

Michigan Department of Community Health



Michigan Early Hearing Detection
and Intervention Program

Quarterly Newsletter &
Universal Newborn
Hearing Screening Data
4th Qtr: October—December, 2011

February, 2012

REGISTER NOW!

MICHIGAN EHD CONFERENCE
FRIDAY, MARCH 23, 2012
LANSING, MI

AND

MICHIGAN PARENT DINNER
(for Parents of Children
who are Deaf or Hard of Hearing)
THURSDAY, MARCH 22, 2012
LANSING, MI

REGISTRATION BROCHURE on Pages 7-8
or go to www.events.mphi.org to both view the
registration packet and register online!

Register NOW:

National EHD
Conference,
March 5-6, 2012,
St. Louis, MO.
www.infanthearing.org

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EHD EMAIL NEWS: The EHD Program was converted from GroupWise to Outlook for all email on February 6th. If you have emailed any member of our staff and NOT received an answer promptly, please delete the address from your frequent contact list and type the address in again, even if the address is the same. See the staff listing on page 6 and note the new email address for Lorie Lang to LangL1@michigan.gov.

New equipment purchase on the horizon?

One possible source of funding is the Carls Foundation, founded by William and Marie Carls. Based in Detroit, the Foundation has as one of their main goals to improve children's welfare (primarily in Michigan) through health care facilities and programs, **with special emphasis on the prevention and treatment of hearing loss.**

For more information about this great foundation and their grant application procedures, go to <http://www.carlsfdn.org>.



EHDI Data... Starting with the May 2012 Quarterly Newsletter, all birthing hospital/center screening data will be sent to the full mailing list with every Newsletter. If you have concerns about this new practice, please contact Dee Robertson (RobertsonD2@michigan.gov or 517-373-8601) or Michelle Garcia (GarciaM@michigan.gov or 517-335-8878.)

Happy New Year 2012 **AS WITH EVERY NEW YEAR**—please be extra careful when putting hearing screen dates on hearing cards and filling in the “bubbles” (Zero- “0”– is at the TOP) many hearing reports are coming in with incorrect information. **THANKS for your special attention!**

REMINDER — NEWBORN HEARING SCREENING IS MANDATORY IN MI!

Some recent conversations with EHDI partners have revealed that while most know that PA 31 of 2006 mandates reporting of hearing screens and diagnosed hearing loss in young children, many do not realize that this law lead to Newborn Hearing Screening also being MANDATORY in Michigan. The law established the Newborn Screening (NBS) quality assurance advisory committee to do an annual review of the list of mandated newborn (i.e. metabolic) screens and recommend additions to or deletions from the list, which are then approved by the Michigan Legislature.

Upon recommendation of this Committee, newborn hearing screening was officially added to the NBS panel in 2007. The NBS Annual Reports for 2006 and 2007 are available at www.michigan.gov/newbornscreening.



BOTH EARS, PLEASE! Please remember to screen and report the results for **both** ears on every baby. **Re-screen BOTH ears ONE TIME only**, if needed and time allows, and refer the baby for full audiologic evaluation if either or both ears do not pass on the re-screen.
-THANKS!

It's Calibration Time Again!

It is very important to calibrate your newborn hearing screening equipment once per year. The cost varies per company and contract. Please contact the manufacturer/distributor of your screening equipment for more information:

Gordon Stowe: Please contact the service department at 734-981-3655 or check the website: www.gordonstowe.com.

Natus Medical: Please contact Customer Service or Technical Support at 888-303-0306 or check the website: www.natus.com.

Seeking New Screening Sites!

EHDI has been encouraging homebirth families to get their baby's hearing screened. We have also been developing flyers for midwives to educate parents on the importance of hearing screens for ALL babies. This effort has identified a need for available sites for initial hearing screening for homebirth babies! To fill this gap, EHDI is actively seeking new screening sites for babies born at home throughout Michigan, with special emphasis on rural areas and the Grand Rapids area.

