

NICU's & CF

Newborn Screening

A QUICK GUIDE FOR PROVIDERS



Cystic Fibrosis newborn screening was added to the current panel of disorders being screened as of January 2, 2009.

Many infants have elevated IRT's on the first newborn screen. It is expected that 2,500 will have abnormal IRT's on first newborn screens. We will not be notifying providers as we do with other disorders because of this large number.

IRT's on second specimens will only be run if there is a first "indeterminate" IRT. An expected 250 abnormal IRT's are anticipated.

IRT should normalize by the time the second newborn screening specimen is drawn. If the second IRT remains elevated, a sample from the specimen will be sent automatically for DNA testing. Again, providers will not be notified by telephone, however the results mailer will be faxed.

After the results from the DNA testing is available and if the infant is positive for CF alleles, the providers will be notified and a sweat test will be scheduled.

MECONIUM ILEUS

Infants with Meconium ileus (MI) have a falsely normal IRT. This means that CF testing may not be accurate. The blood spot specimen from the first newborn screen will automatically be sent for DNA testing if the card is correctly marked "MI" or providers notify the Newborn Screening Program.

THESE INFANTS WILL BE MISSED IF COMMUNICATION FAILS!

Solution 1: Contact the Newborn Screening Program when an infant has a MI.

Solution 2: Ensure the newborn screening card is marked as "MI"

Solution 3: Contact the Newborn Screening Program with PCP if discharged.

Solution 4: For further details see our newsletter at:

<http://health.utah.gov/newbornscreening>
click on "Newsletter" under "NEWS ALERTS"

Telephone: (801) 584-8256
Hours: Monday thru Thursday
7:00 AM— 6:00 PM
Closed Fridays

