
Select 03/10/2013	Children's Hospital and Regional Medical Center	Susan Norton	No	Yes

Referral Section

In the Referral Section, you can **(1)** report the infant as unknown, not showing to appointments, or not returning to your clinic, **(2)** make referrals to other audiology clinics, specialists, and the Part C program, and **(3)** indicate the date of the infant's next diagnostic evaluation.

Reporting an Infant as Lost in Referrals Section

In the Referrals section, you can indicate that an infant is not being seen at your clinic. You can assign an infant to one of three types of lost categories. They are:

- No Show: The infant has no future appointments scheduled and the family has cancelled or has not been coming in for appointments.
- Not Seen at This Facility – Unknown Patient: The family has never scheduled an appointment for the infant at your audiology clinic.
- Patient Not Returning: The infant had an inconclusive evaluation at your audiology clinic and the family has not scheduled or brought their infant in for a needed evaluation.

When you report that an infant falls into one of these lost categories, the EHDDI program will call the infant's Primary Care Provider (PCP) to determine why the infant is not receiving necessary audiology services and assist the PCP in making sure the infant does receive an evaluation.

- 1) In the Referrals section, click on Select next to the pending referral that indicates the infant was referred to your clinic.

The screenshot shows the EHDDI interface for a patient named BABY BOY. The patient's information includes EHHDI# 19179213, DOB/T 03/04/2014 / 1025, Mom's Name MOUSE, MINNIE, Sex Male, Birth Order Single, Case Status Open, RF Present No, Open Actions No, Notebook No, and Diagnostic Eval No. The Referrals section contains a table with one entry:

Specialist	Referral Date	Facility	Status	Comment	Entered By
Select	04/28/2014	Children's Hospital and Regional Medical Center	Pending		Karin Neidt

Below the table are buttons for "Add New Referral" and "Add Next Evaluation Date". The Pending Evaluations section is currently empty, displaying "No data to display". The interface is powered by NEOMETRICS.

- 2) Click on the down carrot for the Referral Status field.

- 3) Choose the appropriate status for the infant. In this case, we will report the infant as not being a patient in our clinic.

Audiologists Home Patient Search Help Contact EHDDI Logoff Change Password Screen 1 of 2 < Prev 1 2 Next >

EHDDI#: 19179213 **Name:** BABY BOY **DOH #:** 20112440345 **Case Status:** Open
DOB / T: 03/04/2014 / 1025 **Mom's Name:** MOUSE, MINNIE **Sex:** Male **Birth Order:** Single
RF Present: No **Open Actions:** No **Notebook:** No **Diagnostic Eval:** No

Entered By: karin neidt
Referral Date: 4/28/2014
Referral Type: Reported by Audiologist
Referral Status: Not Seen at This Facility - Unknown Patient
Specialist: Pending
Facility Name: Completed
Facility: No Show
Not Seen at This Facility - Unknown Patient
Patient Not Returning
Cancelled

Referred Due to Risk Factors Only
Comments

Save Cancel

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- 4) Select Save

Audiologists Home Patient Search Help Contact EHDDI Logoff Change Password Screen 1 of 2 < Prev 1 2 Next >

EHDDI#: 19179213 **Name:** BABY BOY **DOH #:** 20112440345 **Case Status:** Open
DOB / T: 03/04/2014 / 1025 **Mom's Name:** MOUSE, MINNIE **Sex:** Male **Birth Order:** Single
RF Present: No **Open Actions:** No **Notebook:** No **Diagnostic Eval:** No

Entered By: Karin Neidt
Referral Date: 4/28/2014
Referral Type: Reported by Audiologist
Referral Status: Not Seen at This Facility - Unknown Patient
Specialist: Audiologist
Facility Name:
Facility: AUDCL3
Children's Hospital and Regional Medical Center
PO Box 5371, MS W-6640, Audiology
Seattle, WA 98105

Referred Due to Risk Factors Only
Comments

Save Cancel

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The screenshot shows the EHHDI software interface for a patient named 'BABY BOY'. The patient's EHHDI# is 19179213, DOB is 03/04/2014, and Mom's Name is MOUSE, MINNIE. The referral status is 'Not Seen at This Facility - Unknown Patient', which is highlighted with a green arrow. The interface includes a navigation menu on the left, a patient information header, and two tables: 'Referrals' and 'Pending Evaluations'. The 'Referrals' table has one entry with a status of 'Not Seen at This Facility - Unknown Patient'. The 'Pending Evaluations' table is empty, showing 'No data to display'.