If you have the equipment and willingness, EHDI can provide access to on-line training, proper protocols, best practices and application to be a screen site!

If your site is interested, has the proper equipment, training and ability, and can follow the EHDI best practice guidelines, let us know! Please contact EHDI Program Consultant Nan Asher at AsherN@michigan.gov or any EHDI staff member to get started today.



THANKS!!! For all you do to help our precious children have the best start in life possible!

Gene Therapy News: On December 19 [2011], *Science Daily* featured an article on gene therapy for ears. For the first time ever, chitosan nanoparticles have been used as a carrier for gene therapy in the ear. Chitosan is produced from shrimp shells. "Gene therapy may someday be an alternative to using surgery to implant CI, cochlear implants, in the deaf and hard of hearing," says Sabina Strand, at NTNU's Department of Biotechnology. Gene therapy has the potential to slow the loss of hair cells and promote the growth of hair cells that have already been damaged. Normal hearing depends on the presence of healthy hair cells in the inner ear. In this study, researchers attempted to use chitosan as a carrier to deliver drugs and genes to the inner ear in guinea pigs. Chitosan was able to deliver drugs through the membrane that covers the tiny gap between the middle ear and inner ear. Chitosan was also able to deliver genes to the hair cells. Whether or not the results from guinea pigs can be transferred to human ears remains uncertain. For more information, see the original article at <http://www.alphagalileo.org>. From the "EHDI E-mail Express" 12/2011.

Do You Know About G.I.N.A.?

GINA, the Genetic Information Nondiscrimination Act of 2008, prohibits discrimination on the basis of genetic testing and genetic information in any aspect of employment. This includes personal genetic information, genetic testing, medical history or manifestation of a disease or disorder in an individual's family members, for any purpose—choosing applicants for jobs, provision of health insurance, or assignment of work duties or promotions.

For more information on GINA , please check the website:

<http://www1.eeoc.gov/laws/types/genetic.cfm>

EHDI Welcomes New Staff!

Amanda Brunger joined the EHDI staff as our new secretary on December 12th, with two Associate's degree and extensive employment background focused on early childhood education and development. She is also a proud wife and mother to three sons, ages 10, 9, & 4, and enjoys an occasional "dose" of dark chocolate.

Rashel Fredell joined EHDI on January 10th as our Student Assistant. She has a B.A. in Elementary Education with a Deaf Education focus, a B.A. in Theatre, and is currently enrolled in the Lansing Community College (LCC) Sign Language Interpreter Training Program.

The EHDI Program is very pleased to have both of these enthusiastic and hard working women on our team!



Rashel Fredell and Amanda Brunger

Michigan Hands & Voices and Guide By Your Side News



HANDS &
VOICES™



GUIDE BY
YOUR SIDE™

THE TRAINING CONTINUES with two of Michigan's GBYS Parent Guides attending the National EHDI Conference in St. Louis, MO in early March. As always, the Parent Guides attending this conference will be seeking information on how to better serve our parents of children who are deaf or hard of hearing better. They will share this information with all of our Parent Guides. Constantly seeking to improve our program and keep all Parent Guides trained on the best ways to support parents and families of children who are deaf or hard of hearing is a never-ending goal for the GBYS program.

If you would like to become (more) involved with MI H&V/GBYS, or would like more information, please contact EHDI Parent Consultant Denise Farrand at 517-241-7066 or FarrandD@michigan.gov.

SMILE—

Spring is
just around
the corner!



The Michigan EHDI Program is a part of the Michigan Department of Community Health and works with hospitals and clinics to identify newborns and infants who have a hearing loss. While the hospitals do the hearing screens of newborns, the EHDI program works with community providers to promote follow-up for hearing screens and develops educational and resource information for families. The EHDI program is funded with screening card fees and two federal grants from the Maternal Child Health Bureau (MCHB) and the Centers for Disease Control and Prevention (CDC).

