**H.B. 81 (2013 General Session) Cytomegalovirus Public Health Initiative (UCA 26-10-10) Sequence of Events**

---

**INFANT FAILS INPATIENT NEWBORN HEARING SCREENING (NBHS)**

Hospital NBHS Program notifies family their infant failed hearing screen and schedules outpatient re-screen to take place prior to 14 days of age emphasizing importance of completing this appointment at the scheduled time.

Hospital NBHS Program obtains complete primary care provider (PCP) information from family and enters it in infant's Hi*Track record. If complete information is not in the physician database "drop down" menu, it can be added/updated by contacting Utah Early Hearing Detection & Intervention (EHDI) Hi*Track Data Coordinator at (801) 584-8216.

Hospital NBHS Program advises PCP of initial screen failure using the "Newborn Hearing Screening / CMV Status Report FAX" form or other mutually agreed upon method of notification. The method of notification must be documented in Hospital Program Summary.

---

**INFANT FAILS 2ND (OUTPATIENT) HEARING SCREENING**

Hospital NBHS Program immediately notifies PCP of the follow-up hearing screening failure: 1) via fax using the "Newborn Hearing Screening / CMV Status Report FAX" form, 2) phone message, (action must be documented in HiTrack), or 3) other preferred method of communication (action must be documented in HiTrack). The method of notification must be documented in Hospital Program Summary. Family is told to contact PCP if does not hear from MD within 24 hours.

PCP discusses congenital CMV with family and orders CMV PCR assay testing via saliva or urine on infant unless parents object.

**TESTING OCCURS PRIOR TO 21 DAYS OF AGE**

After test results are received, PCP faxes "Newborn Hearing Screening / CMV Status Report FAX" Form to Hospital NBHS Program and to UDOH at (801) 584-8492. PCP consults with family on next steps.

---

*If questions, please contact the Utah Department of Health (UDOH) EHDI program at (801) 584-8215. Created 6/25/13.*