Specialist	Referral Date	Facility	Status	Comment	Entered By
Select	04/28/2014	Children's Hospital and Regional Medical Center	Not Seen at This Facility - Unknown Patient		karin neidt

You will see that the referral status for the infant changed from 'Pending' to 'Not Seen at This Facility- Unknown Patient'. This change creates an action for EHDDI staff to contact the infant's PCP and the infant will no longer appear in your pending patients grid on your homepage. You will still be able to search for the infant, however.

Entering Pending Evaluation in Referral Section

In the Referrals section, you can indicate the date of the infant's next diagnostic evaluation. If you enter this date, the infant will not be listed in your pending patients grid on the homepage and the EHDDI program will not contact your clinic for results on this infant until after the date of the reported pending diagnostic evaluation.

- 1) Go to the Referrals section in the infant's record
- 2) Select Add Next Evaluation Date

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Audiologist Main Menu

- Screening Results
- Case Demographics
- Risk Factors
- Physiologic Test / Hearing Loss
- Referrals**
- EI Services

EHDDI#: 19158264 **Name:** BABY GIRL **DOH #:** 20112500130 **Case Status:** Closed
DOB / T: 01/19/2014 / 0845 **Mom's Name:** DUCK, DAISY **Sex:** Female **Birth Order:** Single
RF Present: No **Open Actions:** No **Notebook:** No **Diagnostic Eval:** No

Referrals

Specialist	Referral Date	Facility	Status	Comment	Entered By
Select	03/05/2014	Children's Hospital and Regional Medical Center	Pending		Karin Neidt

Add New Referral

Pending Evaluations

Specialist	Referral Date	Facility	Status	Next Eval	Entered By
No data to display					

Add Next Evaluation Date

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- Enter the date of the infant's next evaluation. If you do not know the exact date of the child's next evaluation (e.g. infant should have evaluation in 6 weeks), you can enter an estimated date and in the comments section write 'estimate'.
- Select Save

Audiologists Home Patient Search Help Contact EHDDI Logoff Change Password Screen 1 of 2 < Prev 1 2 Next >

Audiologist Main Menu

- Screening Results
- Case Demographics
- Risk Factors
- Physiologic Test / Hearing Loss
- Referrals**
- EI Services

EHDDI#: 19158264 **Name:** BABY GIRL **DOH #:** 20112500130 **Case Status:** Closed
DOB / T: 01/19/2014 / 0845 **Mom's Name:** DUCK, DAISY **Sex:** Female **Birth Order:** Single
RF Present: No **Open Actions:** Yes **Notebook:** No **Diagnostic Eval:** Yes

Enter Pending Evaluation

Entered By: karin neidt

* Referral Date: 3/10/2014

Referral Status: Pending

* Specialist: Further evaluation (referred / kept in)

Facility: Children's Hospital and Regional Medical Center
 Children's Hospital and Regional Medical Center
 PO Box 5371, MS W-6640, Audiology
 Seattle WA 98105

* Date of Upcoming Evaluation: 3/30/2014

Comments:

Save Cancel

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Audiologists Home Patient Search Help Contact EHDDI Logoff Change Password Screen 1 of 2 < Prev 2 Next >

EHDDI#: 19158264 **Name:** BABY GIRL **DOH #:** 20112500130 **Case Status:** Closed
DOB / T: 01/19/2014 / 0845 **Mom's Name:** DUCK, DAISY **Sex:** Female **Birth Order:** Single
RF Present: No **Open Actions:** Yes **Notebook:** No **Diagnostic Eval:** Yes

Referrals

Specialist	Referral Date	Facility	Status	Comment	Entered By
Select Audiologist	03/05/2014	Children's Hospital and Regional Medical Center	Pending		Karin Neidt

Add New Referral

Pending Evaluations

Specialist	Referral Date	Facility	Status	Next Eval	Entered By
Select Further evaluation (referred / kept in)	03/10/2014	Children's Hospital and Regional Medical Center	Pending	03/30/2014	karin neidt

Add Next Evaluation Date

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Referring Infants to Other Clinics or Specialists

If you know that an infant is going to be seen at another audiology clinic or by another specialist, please report the referral(s) in the Referrals section in an infant's record. If you refer an infant to another audiology clinic, the infant will then appear in that audiology clinic's pending patients grid. That clinic will then know that the infant was referred to their clinic and that they need to enter diagnostic results for the infant.

