Collection and Testing For CONGENITAL Cytomegalovirus (CMV) for Medical Providers

1. Receive a referral from a Newborn Hearing Screening Program reporting an infant has failed hearing screening(s) and that CMV testing is needed

   Fax Referrals for CMV testing look like this:
   
   - If you receive a fax for an infant that is not your patient, please call UDOH at (801) 584-8215.

2. Collect a sample BEFORE the infant is 21 days old.

   - Urine
   - Saliva*
   - Blood

   2 hours or more after feeding

   *Must use ORAcollect-100 kit available from ARUP supply #49295

3. Send the sample to the lab for CMV PCR testing with “CC: Utah Dept. of Health CMV”.

4. Order CPT code 87496 (Viracor-IBT is 87497) with ICD-9 code 389.8 (neonatal hearing loss).

5. When lab results are received, complete Section 3 of Hearing Screening Form and fax results to UDOH at (801) 584-8492.

Find Out More Health.utah.gov/CMV