Michigan Early Hearing Detection and Intervention (EHDI)

Washington Square Building
109 W. Michigan Avenue—3rd Floor
PO Box 30195
Lansing, MI 48909-7695

Phone: 517-335-8955
Fax: 517-335-8036



Michigan Early Hearing Detection
and Intervention Program

Michigan Department
of Community Health



Do you have feedback on the newsletter format or content? Would you like to submit an article for our next newsletter or a question for the "Screener Q & A" column? We would like to hear from you! Contact Dee Robertson at 517-373-8601 or RobertsonD2@michigan.gov.

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
Early Hearing Detection and Intervention
 Division of Family and Community Health
 109 W. Michigan Avenue, 3rd floor
 P.O. Box 30195
 Lansing, MI 48909

Position	Name	Phone	E-mail
Infant Health Unit Manager	Jeff Spitzley, MA	517/335-8131	SpitzleyJ2@michigan.gov
Follow-up Consultant	Michelle Garcia, Au.D., CCC-A	517/335-8878	GarciaM@michigan.gov
Audiology Consultant	Lorie Lang, MA, CCC-A	517/335-9125	LangL1@michigan.gov
Parent Consultant	Denise Farrand, BS	517/241-7066	FarrandD@michigan.gov
Community Consultant	Dee Robertson, MA	517/373-8601	RobertsonD2@michigan.gov
Program Consultant	Nan Asher, MLS	517/335-8273	AsherN@michigan.gov
Data Analyst	Erin Estrada, BA	517/335-8916	EstradaE@michigan.gov
Epidemiologist	-vacant-		
Secretary	Amanda Brunger	517/335-8955	BrungerA@michigan.gov
Student Assistant	Rashel Fredell	517/335-7835	FredellR@michigan.gov

VOICE 517-335-8955, FAX 517-335-8036

Michigan EHDI Web page: www.michigan.gov/EHDI

National Newborn Hearing Websites

American Academy of Pediatrics

www.aap.org

Hands & Voices

www.handsandvoices.org

CDC EHDI

<http://www.CDC.GOV/ncbddd/ehdi>

e-mail: ehdi@cdc.gov

National Center for Hearing Assessment and Management

<http://www.infanthearing.org>

Marion Downs National Center for Infant Hearing

<http://www.colorado.edu/slhs/mdnc>

e-mail: mdnc@colorado.edu

National Institute on Deafness and Other Communication Disorders

<http://www.nih.gov/nidcd.recomnd.htm>

<http://www.nih.gov/nidcd/homepage.htm>

Act No. 31
Public Acts of 2006
Approved by the Governor
February 22, 2006
Filed with the Secretary of State
February 23, 2006
EFFECTIVE DATE: February 23, 2006

**STATE OF MICHIGAN
93RD LEGISLATURE
REGULAR SESSION OF 2006**

Introduced by Senators George, Hardiman, Allen, Birkholz, Kuipers, Goschka, McManus, Jacobs and Bernero

ENROLLED SENATE BILL No. 794

AN ACT to amend 1978 PA 368, entitled "An act to protect and promote the public health; to codify, revise, consolidate, classify, and add to the laws relating to public health; to provide for the prevention and control of diseases and disabilities; to provide for the classification, administration, regulation, financing, and maintenance of personal, environmental, and other health services and activities; to create or continue, and prescribe the powers and duties of, departments, boards, commissions, councils, committees, task forces, and other agencies; to prescribe the powers and duties of governmental entities and officials; to regulate occupations, facilities, and agencies affecting the public health; to regulate health maintenance organizations and certain third party administrators and insurers; to provide for the imposition of a regulatory fee; to provide for the levy of taxes against certain health facilities or agencies; to promote the efficient and economical delivery of health care services, to provide for the appropriate utilization of health care facilities and services, and to provide for the closure of hospitals or consolidation of hospitals or services; to provide for the collection and use of data and information; to provide for the transfer of property; to provide certain immunity from liability; to regulate and prohibit the sale and offering for sale of drug paraphernalia under certain circumstances; to provide for the implementation of federal law; to provide for penalties and remedies; to provide for sanctions for violations of this act and local ordinances; to provide for an appropriation and supplements; to repeal certain acts and parts of acts; to repeal certain parts of this act; and to repeal certain parts of this act on specific dates," (MCL 333.1101 to 333.25211) by adding sections 5430 and 5432.