In the following example, let's say we are Seattle Children's Hospital Audiology and want to refer the infant to Mary Bridge Audiology

- 1) Go to the Referrals section in the infant's record
- 2) Select Add New Referral

Audiologists Home Patient Search Help Contact EHDDI Logoff Change Password Screen 1 of 2 < Prev 2 Next >

EHDDI#: 19158264 **Name:** BABY GIRL **DOH #:** 20112500130 **Case Status:** Closed
DOB / T: 01/19/2014 / 0845 **Mom's Name:** DUCK, DAISY **Sex:** Female **Birth Order:** Single
RF Present: No **Open Actions:** No **Notebook:** No **Diagnostic Eval:** Yes

Referrals

Specialist	Referral Date	Facility	Status	Comment	Entered By
Select Audiologist	03/05/2014	Children's Hospital and Regional Medical Center	Pending		Karin Neidt

Add New Referral

Pending Evaluations

Specialist	Referral Date	Facility	Status	Next Eval	Entered By
Select Further evaluation (referred / kept in)	03/10/2014	Children's Hospital and Regional Medical Center	Pending	03/30/2014	karin neidt

Add Next Evaluation Date

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3) Choose Audiologist as from the dropdown menu for Specialist

4) Type the first few letters of the clinic's name in the Facility field. In this case, let's start with 'mar' for Mary Bridge.

5) Select on the ellipses (...)

EHHDDI#: 19158264 Name: BABY GIRL DOH #: 20112500130 Case Status: Open
 DOB / T: 01/19/2014 / 0845 Mom's Name: DUCK, DAISY Sex: Female Birth Order: Single
 RF Present: No Open Actions: Yes Notebook: No Diagnostic Eval: Yes

Enter Referral
 Required Fields are in Red
 Entered By: karin neidt
 Referral Date: 4/18/2014
 Referral Type: Reported by Audiologist
 Referral Status: Pending
 Specialist: Audiologist
 Facility Name: _____
 Facility: mary

Referred Due to Risk Factors Only
 Comments: _____

Save Cancel

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- 6) Our library of audiology clinics will appear, filtered to audiology clinics that have names starting with what you entered in the Facility field. You can find other audiology clinics by editing what is entered in the row just below the column headings.
- 7) Click Select for the audiology clinic to which you want to refer.

Select Provider
 Drag a column header here to group by that column

Select	ID#	Type	Facility	Name	Address	City	Phone	Fax
Select	AUDCL6	Audio Clinic	Mary Bridge Speech and Hearing Services		1220 Division	Tacoma	(253)403-4437	2536275004

[Type] Equals 'Audio Clinic' And [Facility] Is like 'mary%' Clear

Cancel

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Audiologists Home Patient Search Help Contact EHDDI Logoff Change Password Screen 1 of 2 < Prev 2 Next >

EHDDI#: 19158264 **Name:** BABY GIRL **DOH #:** 20112500130 **Case Status:** Open
DOB / T: 01/19/2014 / 0845 **Mom's Name:** DUCK, DAISY **Sex:** Female **Birth Order:** Single
RF Present: No **Open Actions:** Yes **Notebook:** No **Diagnostic Eval:** Yes

Enter Referral

Required Fields are in Red

Entered By: karin neidt
Referral Date: 4/18/2014
Referral Type: Reported by Audiologist
Referral Status: Pending
Specialist: Audiologist
Facility Name:
Facility: AUDCL6
Mary Bridge Speech and Hearing Services
1220 Division
Tacoma, WA 984031321

Referred Due to Risk Factors Only:
Comments:

Save Cancel

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8) Select Save.

