



CCHD Screening

Utah Critical Congenital Heart Defect (CCHD) Screening Project

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[Public Health Roles for Birth Defects Monitoring Programs](#)

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Statewide CCHD Screening Set to Begin October 1, 2014



Statewide pulse oximetry screening to detect critical congenital heart defects (CCHD) is mandated to begin October 1, 2014. This mandate requires that **all** newborns in the state of Utah be screened for CCHD. The legislation, House Bill 276, was introduced by Representative Paul Ray and approved on February 12, 2013 during the 2013 Utah Legislative Session. It was signed by Governor Gary R. Herbert on March 26, 2013. It adds pulse oximetry screening to the Utah Health Code Statute's 26-10-6 Newborn Screening Act (excerpt below).

Title 26 Chapter 10 Section 6

26-10-6. Testing of newborn infants.

- (1) Except in the case where parents object on the grounds that they are members of a specified, well-recognized religious organization whose teachings are contrary to the tests required by this section, each newborn infant shall be tested for:
- (a) phenylketonuria (PKU);
 - (b) other heritable disorders which may result in an intellectual or physical disability or death and for which:
 - (i) a preventive measure or treatment is available; and
 - (ii) there exists a reliable laboratory diagnostic test method;
 - (c) (i) an infant born in a hospital with 100 or more live births annually, hearing loss; and
 - (ii) an infant born in a setting other than a hospital with 100 or more live births annually, hearing loss; and
 - (d) beginning October 1, 2014, critical congenital heart defects using pulse oximetry.**

- (6) Prior to implementing the test required by Subsection (1)(d), the department shall conduct a **pilot program for testing newborns for critical congenital heart defects using pulse oximetry**. The pilot program shall include the development of:
- (a) appropriate oxygen saturation levels** that would indicate a need for further medical follow-up; and
 - (b) the best methods for implementing the pulse oximetry screening in newborn care units.**

Amended by Chapter 132, 2013 General Session

To read the entire version of Title 26 Chapter 10 Section 6 regarding testing of newborn screening go to http://le.utah.gov/code/TITLE26/htm/26_10_000600.htm.

CCHD Screening Implementation



Toolkit to be Released June 2014

Team members from the Utah Department of Health and University of Utah are currently working together to create a toolkit for statewide implementation based on the data collected and experiences from the legislated screening pilots at the University of Utah and Intermountain Medical Center nurseries. The toolkit is anticipated to become available in June of 2014 and will be offered in print and electronic versions. The toolkit will include the following information:

- Summary of legislation and what it means
- Summary of pulse oximetry
- Components of screening
 - Education and training
 - Screening process with protocol and practical guidelines
 - Recommendations for follow-up of failed screens
 - Documentation
 - Recommended data elements
 - Reporting
- Newborn echocardiology locations
- Resources for practitioners and hospitals
 - Downloadable videos for staff and parents
- Frequently asked questions

In addition, regional webinars will be offered to assist birthing facilities with implementation.

Online Pulse Oximetry Tool

Children's Healthcare of Atlanta has created an online pulse oximetry tool based on the recommended protocol by Kemper et al.¹ The tool is also available as an app and can be downloaded for the iPhone, Android, and Windows-based phones.

Click on the link below to go to the online tool:
<http://pulseoxtool.com/index.php>

¹Kemper AR, Mahle WT, Martin GR, Cooley WC, Kumar P, Morrow WR, Kelm K, Pearson GD, Glidewell J, Grosse SD, Howell RR. 2011. Strategies for implementing screening for critical congenital heart disease. *Pediatrics* 128(5):e1259-1267.

Time-Motion Study Conducted

As part of a larger analysis of the cost and use of resources related to CCHD pulse oximetry screening, a time-motion observational study was conducted in February at both the University of Utah and IMC newborn nurseries. A total of 53 CCHD screens were observed between the two pilot sites. This observational component captures the time necessary to perform the screen (i.e., preparation, probe placement, measurement, documentation, transit to and from nursery), who performs the screen (i.e., nurse, MA, CNA), and the resources utilized (i.e., number of probes). The next stage of the cost analysis is to collect information from each hospital regarding labor, equipment, and facility costs. A structured interview will be utilized to obtain this information.

CCHD Screening Videos

As newborn CCHD screening continues to gain momentum throughout the country, the resources available online continue to grow. Media are a great resource for distributing information about CCHD screening. Below we highlight some of the videos created about CCHD screening you may find useful.

Video 1: Expert commentary by Dr. Matt Oster of CDC and Sibley Heart Center at Children's Healthcare of Atlanta regarding CCHD newborn screening and geared toward primary care providers.

Link:

<http://www.cdc.gov/ncbddd/pediatricgenetics/cchdscreening.html>

Video 2: Heart Smart video series presented by Children's National Medical Center and Baby's First Test educating health care providers on screening for CCHDs.

Link: <http://www.youtube.com/watch?v=azmfWMXdrdg>

Video 3: Highlights the importance of and reasons behind CCHD screening. Created by the Texas Pulse Oximetry Project (TxPOP).

Link:

<http://www.youtube.com/watch?v=ibhmwYqsaKg&feature=youtu.be>

Do You Have Questions About CCHD Screening?

We are available to answer any questions or concerns regarding implementing CCHD screening at your organization. Additionally, we are willing to share the resources created for and obtained from the CCHD pilot project with your organization.

Please direct inquiries to Amy Nance, Project Coordinator, at 801-883-4661 or anance@utah.gov.

Birth defects *affect* us all.



What *effect* will YOU have on birth defects?