The People of the State of Michigan enact:

Sec. 5430. (1) The newborn screening quality assurance advisory committee is created in the department. The newborn screening quality assurance advisory committee shall consist of 10 members and be appointed by the department as follows:

- (a) One individual representing a Michigan nonprofit health care corporation.
- (b) One individual representing the Michigan health and hospital association.
- (c) One individual representing the Michigan state medical society.
- (d) One individual representing the Michigan osteopathic association.
- (e) One individual representing the department's medical services administration.
- (f) One individual representing the department's public health administration.
- (g) One individual who is a neonatologist with experience and background in newborn screening.
- (h) One individual representing health maintenance organizations.
- (i) Two individuals representing the general public.

(2) The newborn screening quality assurance advisory committee shall meet annually to review the list of newborn screening tests required under section 5431 and under department rules, regulations, and guidelines. The newborn screening quality assurance advisory committee shall, on an annual basis, submit a written report to the department regarding the appropriateness of the existing list of required newborn screening tests. The newborn screening quality assurance advisory committee shall also include in the report recommendations to revise the list to include additional newborn screening tests that are nationally recognized in the scientific literature or national standards for conditions that can be ameliorated or treated if identified by a newborn screening test and to remove certain tests that are no longer supported in the scientific literature or national standard as being effective for ameliorating or treating conditions that can be identified by newborn screening.

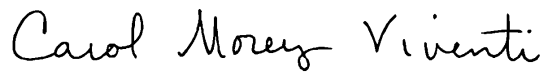
(3) The newborn screening quality assurance advisory committee shall conduct a financial review of any recommended changes to the list of newborn screening tests and shall include in the written report required under subsection (2) a recommendation for the increase or decrease in the amount charged pursuant to section 5431 for newborn screening tests. The recommended change shall not exceed any net change in the amount of the actual cost of any proposed additional tests and follow-up minus savings from any proposed deleted tests and follow-up.

(4) Within 30 days after the department has received the report required under subsection (2), the department may approve or reject the recommendations of the newborn screening quality assurance advisory committee. If the department does not reject the recommendations or fails to act within the 30 days, then the recommendations shall be forwarded to the standing committees in the senate and house of representatives that consider issues pertaining to public health for approval.

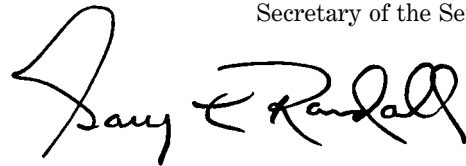
(5) Within 45 days after the recommendations are forwarded and received, the legislature shall approve or reject those recommendations without amendment by concurrent resolution adopted by both standing committees of the senate and house of representatives that consider issues pertaining to public health and both houses of the legislature by recorded vote. If the proposed recommendations are not submitted on a legislative session day, the 45 days commence on the first legislative session day after the recommendations are submitted. The 45 days shall include not less than 9 legislative session days. If the recommendations are not rejected within the 45-day period, the recommendations shall be considered approved, shall be adopted by the department, and shall take effect 6 months after the recommendations are adopted by both houses of the legislature or considered approved as provided under this subsection.

Sec. 5432. If a health professional in charge of the care of a newborn infant or, if none, the health professional in charge at the birth of an infant, the hospital, the health department, or other facility administers or causes to be administered to the infant a hearing test and screening, then that person or facility shall report to the department, on a form as prescribed by the department, the results of all hearing tests and screens conducted on infants who are less than 12 months of age and on children who have been diagnosed with hearing loss and are less than 3 years of age. The report shall include the type, degree, and symmetry of the diagnosis, along with where and when the diagnosis was made.

This act is ordered to take immediate effect.



Secretary of the Senate



Clerk of the House of Representatives

Approved

.....
Governor



2012 Michigan EHDI CONFERENCE

For Parents, Audiologists, and Interventionists

The Michigan EHDI Conference is intended for families of young children with hearing loss and professionals who work with children who are deaf or hard of hearing.

Friday
MARCH 23, 2012
Radisson Hotel • Lansing, Michigan.

PRE-CONFERENCE PARENT DINNER
Thursday, March 22, 2012.



Online Registration Available at www.events.mphi.org.

SUPPORTED IN PART BY:
THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, HEALTH RESOURCES & SERVICES ADMINISTRATION

SPONSORED BY:



COORDINATED BY:



PURPOSE

To improve early identification of hearing loss and access to early intervention services for infants, children and their families by providing a learning experience for parents and professionals.

GOALS

- To provide practical information for parents/families about early diagnosis and intervention services for infants with hearing loss.
- To increase the skill and knowledge base of childhood specialists who work with children who are deaf or hard of hearing.

LOCATION & LODGING

Radisson Hotel Lansing at the Capitol

111 N. Grand River

Lansing, MI 48833.

517-482-0188 or 1-800-333-3333

Reservations online: www.radisson.com/lansingmi

Use Promotional Code: **EHD112**.

Attendees are responsible for their own room reservations and cost. Overnight reservations at the Radisson Hotel Lansing must be made by **March 8, 2012**, to receive the \$65.00 group rate.

CONTINUING EDUCATION

Application will be made for the following disciplines:

- Audiologist/Speech-Language Pathologist: ASHA CEU.
- Teachers: SB CEU.
- AG Bell Academy: LSL.
- Sign Language Interpreters: RID & MI BEI/EIPA/QA.
- Nursing CE.
- Other continuing education may be available in the future.

**Partial credit may be awarded, more information available at the conference.*



MDCR-DODHH has approved MI BEI/EIPA/QA unit sponsorship for this CEU event for 4.0 professional studies or general studies units. Partial MI BEI/EIPA/QA units will be awarded for this event and participants will receive a certificate of attendance within 45 days of event.



REGISTRATION FEES

- Parent of a young child with hearing loss \$25.
- Family (2 persons) of a young child with hearing loss \$45.
- Professionals working with young children with hearing loss \$75.
- Students \$25.

Other fees may apply. Please see the registration form for more details.

SCHOLARSHIPS

A limited number of scholarships are available to cover registration fees for parents of children who are deaf or hard of hearing. Please contact Denise Farrand, EHDI Parent Consultant, for further information: Phone: 517-241-7066 or Email: FarrandD@michigan.gov.

CANCELLATION

Refunds will not be offered for cancellations made at any time after registration. Payment is required prior to the conference date. Cancellations made by participants due to inclement weather conditions and weather related emergencies are subject to the full registration fee and will not receive a refund.

EXHIBITOR/SPONSORS

If you are interested in sponsoring a portion of the conference or having an exhibit table, please contact Sherri Hines, 517-324-8356.

Please Note: Due to flu season, we ask if you experience any symptoms related to the flu, please stay home and do not attend this event. Contact MPHI either by phone or email (eandreg@mphi.org) if you will not be attending. To learn more about the flu and what you can do, please visit www.flu.gov or call 800-232-4636.

AGENDA

THURSDAY, MARCH 22

PRE-CONFERENCE PARENT DINNER
HOSTED BY MICHIGAN HANDS & VOICES GUIDE BY YOUR SIDE.

6:00 - 7:00 PM NETWORK, SOCIALIZE & SHARE OVER DINNER.

7:00 - 8:00 PM IT'S A FAMILY AFFAIR – DINAH BEAMS

Dinah is both a professional working with families who have children who are deaf and hard of hearing and a family member, as her younger brother has a congenital profound hearing loss. Drawing from her experience, both professionally and personally, Dinah will share examples of the impact of childhood hearing loss on both the nuclear family and the extended family. Come prepared to smile, laugh, perhaps cry a little, and be challenged to think of new ways to involve your whole family in the journey of a lifetime!

