



Newborn Screening

CHILD AND TEEN CHECKUPS (C&TC) FACT SHEET FOR PRIMARY CARE PROVIDERS

Primary care providers are required to review each infant's newborn screening results - blood spot, hearing, and pulse oximetry. Follow all recommendations made by the Minnesota Department of Health (MDH) Newborn Screening (NBS) program.

C&TC Requirements

General

Primary care providers are required to review each infant's newborn screening results and follow all recommendations made by the Minnesota Department of Health (MDH) Newborn Screening (NBS) program regarding follow-up.

Personnel

A licensed health care provider (physician, nurse practitioner, physician assistant) should review results and ensure that recommended follow-up is completed and documented.

Obtain copies of all newborn screening results from the hospital or electronically through the <u>MDH Newborn Screening</u> <u>portal</u> and place them in the child's medical record. Contact the NBS staff at 1-800-664-7772 for assistance. Document actions that are taken based on screening results.

Documentation

For documentation examples or for use as a template with your electronic medical record, refer to the <u>C&TC Provider</u> <u>Documentation Forms</u>.

Procedure

The MDH NBS program screens for over 60 conditions.

- Professionals who care for newborns are required to make newborn screening available for every Minnesota birth, but parents may opt out of all or part of newborn screening as per <u>Minnesota Statute 144.125.</u>
- Hearing and pulse oximetry screening results should be available the day the screen is performed.
- Blood spot screening results are returned to the submitting provider (typically the hospital) and are also available from MDH when completed.
- Review all screening results and share those results with the infant's parent(s) or guardian(s), preferably at the first well-child visit.

Follow-Up

Most screening results will be normal, and no additional follow-up will be needed. However, some results may require additional screening and/or testing. Ensure recommended follow-up has been pursued.

Blood Spot Screening:

- If a child has an abnormal blood spot screen requiring clinical action, MDH contacts the indicated provider. If you have not heard from MDH about an abnormal result on a patient's report, call NBS at 651-201-3548 for guidance.
- Refer to MDH's <u>Newborn Screening</u> <u>Information for Providers: Blood Spot</u> <u>Screening Results</u> for additional descriptions of possible results and follow-up practices.

Hearing Screening:

- If the child did not pass their hearing screening, make sure a diagnostic audiology evaluation occurs before 3 months of age.
- Refer to MDH's <u>Newborn Screening</u> <u>Information for Providers: Hearing</u> <u>Screening for Primary Care Providers</u> for more details.

Pulse Oximetry Screening:

 If the child did not pass the pulse oximetry screen, review in-hospital evaluation and recommendations for follow-up.

Importance of Screening

Conditions identified on the newborn screen can lead to illness, physical, and/or intellectual disabilities, or death if left untreated. Referral, specialized care, and treatment can ensure the best possible outcome (Centers for Disease Control and Prevention, 2021).

Note

Newborn screening is not diagnostic. False positive and false negative results may occur. Newborn screening should not replace diagnostic testing in any circumstances.

Professional Recommendations

American Academy of Pediatrics

The AAP recommends newborn screening and appropriate follow-up as a part of routine well child care, as outlined in <u>Recommendations for Preventive Pediatric</u> <u>Health Care</u>.

Resources

Minnesota Department of Human Services

- <u>C&TC Schedule of Age-Related</u> <u>Screening Standards</u>
- <u>Minnesota Health Care Programs</u>
 (MHCP) Provider Manual C&TC Section

Minnesota Department of Health

- <u>Child and Teen Checkups (C&TC)</u>
- <u>Newborn Screening Program</u>

Centers for Disease Control and Prevention

<u>Newborn Screening Portal</u>

References

Centers for Disease Control and Prevention. (2021, November). Newborn Screening Portal. Retrieved from www.cdc.gov/newbornscreening/index.html

For More Information

The Child and Teen Checkups (C&TC) program is administered through a partnership between the Minnesota Department of Human Services and the Minnesota Department of Health.

For questions about this fact sheet or to obtain this information in a different format, call 651-201-3650 email health.childteencheckups@state.mn.us.

Revised 03/2024

Resource Links

- MDH Newborn Screening portal (https://nbsreporting.health.mn.gov/to olbar/login.aspx)
- <u>C&TC Provider Documentation Forms</u> (https://mn.gov/dhs/partners-andproviders/policiesprocedures/minnesota-health-careprograms/provider/types/ctc-resources)
- <u>Minnesota Statute 144.125</u> (www.revisor.mn.gov/statutes/cite/144. 125)
- <u>Newborn Screening Information for</u> <u>Providers: Blood Spot Screening Results</u> <u>(www.health.state.mn.us/people/newb</u> <u>ornscreening/providers/bloodresults.ht</u> <u>ml)</u>
- <u>Newborn Screening Information for</u> <u>Providers: Hearing Screening for</u> <u>Primary Care Providers</u> <u>(www.health.state.mn.us/people/newb</u> <u>ornscreening/providers/hearingprimary.</u> <u>html)</u>
- <u>Recommendations for Preventive</u>
 <u>Pediatric Health Care</u>

(https://downloads.aap.org/AAP/PDF/p
eriodicity_schedule.pdf)

- <u>C&TC Schedule of Age-Related</u> <u>Screening Standards</u> (https://edocs.dhs.state.mn.us/lfserver/ <u>Public/DHS-3379-ENG</u>)
- Minnesota Health Care Programs (MHCP) Provider Manual - C&TC Section (www.dhs.state.mn.us/main/idcplg?ldc Service=GET DYNAMIC CONVERSION& RevisionSelectionMethod=LatestRelease d&dDocName=dhs16 150092)
- <u>Child and Teen Checkups (C&TC)</u> (www.health.state.mn.us/people/childr enyouth/ctc/index.html)
- <u>Newborn Screening Program</u> (www.health.state.mn.us/people/newb ornscreening)
- <u>Newborn Screening Portal</u> (www.cdc.gov/newbornscreening)