Audiologists Home Patient Search Help Contact EHDDI Logoff Change Password Screen 1 of 2 < Prev 2 Next >

EHDDI#: 19158264 **Name:** BABY GIRL **DOH #:** 20112500130 **Case Status:** Closed
DOB / T: 01/19/2014 / 0845 **Mom's Name:** DUCK, DAISY **Sex:** Female **Birth Order:** Single
RF Present: No **Open Actions:** No **Notebook:** No **Diagnostic Eval:** Yes

Referrals

Specialist	Referral Date	Facility	Status	Comment	Entered By
Select Audiologist	04/18/2014	Mary Bridge Speech and Hearing Services	Pending		karin neidt
Select Audiologist	03/05/2014	Children's Hospital and Regional Medical Center	Pending		Karin Neidt

Add New Referral

Pending Evaluations

Specialist	Referral Date	Facility	Status	Next Eval	Entered By
Select Further evaluation (referred / kept in)	03/10/2014	Children's Hospital and Regional Medical Center	Pending	03/30/2014	karin neidt

Add Next Evaluation Date

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You can also report that you have referred an infant to other specialists. Audiology clinics, ENTs, Genetics clinics, and Primary Care Providers can be found in our library. For referrals to Neurologists and Early Intervention you can write the facility in the Facility Name field after you have indicated the specialist type in the Specialist field. For example, below are instructions for referring an infant to the Arc of Tri Cities (Early Intervention).

- 1) Go to the Referrals section in the infant's record.
- 2) Select Add New Referral.
- 3) Choose Early Intervention as from the dropdown menu for Specialist.

Audiologists Home Patient Search Help Contact EHDDI Logoff Change Password Screen 1 of 2 < Prev 2 Next >

EHDDI#: 19158264 **Name:** BABY GIRL **DOH #:** 20112500130 **Case Status:** Closed
DOB / T: 01/19/2014 / 0845 **Mom's Name:** DUCK, DAISY **Sex:** Female **Birth Order:** Single
RF Present: No **Open Actions:** No **Notebook:** No **Diagnostic Eval:** Yes

Enter Referral
 Required Fields are in Red

Entered By: karin neidt
 Referral Date: 4/22/2014
 Referral Type: Reported by Audiologist
 Referral Status: Pending
 Specialist:
 Facility Name:
 Facility: Audiologist
 Discharge
 ENT
 Early Intervention
 Referred Due to Risk Factors Only
 Comments: Family Resources Coordinator (FRC)
 Genetics

Save Cancel

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- 4) Write in the facility where the infant was referred.
- 5) Select Save.

Audiologists Home Patient Search Help Contact EHDDI Logoff Change Password Screen 1 of 2 < Prev 2 Next >

EHDDI#: 19158264 **Name:** BABY GIRL **DOH #:** 20112500130 **Case Status:** Closed
DOB / T: 01/19/2014 / 0845 **Mom's Name:** DUCK, DAISY **Sex:** Female **Birth Order:** Single
RF Present: No **Open Actions:** No **Notebook:** No **Diagnostic Eval:** Yes

Enter Referral
 Required Fields are in Red

Entered By: karin neidt
 Referral Date: 4/22/2014
 Referral Type: Reported by Audiologist
 Referral Status: Pending
 Specialist: Early Intervention
 Facility Name: Arc of Tri Cities
 Facility:
 Referred Due to Risk Factors Only
 Comments:
 Save Cancel

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The screenshot shows the EHHDDI system interface for a patient named BABY GIRL. The patient's information includes EHHDDI#: 19158264, DOB / T: 01/19/2014 / 0845, Mom's Name: DUCK, DAISY, Sex: Female, DOH #: 20112500130, Case Status: Closed, Birth Order: Single, and Diagnostic Eval: Yes. The interface displays a 'Referrals' section with a table containing three rows of referral data. A green arrow points to the 'Early Intervention' row.

Specialist	Referral Date	Facility	Status	Comment	Entered By
Select Audiologist	03/05/2014	Children's Hospital and Regional Medical Center	Pending		Karin Neidt
Select Audiologist	04/18/2014	Mary Bridge Speech and Hearing Services	Pending		karin neidt
Select Early Intervention	04/22/2014		Pending		karin neidt

Referring Infants to the ESIT Program (Part C)

Audiologists can use the EHHDDI system to refer infants with hearing loss to Washington's Part C Program, the Early Support for Infants and Toddlers (ESIT) program. The ESIT program provides services for infants and toddlers who have hearing loss (birth to three years of age). Family Resources Coordinators (FRC) in each county help families access services such as family training, counseling, and other early intervention services – including specialized help to meet the unique communication needs of infants and toddlers with hearing loss. Follow these instructions to refer an infant to the ESIT program.

- 1) In the Referrals Section, select Add New Referral.

The screenshot shows the EHHDDI system interface for the same patient. The 'Referrals' section is empty, and the 'Add New Referral' button is highlighted with a red box. The 'Pending Evaluations' section also shows 'No data to display'.

2) In the Specialist field, choose Family Resources Coordinator (FRC) from the dropdown.

The screenshot shows the 'Enter Referral' form in the NEOMETRICS system. The patient information is: EHHDI#: 19158264, Name: BABY GIRL, DOB: 01/19/2014, Mom's Name: DUCK, DAISY, Sex: Female, DOH #: 20112500130, Case Status: Closed, Birth Order: Single, Diagnostic Eval: Yes. The form fields are: Entered By: karin neidt, Referral Date: 4/8/2014, Referral Type: Reported by Audiologist, Referral Status: Pending, Specialist: (dropdown menu), Facility Name: (text field), Facility: (dropdown menu with ellipsis), Referred Due to Risk Factors Only: (checkbox), and Comments: (text area). A green arrow points to the Specialist dropdown menu.

The screenshot shows the 'Enter Referral' form in the NEOMETRICS system. The patient information is: EHHDI#: 19158264, Name: BABY GIRL, DOB: 01/19/2014, Mom's Name: DUCK, DAISY, Sex: Female, DOH #: 20112500130, Case Status: Closed, Birth Order: Single, Diagnostic Eval: Yes. The form fields are: Entered By: karin neidt, Referral Date: 4/8/2014, Referral Type: Reported by Audiologist, Referral Status: Pending, Specialist: (dropdown menu), Facility Name: (text field), Facility: (dropdown menu with ellipsis), Referred Due to Risk Factors Only: (checkbox), and Comments: (text area). The Specialist dropdown menu is open, showing the following options: Audiologist, Discharge, ENT, Early Intervention, Family Resources Coordinator (FRC) (highlighted), and Genetics.

- 3) Indicate the county/Lead FRC where the infant will receive Part C services. Type the first few letters of the county's name in the Facility field.
- 4) Click on the ellipses (...) to take you to the library. In this example we are choosing the Snohomish County Lead FRC.

5) Select the appropriate County Lead FRC

Select	ID#	Type	Facility	Name	Address	City	Phone	Fax
<input type="checkbox"/>	FRC29	Lead FRC	sno					
<input type="checkbox"/>		Lead FRC	Snohomish County Lead FRC	Joan Flesher	3000 Rockefeller, MS 305	Everett	(425)388-7402	

6) Enter in the infant's Primary Contact (mother, father, guardian, etc.) information. Provide as much information as possible. The fields in red are required in order for the referral to go through to the ESIT program.

Please note: you will need to get the parent or guardian's consent to make a referral to Part C through the EHDDI system. By checking the Parent Consent box, you are indicating to EHDDI that parent consent was obtained.

Fix for Duplicate Numbers: You may find that digits are duplicated when you try entering the Primary Contact's phone number and zip code (e.g. 77 when you type 7). This is a web browser compatibility issue. Please follow the instructions on page 27 to fix this problem.

7) Select Save.