FRIDAY, MARCH 23

8:00 AM REGISTRATION & EXHIBITS OPEN.

9:00 AM WELCOME AND EHDI UPDATE.

9:15 AM ASSESSMENT FOR ALL – DINAH BEAMS

In order to provide effective intervention for young children who are deaf and hard of hearing, it is essential that professionals incorporate appropriate assessments into their programming. This presentation will examine appropriate assessments for this population, share strategies to implement assessments into programs, and analyze how outcomes can be used to guide intervention goals and strategies, analyze program efficacy, and enhance future program development.

10:15 AM BREAK & MEET THE EXHIBITORS.

10:35 AM CONCURRENT SESSIONS.

A1: DEAF PLUS PART 1: SUPPORTING FAMILIES – DINAH BEAMS

Approximately 40% of children served by EHDI programs are identified with additional challenges; effectively serving the children and their families requires additional skills. This presentation will examine the unique support needs of the families and some different strategies for meeting their needs. Part 1 will provide an overview of the support and strategies that can be utilized to help families.

B1: AUDIOLOGIC EVALUATION OF THE “DIFFICULT TO TEST” CHILD – ALISON GRIMES

It is estimated that 30-40% of children with hearing loss have at least one additional disability. Further, the American Academy of Pediatrics has called for audiologic evaluation for all children suspected of being on the autism spectrum. For these reasons, audiologists often need to evaluate children who are difficult to test. Techniques for testing children with visual impairment, intellectual disability and other developmental disorders will be outlined. Limitations to behavioral and electrophysiologic assessments in these populations will be highlighted.

12:00 PM NETWORKING LUNCH.

12:45 PM INSPIRATIONAL PRESENTER – MICHIGAN HIGH SCHOOL STUDENT.

1:00 PM BREAK - VISIT EXHIBITORS.

1:15 PM CONCURRENT SESSIONS.

A2: DEAF PLUS PART 2: SUPPORTING FAMILIES – DINAH BEAMS

Approximately 40% of children served by EHDI programs are identified with additional challenges; effectively serving the children and their families requires additional skills. This presentation will examine the unique support needs of the families and some different strategies for meeting their needs. This presentation will build on the information received in Part 1.

B2: NEW PART C RULES AND REGULATIONS – MICHELE EADDY

In the fall of 2011, the U.S. Department of Education issued the final IDEA Part C regulations which govern early intervention services for infants and toddlers with disabilities. This session will provide service providers and parents an overview of the new regulations, including some key changes concerning referral/evaluation timelines, service coordination, transition, confidentiality, and use of insurance.

2:30 PM BREAK - VISIT EXHIBITORS.

2:50 PM **JCIH & EHDI: WHERE WE'VE BEEN, WHERE ARE WE NOW, AND WHERE DO WE GO FROM HERE? – ALISON GRIMES**

The Joint Committee on Infant Hearing has a current 2007 position statement and an EHDI Best Practices statement in process. This presentation will highlight best practices in the EHDI process, including the roles of the parent, the audiological/medical providers, and the school-based personnel and other interventionists.

3:50 PM CLOSING AND ADJOURNMENT.

PRESENTERS

DINAH BEAMS, MA, CED is the Program Coordinator for the Colorado Home Intervention Program at the Colorado School for the Deaf and the Blind. She has served in a leadership position with the program for more than fourteen years. Responsibilities in this position include coordinating services for families with newly-identified children; hiring and training providers; supervision of program providers statewide; curriculum and program development; and system building. Previous experience includes working as an Outreach Specialist for Beginnings for Parents of Children who are Deaf and Hard of Hearing in Raleigh, North Carolina and as both a classroom and an itinerant teacher for students who are deaf and hard of hearing in Colorado. Dinah is the author of the CHP Parent Manual and the Curriculum for Sign Language Instructors. Additionally, she was a contributor to the 2004 edition of the SKI-HI Curriculum. She was instrumental in the development of the Integrated Reading Project, a program to encourage early literacy development. In addition, she serves as a Board member of Colorado Families for Hands & Voices.

