

# DEAF-BLIND Definition and Criteria from Minnesota Rules - Department of Education

*To determine if your student qualifies deafblind, follow the Minnesota rules in column one for Deaf-Blind.  
The student must also meet the criteria for both and deaf and hard of hearing (column two) and visually impaired (column three).*

<b>Minnesota Rules*</b> <b>3525.1327</b> <b>DEAF-BLIND</b>	<b>Minnesota Rules</b> <b>3525.1331</b> <b>DEAF AND HARD OF HEARING</b>	<b>Minnesota Rules</b> <b>3525.1345</b> <b>VISUALLY IMPAIRED</b>
<p>Subpart 1. <b>Definition and criteria.</b> “Deaf-blind” means medically verified visual loss coupled with medically verified hearing loss, that, together, interfere with acquiring information or interacting in the environment. Both conditions need to be present simultaneously, and the pupil must meet the criteria for both visually impaired and deaf and hard of hearing to be eligible for special education and services under this category.</p> <p>Subpart 2. <b>Pupils at risk.</b> Pupils at risk of being deaf-blind include pupils who:</p> <p>A. are already identified as deaf or hard of hearing or visually impaired but have not yet had a medical or functional evaluation of the other sense (vision or hearing)</p> <p>B. have an identified condition, such as Usher Syndrome or Optic Atrophy, that includes a potential deterioration of vision or hearing in the future</p> <p>C. have medically or functionally identified hearing loss and a verified deficit in vision determined by a functional evaluation in the learning environment</p> <p>D. have medically or functionally identified vision impairment and verified hearing loss determined by a functional evaluation in the learning environment</p> <p>E. have an identified syndrome or condition that includes hearing and vision loss in combination with multiple disabilities, for example, CHARGE Syndrome. -End of MN Rule-</p> <p><u><b>Consider the following conditions/etiologies:</b></u>  <i>Alport syndrome</i>  <i>Alstrom syndrome</i>  <i>Apert syndrome (Acrocephalosyndactyly, Type 1)</i>  <i>Bardet-Biedl syndrome (Laurence Moon-Biedl)</i>  <i>Batten disease</i>  <i>CHARGE syndrome (over)</i></p>	<p>Subpart 1. <b>Definition.</b> "Deaf and hard of hearing" means a diminished sensitivity to sound, or hearing loss, that is expressed in terms of standard audiological measures.</p> <p>Hearing loss has the potential to affect educational, communicative, or social functioning that may result in the need for special education instruction and related services.</p> <p>Subpart 2. <b>Criteria.</b> A pupil who is deaf or hard of hearing is eligible for special education instruction and related services <u>if the pupil meets one of the criteria in item A and one of the criteria in item B, C, or D.</u></p> <p>A. There is audiological documentation provided by a certified audiologist that a pupil has one of the following:</p> <ol style="list-style-type: none"> <li>1. a sensorineural hearing loss with an unaided pure tone average, speech threshold, or auditory brain stem response threshold of 20 decibels hearing level (HL) or greater in the better ear;</li> <li>2. a conductive hearing loss with an unaided pure tone average or speech threshold of 20 decibels hearing level (HL) or greater in the better ear persisting over three months or occurring at least three times during the previous 12 month as verified by audiograms with at least one measure provided by a certified audiologist;</li> <li>3. a unilateral sensorineural or persistent conductive loss with an unaided pure tone average or speech threshold of 45 decibels hearing level (HL) or greater in the affected ear;</li> <li>4. a sensorineural hearing loss with unaided pure tone thresholds at 35 decibels hearing level (HL) or greater at two or more adjacent frequencies (500 hertz, 1000 hertz, 2000 hertz, or 4000 hertz) in the better ear.</li> </ol> <p>B. The pupil’s hearing loss affects educational performance as demonstrated by:</p> <p style="text-align: center;"><i>(over)</i></p>	<p>Subpart 1. <b>Definition.</b> “Visually impaired” means a medically verified visual impairment accompanied by limitations in sight that interfere with acquiring information or interaction with the environment to the extent that special education instruction and related services may be needed.</p> <p>Subpart 2. <b>Criteria.</b> A pupil is eligible as having a visual disability in the need of special education when the <u>pupil meets one of the criteria in item A and one in the criteria in item B:</u></p> <p>A. Medical documentation of a diagnosed visual impairment by a licensed eye specialist establishing one or more of the following conditions:</p> <ol style="list-style-type: none"> <li>1. visual acuity of 20/60 or less in the better eye with the best conventional correction;             <ol style="list-style-type: none"> <li>a. estimation of acuity is acceptable for difficult-to-test pupils; and</li> <li>b. for pupils not yet enrolled in kindergarten, measured acuity must be significantly deviant from what is developmentally age-appropriate;</li> </ol> </li> <li>2. visual field of 20 degrees or less, or bilateral scotomas (blind spot); or</li> <li>3. a congenital or degenerating eye condition including, for example, progressive cataract, glaucoma, or retinitis pigmentosa; and</li> </ol> <p>B. Functional evaluation of visual abilities conducted by a licensed teacher of the visually impaired that determines that the pupil:</p> <ol style="list-style-type: none"> <li>1. has limited ability in visually accessing program-appropriate educational media and materials including, for example, textbooks, photocopies, ditto copies, chalkboards, computers, or environmental signs, without modification;</li> </ol> <p style="text-align: center;"><i>(over)</i></p>