Audiologists Home Patient Search Help Contact EHDDI Logoff Change Password Screen 1 of 2 < Prev 2 Next >

EHDDI#: 19158264 **Name:** BABY GIRL **DOB / T:** 01/19/2014 / 0845 **Mom's Name:** DUCK, DAISY **Sex:** Female **Case Status:** Closed
RF Present: No **Open Actions:** No **Notebook:** No **Birth Order:** Single **Diagnostic Eval:** Yes

Enter Referral
 Required Fields are in Red
Entered By: karin neidt
Referral Date: 4/8/2014
Referral Type: Reported by Audiologist
Referral Status: Pending
Specialist: Family Resources Coordinator (FRC)
 Facility Name: _____
Facility: FRC29
 Snohomish County Lead FRC
 3000 Rockefeller, MS 305
 Everett, WA

Referred Due to Risk Factors Only:
Comments: _____

Primary Contact Info
 Required Fields are in Red
Last Name: DUCK
First Name: DAISY
Mailing Address: 1234 Lily Pond Dr.
City: Disney
State: WA
Zip Code: 55555-5555
Phone: (555)-555-5555
E-Mail: _____
Primary Language: English
Relationship: Mother
Parental Consent:

Save **Cancel**

Primary Contact Information

Audiologists Home Patient Search Help Contact EHDDI Logoff Change Password Screen 1 of 2 < Prev 2 Next >

EHDDI#: 19158264 **Name:** BABY GIRL **DOB / T:** 01/19/2014 / 0845 **Mom's Name:** DUCK, DAISY **Sex:** Female **Case Status:** Closed
RF Present: No **Open Actions:** No **Notebook:** No **Birth Order:** Single **Diagnostic Eval:** Yes

Referrals

Select	Specialist	Referral Date	Facility	Status	Comment	Entered By
Select	Family Resources Coordinator (FRC)	04/08/2014	Snohomish County Lead FRC	Pending		karin neidt
Select	Audiologist	04/08/2014	Children's Hospital and Regional Medical Center	Pending		Karin Neidt

Add New Referral

Pending Evaluations

Specialist	Referral Date	Facility	Status	Next Eval	Entered By
No data to display					

Add Next Evaluation Date

NEOMETRICS

The EHDDI system sends referrals to the ESIT system once every hour, so the referral should be received by the ESIT program within the hour. Once the referral is received by ESIT, the County Lead FRC will process the referral and contact the parent.

At this time, you will still need to send diagnostic results to the FRC separately. In the future, the EHDDI system will be able to send diagnostic results you enter along with the referral.

Early Intervention (EI) Services Section

After an infant has been referred to the ESIT Program, an FRC will work with the family and other partners to develop an Individual Family Service Plan (IFSP). This plan ensures that the child will receive the services necessary to reach his or her goals. The IFSP should be created within 45 days of a child's referral to ESIT. Once the IFSP has been completed, the FRC enters the IFSP information into the ESIT system. This information will then be sent to the EHDDI system. You can find what EI services were indicated in an infant's IFSP in the EI Services Section of the EHDDI system.

The screenshot displays the EHDDI system interface. At the top, there are navigation links: Audiologists Home, Patient Search, Help, Contact EHDDI, Logoff, and Change Password. The main content area shows patient information for 'BABY GIRL' (DOB: 01/19/2014, Mom's Name: DUCK, DAISY). Below this, the 'EI Services' section is highlighted, containing a table with the following data:

IFSP Date	Service Type	Start Date	Planned Start Date
08/28/2013	Hearing Services	08/28/2013	08/28/2013

A green arrow points to the 'Hearing Services' row, and a callout box indicates that these services are indicated in the infant's IFSP. The interface also includes a sidebar menu with options like Screening Results, Case Demographics, Risk Factors, and Referrals. The bottom right corner features the 'NEOMETRICS' logo.

Screening Results Section

In this section you can view the newborn hearing screening results that hospitals and clinics have reported to the EHDDI program. Please do not add hearing screening results in this section.

- 1) Click select next to the hearing screening result if you wish to see more details about the hearing screen.

Audiologists Home Patient Search Help Contact EHDDI Logout Change Password Screen 1 of 2 < Prev 1 2 Next >

Audiologist Main Menu

- Screening Results
- Case Demographics
- Risk Factors
- Physiologic Test / Hearing Loss
- Referrals
- EI Services

EHDDI#: 19179213 **Name:** BABY BOY **DOH #:** 20112440345 **Case Status:** Open

DOB / T: 03/04/2014 / 1025 **Mom's Name:** MOUSE, MINNIE **Sex:** Male **Birth Order:** Single