MICHELE R. EADDY, J.D. graduated from the University of Michigan (B.A., 1985) and the University of Illinois College of Law (J.D., 1988). She is a member of the State Bar of Michigan, Ingham County Bar Association, and the American Bar Association.

Ms. Eaddy is a member and a Past President of the Michigan Council of School Attorneys. She is also a member of the Women Lawyers Association of Michigan and Lansing Black Lawyers Association. She is a frequent speaker on special education and other school law topics.

Ms. Eaddy joined the Thrun Law Firm in East Lansing, Michigan in 2001. Her practice focuses on special education law, student issues, employment law, and general school law.

ALISON GRIMES, AU.D. is Head of the Audiology Clinic at Ronald Reagan-UCLA Medical Center, and an Assistant Clinical Professor in Head and Neck Surgery at the David Geffen School of Medicine. She directs the Newborn Hearing Screening Program at UCLA, including developing policies and procedures, screener training, annual education for nurses and physicians, and quality-improvement activities. In the clinic she provides hands-on re-screening, audiologic diagnostic evaluations and hearing aid fittings for infants. Included in direct care activities are parent/family counseling, on-going surveillance of infants and children with hearing loss, collaboration with the Early Intervention team, and collaboration with medical specialists including the UCLA Cochlear Implant program.

Dr. Grimes serves as one of the American Academy of Audiology representatives to the Joint Committee on Infant Hearing. She is also a Past-President of the American Academy of Audiology, and has served on the board of the American Auditory Society. In collaboration with the Centers for Disease Control Early Hearing Detection and Intervention Program (CDC-EHDI), Dr. Grimes chairs the Provider Education Committee.

REGISTRATION

REGISTER ONLINE AT WWW.EVENTS.MPHI.ORG.

Name _____

Title _____

Agency _____

Address _____

City _____ State _____ Zip _____

Is this your Agency Address Home Address

Phone _____

Email _____

FEES

- | | |
|--|---------|
| <input type="checkbox"/> Parent of a young child with hearing loss | \$25.00 |
| <input type="checkbox"/> Family (2 persons) of a young child with hearing loss | \$45.00 |
| <input type="checkbox"/> Professional | \$75.00 |
| <input type="checkbox"/> Student | \$25.00 |
| <input type="checkbox"/> Late Fee (after 3/8/12) | \$25.00 |
| <input type="checkbox"/> Continuing Education Fee | \$15.00 |
| <input type="checkbox"/> Parent Dinner (not attending the conference) | \$10.00 |
| <input type="checkbox"/> Parent Dinner (attending the conference) | \$ 0.00 |

TOTAL FEE \$ _____

Make Checks Payable to: **MPHI.**

PAYMENT METHOD

Payments must be received by 3/8/12 to avoid late fee.

- Payment Enclosed Pay at Conference (additional \$25.00 fee will apply)
 Parent Scholarship Requested - please see Scholarship Section on page 1.

SPECIAL NEEDS

- Interpreter type _____ Assistive Listening Device type _____
 Other - call MPHI.

MEALS

Parent Dinner: Chicken Meal Vegetarian Meal

Conference: Salmon Meal Pasta/Vegetarian Meal
 Other Special Needs - call MPHI.

CONCURRENT SESSIONS

Morning (choose one) A1 B1 Afternoon (choose one) A2 B2.

PLEASE SEND REGISTRATION FORM WITH PAYMENT TO:

MPHI Education & Training
2440 Woodlake Circle, Suite 150
Okemos, MI 48864
Or FAX to: 517-324-6080.

REGISTRATIONS & PAYMENTS ARE DUE BY MARCH 8, 2012

If you have any questions regarding registration, please call 517-324-8330. No onsite registration will be accepted. Onsite payment will be accepted (\$25.00 late fee applies).