Family history has been considered a risk factor for permanent congenital, delayed onset, or progressive hearing loss by the Joint Committee on Infant Hearing since 1973 [1–6].They found that, of 36 children with a positive family history, 26 had bilateral severe to profound loss, 3 had bilateral mild to moderate loss, and 4 had unilateral severe to profound losses.Zamani et al. [11] conducted a cross–sectional investigation of infants who were referred for diagnostic assessment to Tehran University of Medical Sciences children's hospitals between September 2000 and February 2002.Various researchers have noted a lack of efficiency in targeted hearing surveillance programs in Australia and have recommended that comprehensive research be conducted to assess specific risk factors [16,21].Specifically, it aimed to investigate: The prevalence and yield of family history as a reported risk factor in children with congenital and postnatal hearing loss, The audiometric characteristics of hearing loss in children with a positive family history, The nature of the familial relationships between family members with pediatric hearing loss.As noted by Cone–Wesson et al. [8] in their comparative report of data from normally–hearing neonates with data from hearing–impaired neonates, many subjects had more than one risk factor for pediatric hearing loss.Billings and Kenna [20] isolated each risk factor and assessed the severity and laterality (unilateral or bilateral) of the hearing loss identified.They found that, of 38 children whose hearing losses were likely to be of genetic origin, 23 had thresholds >70 dB HL and 15 had thresholds 70 dB HL. However, these authors did not note whether these losses were bilateral or unilateral and it should also be considered that'genetic' does not necessarily equate with parental report of a positive family history.It is essential that the aforementioned gaps in the current literature are addressed to determine the validity of family history as a risk factor for both congenital and postnatal hearing loss.In fact,the true validity has been often obscured, as studies have failed to isolate family history from additional confounding risk factors.Halpern and colleagues [12] also failed to find a relationship between family history and congenital hearing loss, although this may have been influenced by the study population, which consisted only of babies admitted to neonatal intensive care units.Evidence of the nature of familial relationships implicated in both congenital and postnatal hearing loss may be useful in forming more specific case–history questions for use in screening processes and may guide screening programs to identify children at a higher risk of hearing loss due to such nature.Another study by Weichbold et al. [17] also aimed to assess the relationship between various risk factors and postnatal hearing loss.Hence, various studies have attempted to provide information on the audiometric characteristics of children with risk factors for pediatric hearing loss.Beswick et al. [15] reported on familial relationships in postnatal hearing loss but only included the child's parents and siblings.Differing definitions of positive family history along with varied methods of obtaining a child's history will lead to different prevalence estimates.Sutton and Rowe [9] calculated a similar prevalence of family history in infants with congenital hearing loss of 26.2%.Yet, again, both of the latter authors remarked that family history was not examined as a sole risk factor.Studies by Kountakis et al. [13,14] have also concluded that family history was not a significant risk factor.A recent study using data from Queensland Health's Healthy Hearing Targeted Surveillance Program found a statistically significant correlation between family history and postnatal hearing loss [15].Therefore, other studies have investigated the relationship .in postnatal cohorts