RF Present: No **Open Actions:** No **Notebook:** No **Diagnostic Eval:** No

Screening Results

	NBHS #	Screening Method	Result	Screening Date	Status
Select	20141188002	Repeat Screening ABR	Left ear: Pass, Right ear: Refer for further testing	03/16/2014	Refer
Select	20141188001	Initial Screening TEOAE	Left ear: Refer for further testing, Right ear: Refer for further testing	03/05/2014	Refer

Add Screening Result

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Audiologists Home Patient Search Help Contact EHDDI Logout Change Password Screen 1 of 2 < Prev 1 2 Next >

Audiologist Main Menu

- Screening Results
- Case Demographics
- Risk Factors
- Physiologic Test / Hearing Loss
- Referrals
- EI Services

EHDDI#: 19179213 **Name:** BABY BOY **DOH #:** 20112440345 **Case Status:** Open

DOB / T: 03/04/2014 / 1025 **Mom's Name:** MOUSE, MINNIE **Sex:** Male **Birth Order:** Single

RF Present: No **Open Actions:** No **Notebook:** No **Diagnostic Eval:** No

Update Hearing Screen Information

EHDDI No:

Last Name:

NBHS #:

Screen Type:

Screen No.:

Date of Screening:

Screening Method:

Result Left Ear:

Result Right Ear:

Risk Factors: RF1 RF2 RF3 RF4 RF5 None

Outpatient Provider:

Screen Facility:

Screeener ID:

Screening Refused:

Edit Save and Exit Cancel

[Return to Screen Results Grid](#)

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Case Demographics Section

In this section you can view the infant and mother's demographic information.

Case Demographics Section

Case Information:
EHDDI#: 19179213 Name: BABY BOY DOH #: 20112440345 Case Status: Open
DOB / T: 03/04/2014 / 1025 Mom's Name: MOUSE, MINNIE Sex: Male Birth Order: Single
RF Present: No Open Actions: No Notebook: No Diagnostic Eval: No

Case Demographics

Baby's Information

Name: BABY BOY
Birth Date / Time: 03/04/2014 / 1025
Birth Weight: 3317
Sex: Male
Birth Order: Single
Med Rec ID: 678698
Race: Asian/Pacific Islander Black Native American Other White
Ethnicity: Not Hispanic
Birth Hospital: H0001
Audiologist Med Rec ID: []

Mother's Information

Name: MOUSE, MINNIE
Age: []
Mailing Address: []
City: []
State: []
Zip Code: []
County: []

Buttons: Edit, Save, Cancel

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Risk Factors Section

In this section you can report risk factors for late onset hearing loss.

Audiologists Home Patient Search Help Contact EHDDI Logoff Change Password
Screen 1 of 2 < Prev 1 2 Next >

EHDDI#: 19179213

DOB / T: 03/04/2014 / 1025

RF Present: No

Name: BABY BOY

Mom's Name: MOUSE, MINNIE

Open Actions: No

DOH #: 20112440345

Sex: Male

Notebook: No

Case Status: Open

Birth Order: Single

Diagnostic Eval: No

Instructions

Please use the columns on the right to document patient's risk factors. The default selection for all risk factors is UNKNOWN. Please check off risk factors that apply. Enter additional notes then click Next to submit and proceed to the next page.

Risk Factors Save & Next >>

Please check all that apply Check All No Check All Unknown

	Yes	No	Unknown
General History:			
Parental or caregiver concern regarding:	::	::	::
Hearing	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Speech	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Language	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Developmental Delay	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Other (Explain in Notes)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Family History:			
Family history of permanent childhood hearing loss	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Maternal History:			
In-utero infection:	::	::	::
Cytomegalovirus (CMV)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Rubella	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Syphilis	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Herpes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Toxoplasmosis	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Other (Explain in Notes)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Patient History:			
Low Birth Weight: 1500 to 2500 grams	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Very Low birth weight < 1500 grams	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ototoxic Drugs	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Postnatal infection associated w/ sensorineural hearing loss such as sepsis or bacterial meningitis	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Head Trauma	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Recurrent or persistent otitis media with effusion (OME) for at least 3 months	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Neonatal Indicators:			
Admission to NICU > 5 Days	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
APGAR Score (0-4@1 min or 0-6@5 min)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Hyperbilirubinemia requiring exchange transfusion	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Mechanical ventilation > 5 days	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Condition at birth requiring the use of ECMO	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Other (Explain in Notes)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:			
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
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Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Craniofacial anomalies:	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Pinna	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Abnormal Ear Canal	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Choanal Atresia	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
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Ear Tags	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Malformed Eyes	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

Tips for Using the System

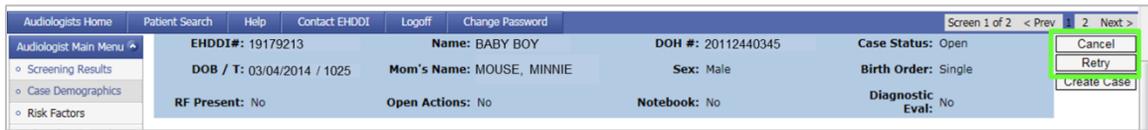
- If you have forgotten your password for the EHDDI application, you can select 'Forgot Password.' This will take you through the steps to reset your password.



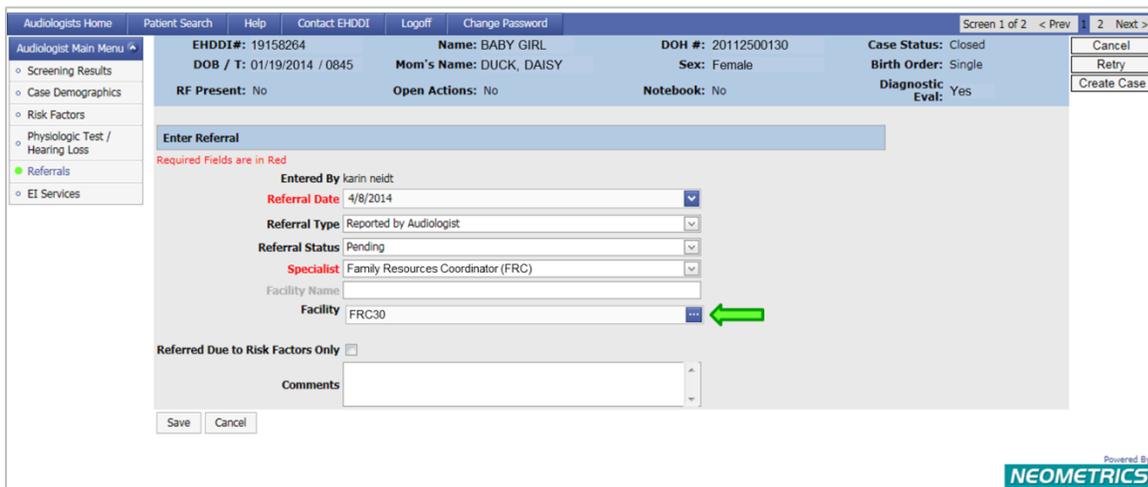
- "Audiologists Home" and "Patient Search" in the top toolbar will bring you to Homepage where you can search for patients and select pending patients from the grid.



- If you are in a patient record, use 'Cancel' or 'Retry' on the right to navigate back to the Homepage.



- Memorize or write down the ID numbers of specialists to which you frequently refer. If you just type the ID into the Facility field when making a referral, the EHDDI system will automatically find the correct referral. For example, just type 'AUDCL6' after selecting Audiologists as a specialist if you want to refer to Mary Bridge. Or just type 'FRC30' after selecting Lead FRC as a specialist if you want to refer to Spokane County's Lead FRC.



Fix for Duplicate Numbers in ESIT Referral

When making a referral to the ESIT program (Family Resources Coordinator), you may find that digits are duplicated when you try entering the Primary Contact's phone number and zip code (e.g. 77 when you type 7). This is a web browser compatibility issue. Please follow these instructions to fix this problem in Internet Explorer.

- 1) Open Internet Explorer 
- 2) If you do not see a Menu bar at top with Tools listed, press the Alt key
- 3) Select Tools > Compatibility View Settings
- 4) Enter the following for the 'Add this website': wa.gov
- 5) Select the Add button – the website added will be listed under 'Websites you've added to Compatibility View'
- 6) Select the Close button at the bottom of the Compatibility View Settings window

