

Three-Pronged Approach (TPA)

Summary Form Addressing Vision and Hearing Concerns

I. PARENT/CAREGIVER INTERVIEW

A. The parent/caregiver has concerns about the child's vision and/or hearing at this time: No Yes

If yes, the concern is related to the child's:

Vision Hearing Speech/Language (need to rule out hearing loss)

B. Describe the concerns regarding the child's hearing or vision skills development:

C. Note factors in family or medical history that might indicate higher risk for hearing/vision concerns:

Results of Final Newborn Hearing Screening: Pass Did not pass/Refer Missed/not done Unknown

Results of prior evaluation by eye care professional, optometrist or ophthalmologist:

