For more information:

The Nebraska Newborn Screening Website has information about the conditions that babies are screened for in Nebraska. The site also has information about the state regulations regarding newborn screening in Nebraska.

Go to:

https://dhhs.ne.gov/Pages/ Newborn-Screening.aspx



After hours or 24/7 Phone: **(402) 471-0374**



Another informative web site with links to reputable information about newborn screening:

www.babysfirsttest.org





PH-PAM-21 5/2021

Early Discharge and Your Baby's Newborn Screen



Nebraska Newborn Screening Program (NNSP)

Phone: (402) 471-6759

24/7 Phone: (402) 471-0374

Fax: (402) 742-2332

Dhhs.newbornscreening@nebraska.gov



Why do I have to get my baby screened before discharge, even if my baby is less than 24 hours old? Why should we do this heel stick when my baby has to have another one the next day?

Nebraska regulations governing newborn screening require every baby to be screened before discharge or transfer from a licensed birthing facility, even if the baby is not yet 24 hours old. Specimens collected before 24 hours of age aren't tested for cystic fibrosis, congenital adrenal hyperplasia, congenital primary hypothyroidism, Mucopolysaccharidosis Type I (MPS-I), Pompe Disease and X-Linked Adrenoleukodystrophy. Tests for these diseases tend to result in too many inconclusive or false positive results when collected before 24 hours of age. However, early specimens are tested for diseases that must be detected without delay.

It is especially important to promptly test for some conditions such as galactosemia,

MCAD and other fatty acid oxidation disorders as they can be fatal to newborns within days or weeks from birth. (In fact, this is an especially good time to catch the fatty acid oxidation disorders because shortly following birth, babies are catabolic, a condition under which fatty acid oxidation defects can be most apparent). After a specimen is collected, it must be allowed to completely dry and then it is shipped to the lab to rapidly begin testing. On average, results are available by 4.5 to 5 days of age.

The regulation requiring a screen before transfer or discharge was put in place to prevent babies from being missed. Many times we have experienced babies who did not get screened before leaving the birth facility and then were not screened until

much later. Without the early screen before discharge, the screening program cannot help get these babies back in for screening in a timely way.

Newborn screening is done to protect your baby's health. Without the blood test, most of the conditions will not be apparent with symptoms until damage has been done. When symptoms do occur, often they are non-specific, which complicates diagnosis. The conditions on the screening panel are rarely suspected at first, which makes it complicated to diagnose. Having the newborn screening results helps ensure rapid diagnosis and treatment to prevent problems.

Ideally, every baby would only have to have one heel-stick dried blood spot specimen collected at 24-48 hours of life. However, if you choose to go home before 24 hours, your baby will have to get a screen before leaving, and you will have to return with your baby between 24-48 hours for the repeat. (The laboratory does not charge for the required repeat).

Nebraska regulations require a newborn screen prior to discharge.

A waiver does not exist because the screen is state mandated. Even if you have the best intentions of returning the next day, unexpected things can and do happen. Avoidable delays can mean the difference between life and death or a healthy baby vs. a baby with otherwise preventable disabilities.