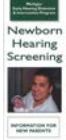










Early Hearing Detection & Intervention Order Form
P.O. Box 30195, Lansing, MI 48909
Phone: 517-335-8955

Please fax order form to: 517-335-8036

	<p>Michigan's Newborn Hearing Screening Program-Brochure A parent brochure explaining the hearing screening process. The content is in a question and answer format coupled with a developmental milestone schedule.</p>	<p># of packages: (100 for English & 50 for Spanish & Arabic) ____ English (0474) ____ Spanish (0474s) ____ Arabic (0474a)</p>
	<p>Services for Children Who are Deaf or Hard of Hearing: A Guide for Families and Providers (each) (100 pages) For providers and families of children with hearing loss, provides information on hearing loss, communication options, early intervention and state and national resources.</p>	<p># of packages: (one per package) ____ English (0376) ____ Spanish (0376s)</p>
	<p>Guidelines for Newborn Hearing Services (56 pages) Provides direction and consistency in the standard of care for Michigan's newborns for the medical home, newborn hearing screening, diagnostic evaluation, genetic evaluation referral and early intervention.</p>	<p># of packages: (one per package) ____ English (1132)</p>
	<p>Hearing Screening Results Crib Card For birth hospitals to document the newborn hearing screen results for families and provide information on language development.</p>	<p># of packages: (100 per package) ____ English (1223) ____ Spanish (1223s) ____ Arabic (1223a)</p>
	<p>Guide By Your Side Brochure A parent-to-parent support program for families with young children who have a diagnosed hearing loss. Contact information provided allows families to connect with another parent of a child with hearing loss.</p>	<p># of packages: (50 per package) ____ English (1411)</p>
	<p>Michigan Hands & Voices Brochure (each) An organization dedicated to non-biased support to families who have children who are deaf or hard of hearing, this brochure provides information on the organization along with sign-up instructions.</p>	<p># of packages: (one per package) ____ English</p>
	<p>Babies & Hearing Notebook (\$25.00/each) *Notebook will be sent with an invoice for payment. 3-ring binder which provides information for families on hearing loss and early intervention.</p>	<p># of notebooks: (\$25.00/notebook) ____ English</p>
	<p>Loss & Found DVD (each) For birth hospitals or other providers to utilize in educating parents when babies do not pass the initial newborn hearing screening and to encourage families to follow through with further testing.</p>	<p># of packages: (one per package) ____ English</p>
	<p>Early Hearing Detection & Intervention Program Order Form (each) For further distribution of EHD materials and resources.</p>	<p>1- Order Form (one per order)</p>

**EHD reserves the right to restrict quantity of brochures to hospitals based on birth population/need.*

Name: _____ Date: _____
 Organization: _____
 Phone: _____ Email: _____
 Address: _____
 City: _____ State: _____ Zip: _____