November 20, 2013

Dear Hospital Administrator:

The Department of Community Health administers the statewide Newborn Screening Program under authority of the Michigan Public Health Code which allows for addition of new conditions after approval by the Legislature. I am writing to inform you that critical congenital heart disease was recently approved for addition to the mandatory screening panel as of April 1, 2014.

Critical congenital heart disease requires surgery or catheter intervention the first year of life. It represents one of the most significant causes of infant death in the United States. The objective of newborn screening by pulse oximetry is diagnosis and intervention before the onset of symptoms. Late detection puts a baby at risk for serious complications, even death, within the first day or weeks of life. We estimate that 85-104 Michigan babies will be diagnosed each year.

Most Michigan birthing hospitals have already initiated routine pulse oximetry screening for newborns, or plan to begin soon. We urge all hospitals to follow the standard screening algorithm developed by our Newborn Screening Program together with experts in pediatric cardiology, neonatology, and mother-baby nursing. Infants with a "failed" pulse oximetry screen will need immediate follow-up by a physician for evaluation, and possible referral to a cardiologist or transfer to another unit or hospital.

Beginning no later than April 1, 2014, every hospital will be required to report each infant’s pulse oximetry screening results to the state Newborn Screening Program. It is important for hospitals to begin preparation now for data submission. Multiple options are being developed including a web-based portal through the State of Michigan’s Single Sign On and a secure file transfer protocol for those wishing to submit a data file. We are also working to establish reporting of pulse oximetry data through electronic health information exchange. The Newborn Screening Program will use the data collected for quality assurance, evaluation and monitoring.

Parent education materials and a pulse oximetry training toolkit for hospital staff are available free of charge. Our Nurse Educator is available to provide technical assistance as you prepare for pulse oximetry screening and reporting, and will be in touch with your nursery staff soon. Mini-grant funding through our critical congenital heart disease federal demonstration project is again available to assist hospitals with development of data reporting mechanisms or purchase of screening equipment. More information is available at www.michigan.gov/cchd. If you have any questions or concerns, please contact us at 1-866-673-9939 or by email at NewbornScreening@michigan.gov.

Cordially,

James K. Haveman
Director

JKH:vg

cc: Hospital Newborn Screening Coordinator