<b>CONDITIONS &amp; ETIOLOGIES:</b> <i>(continued)</i>	<b>DEAF AND HARD OF HEARING (pg. 2)</b>	<b>VISUALLY IMPAIRED (pg. 2)</b>
<p><i>Chromosome 18, Ring</i>  <i>Cockayne syndrome</i>  <i>Cogan syndrome</i>  <i>Cornelia de Lange syndrome</i>  <i>Cri du chat syndrome (deletion 5p- syndrome)</i>  <i>Crouzon syndrome (Craniofacial Dysostosis)</i>  <i>Down syndrome (Trisomy 21)</i>  <i>Goldenhar syndrome</i>  <i>Herpes-Zoster (or Hunt syndrome)</i>  <i>Hunter Syndrome (MPS II)</i>  <i>Hurler syndrome (MPS I-H)</i>  <i>Kearns-Sayre syndrome</i>  <i>Leber congenital amaurosis (LCA)</i>  <i>Marshall syndrome</i>  <i>Maroteaux-Lamy syndrome (MPS VI)</i>  <i>Moebius syndrome</i>  <i>Monosomy 10p</i>  <i>Morquio syndrome (MPS IV-B)</i>  <i>NF1 - Neurofibromatosis (von Recklinghausen disease)</i>  <i>NF2 - Bilateral Acoustic Neurofibromatosis</i>  <i>Norrie disease</i>  <i>Pfeiffer syndrome</i>  <i>Pierre-Robin syndrome</i>  <i>Refsum syndrome</i>  <i>Scheie syndrome (MPS I-S)</i>  <i>Smith-Lemli-Opitz (SLO) syndrome</i>  <i>Stickler syndrome</i>  <i>Treacher Collins syndrome</i>  <i>Trisomy 13 (Trisomy 13-15, Patau syndrome)</i>  <i>Trisomy 18 (Edwards syndrome)</i>  <i>Usher I, Usher II, Usher III syndromes</i>  <i>Wolf-Hirschhorn syndrome (Trisomy 4p)</i></p> <p><i>prematurity • asphyxia • congenital rubella</i>  <i>congenital toxoplasmosis • cytomegalovirus</i>  <i>fetal alcohol syndrome • meningitis • stroke</i>  <i>severe head injury • encephalitis • maternal drug use</i>  <i>tumors • neonatal herpes simplex</i></p>	<ol style="list-style-type: none"> <li>1. a need to consistently use amplification appropriately in educational settings as determined by audiological measures and systematic observation; or</li> <li>2. an achievement deficit in basic reading skills, reading comprehension, written language, or general knowledge that is at the 15<sup>th</sup> percentile or 1.0 standard deviation or more below the mean on a technically adequate norm-referenced achievement test that is individually administered by a licensed professional.</li> </ol> <p>C. The pupil's hearing loss affects the use or understanding of spoken English as documented by one or both of the following:</p> <ol style="list-style-type: none"> <li>1. under the pupil's typical classroom condition, the pupil's classroom interaction is limited as measured by systematic observation of communication behaviors; or</li> <li>2. the pupil uses American Sign Language or one or more alternative or augmentative systems of communication alone or in combination with oral language as documented by parent or teacher reports and language sampling conducted by a professional with knowledge in the area of communication with persons who are deaf or hard of hearing.</li> </ol> <p>D. The pupil's hearing loss affects that adaptive behavior required for age-appropriate social functioning as supported by:</p> <ol style="list-style-type: none"> <li>1. documented systematic observation within the pupil's primary learning environments by a licensed professional and the pupil, when appropriate; and</li> <li>2. scores on standardized scale of social skill development are below the average scores expected of same-age peers.</li> </ol>	<ol style="list-style-type: none"> <li>2. has limited ability to visually access the full range of program-appropriate educational materials and media without accommodating actions including, for example, changes in posture, body movement, focal distance, or squinting;</li> <li>3. demonstrates variable visual ability due to environmental factors including, for example, contrast, weather, color, or movement, that cannot be controlled; or</li> <li>4. experiences reduced or variable visual ability due to visual fatigue or factors common to the eye condition.</li> </ol>

*For more information, contact:*

*Minnesota DeafBlind Project, Metro ECSU, 2 Pine Tree Drive, Suite 101 Arden Hills, MN 55112 [www.dbproject.mn.org](http://www.dbproject.mn.org)*

*Phone: 612.638-1531, 612.638-1526 • Toll Free: 800.848-4905 • FAX: 612.706.0811*

*E-mail: [deanna.rothbauer@metroecsuo.org](mailto:deanna.rothbauer@metroecsuo.org) • [cathy.lyle@metroecsuo.org](mailto:cathy.lyle@metroecsuo.org)*

**\*Minnesota Rules:** <http://www.revisor.leg.state.mn.us/arule/3525> current as of October 12, 2007