

Nova Scotia Hearing And Speech Centres

Locations

Amherst	667-5400 ext. 6220 (A,S)
Antigonish	867-4197 (A,S)
Bridgewater	543-4603 ext. 2248 (A,S)
Dartmouth	464-3084 (S)
Digby	245-2501 ext. 265 (S)
Evanston	625-3100 ext. 257 (S)
Glace Bay	842-2868 (S)
Halifax Community Clinic	423-7354 (A,S)
IWK Health Centre	
Newborn Hearing:	420-3146(A)
Pediatric site:	428-8049(A,S)
Kentville	678-7381 ext. 1400 (A,S)
Liverpool	354-3436 ext. 246 (S)
Lower Sackville	869-6150 (A,S)
Middleton	825-3411 ext. 233 (S)
Musquodoboit Harbour	889-4117 (S)
New Glasgow	752-7600 ext. 2520 (A,S)
Pictou	485-4324 ext. 125 (S)
Sheet Harbour	885-3628 (S)
Shelburne	875-3011 ext. 270 (S)
Springhill	597-3773 (S)
Sydney	567-7781 (A,S)
Sydney Mines	736-2831 ext. 146 (A,S)
Truro	893-5512 (A,S)
Waterville	538-3103 ext. 156 (S)
Windsor	792-2084 (S)
Yarmouth	742-3541 ext. 364 (A,S)

Services - A: Audiology
S: Speech-Language Pathology

NOVA SCOTIA HEARING AND SPEECH CENTRES



A Sound Start For Your Child

- Your child passed his/her hearing screening. These results are within normal range, however, they do not rule out the possibility of hearing problems occurring in the future.*
- Your child requires further hearing testing. We will contact you in _____ to arrange an appointment.*
- Your child did not have a hearing screening.*

If you have questions or concerns regarding your child's responses to sound or speech language development, please contact the Nova Scotia Hearing and Speech Centre nearest you.



For more information on the NSHSC please visit our website at:
<http://www.NSHSC.ns.ca>

YOUR CHILD'S HEARING IS PRECIOUS

Dear Parents,

Your child's hearing is precious. An undetected or untreated hearing loss can cause delayed speech-language development, social and emotional problems, and school difficulties.

Indicators associated with hearing loss in Infancy are:

- Family history of hearing loss in childhood
- Congenital infection such as toxoplasmosis, syphilis, rubella, cytomegalovirus, and herpes
- Visible malformations of the head, neck or ears, i.e. skin tags or dimples around the ear
- Birthweight less than 1500 grams
- Meningitis
- Jaundice
- Breathing difficulties at birth
- Medications that cause hearing loss
- Admission to the Special Care Nursery
- Syndromes known to be associated with permanent hearing loss or repeated ear infections, i.e. Down Syndrome

Indicators associated with hearing loss in childhood are:

- Parent/caregiver concern regarding hearing or speech-language development
- Childhood illnesses i.e. scarlet fever, mumps
- Recurrent or persistent middle ear infections
- Any of the indicators stated above

Parents play an essential part in identifying hearing loss in their child.

This pamphlet will help you:

- Identify what the average child is doing at different ages.
- Learn what you can do to help your child develop normal speech-language and use their hearing to its *full* extent. This is important whether or not your child has a hearing loss.



A Sound Start For Your Child

0-3 Months



Does your
baby...

- Stir or awaken when sleeping quietly and someone talks.
- Recognize your voice and quiet when you talk to him or her.
- Sometimes startle or jump when there is a very loud sound, like a cough or a dog bark.

If you feel that your baby is not reacting to sound in these ways please see your baby's doctor or call the NSHSC to discuss your concerns.

What you could be doing

- Talk to your baby while you are working around the house.
- Use your baby's name.
- Respond to your baby's cooing and babbling.
- Talk and sing to your baby as you hold him/her close.

3-6 Months



Does your baby...

- Stir or awaken when sleeping quietly and someone talks.
- Recognize your voice and quiet when you talk to him/her.
- Sometimes startle or jump when there is a very loud sound, like a cough or a dog bark.
- Babble for attention.
- Turn his/her head toward voices and interesting sounds.
- Enjoy noise-making toys and music.

If you feel that your baby is not reacting to sound in these ways please see your baby's doctor or call the NSHSC to discuss your concerns.

What you could be doing

- Talk to your baby while you are working around the house.
- Use your baby's name.
- Respond to your baby's cooing and babbling.
- Talk and sing to your baby as you hold him/her close.
- Play games with him/her ("Pat-a-cake", "Peek-a-Boo").

6-12 Months



Does your baby...

- Stir or awaken when sleeping quietly and someone talks.
- Sometimes startle or jump when there is a very loud sound, like a cough or a dog bark.
- Enjoy noise-making toys and music.
- Respond to his/her name.
- Directly turn to a sound made nearby.
- Understand "no" and "bye-bye".
- Imitate speech sounds.
- Make 4 or more different sounds.

If you feel that your baby never does these things or is not reacting to sound in these ways please see your baby's doctor or call the NSHSC to discuss your concerns.

What you could be doing

- Make fun speech sounds to see if your baby imitates you.
- Talk about the things you do together.
- Pay attention to his/her speech sounds.
- Play games with him/her ("Pat-a-cake", "Peek-a-Boo").
- Sing songs and nursery rhymes to your child.
- Read colorful books together and talk about the pictures.

12-18 Months



Does your baby...

- Sometimes startle or jump when there is a very loud sound, like a cough or a dog bark.
- Directly turn to a sound made nearby.
- Follow simple directions ("Go get your coat").
- Use single words (while they may not be clearly pronounced, they are clearly meaningful).

18-24
Months

Does your child...

- Use 2-3 word sentences.
- Follow simple directions ("Go get your book").
- Use his/her own name.
- Have a 50-250 word vocabulary.
- Point to at least one body part when asked.

If you feel that your baby never does these things or is not reacting to sound in these ways please see your baby's doctor or call the NSHSC to discuss your concerns.

What you could be doing

- Talk simply and clearly during daily activities about what you and your child are doing.
- Pay attention to his/her speech.