ARTICLE 3. MATERNAL AND CHILD HEALTH

Rule 3. Examination of Infants for Disorders

410 IAC 3-3-1 Definitions
Authority: IC 16-19-3-4; IC 16-41-17-9
Affected: IC 16-41-17

Sec. 1. The following definitions apply throughout this rule:
(1) "Audiologist" means an audiologist licensed by the state of Indiana pursuant to the Indiana professional licensing agency board who meets the requirements outlined in Indiana's Best Practice Guidelines for Assessment and who administers short-term and long-term early hearing detection and intervention (EHDI) program follow-up.
(2) "Birth center" means any nonhospital facility in which live births routinely take place.
(3) "Child" means an individual twelve (12) months to eighteen (18) years of age.
(4) "Department" means the Indiana state department of health.
(5) "Diagnostic audiology Level I facility" means a facility as defined by the department that has and uses the recommended test battery and equipment for provision of comprehensive audiological assessment of newborns and infants.
(6) "EHDI follow-up" means follow-up that occurs subsequent to newborn hearing screening. Children in need of EHDI follow-up include the following:
   (A) Newborns or infants not yet screened (for any reason).
   (B) Newborns or infants who did not pass newborn hearing screening.
   (C) Newborns or infants who passed newborn hearing screening but have a risk indicator that could lead to late-onset hearing loss.
(7) "Galactosemia" means an inherited error in the metabolism of galactose.
(8) "Health care provider" means the medical professional providing care after birth.
(9) "Hearing loss" means an impairment that is a dysfunction of the auditory system of any type or degree sufficient to interfere with acquisition and development of speech and language.
(10) "Hearing screening" means a bilateral, physiological measurement of hearing on a newborn or infant.
(11) "Hemoglobinopathy" means a condition where a person has abnormal hemoglobin that results from an inherited defect, some of which may produce a sickling phenomenon in erythrocytes.
(12) "Hemocystinuria" means an inherited error in the metabolism of methionine.
"Hospital" means a licensed hospital with obstetric services.
"Hypothyroidism" means a deficient amount or activity of thyroid hormone.
"Infant" means an individual who is thirty (30) days to twelve (12) months of age.
"Maple syrup urine disease" means an inherited error in the metabolism of leucine, isoleucine, and valine.
"MCH/CHC clinics" means clinics affiliated with the children's special health care services program of the division of maternal and child health of the department that provide services to women, children, and children with special health care needs.
"MCH/NBS" means division of maternal and child health, genomics and newborn screening program, at the department.
"Midwife" means an individual licensed under IC 25-23-1-13.1.
"Metabolic formula" means a nutritional supplement provided to patients diagnosed with metabolic newborn screening conditions.
"Newborn" means an individual who is up to twenty-nine (29) days of age.
"Parent" means a natural (birth) parent, stepparent, adoptive parent, legal guardian, or other legal custodian of an individual.
"Phenylketonuria" means an inherited error in the metabolism of phenylalanine.
"Physician" means an individual licensed under IC 25-22.5-5.
"Satisfactory blood specimen" means a blood specimen on which an accurate laboratory analysis can be performed for the disorder for which it is submitted.
"Unsatisfactory blood specimen" means any of the following:
(A) A filter paper kit on which an insufficient quantity of blood is obtained.
(B) A filter paper kit on which an accurate analysis or interpretation cannot be performed due to improper collection, handling, or submission or a technical or laboratory problem.
(C) Cord blood.
(D) Blood from any transfused neonate.
(E) A filter paper kit that does not provide all of the information regarding the patient as required. The blood specimen within such a filter paper kit may be satisfactory according to section 3 of this rule.

410 IAC 3-3-2 Provision of testing information; religious objection
Authority: IC 16-19-3-4; IC 16-41-17-9
Affected: IC 16-41-17

Sec. 2. (a) The department shall provide public educational materials, including descriptions of the disorders and of the screening program, to hospitals, birthing centers, physicians, midwives, and other health care providers for distribution to patients. Physicians and midwives engaged in providing prenatal or perinatal care, or both, shall provide pregnant women, prior to the estimated date of delivery, with this information. Hospitals and birthing centers shall provide each pregnant woman admitted for delivery with a copy of this information prior to collection of the blood specimen. If a woman is unable to read the material, it shall be translated or read to her in a language she understands.

(b) Any parent who objects to the testing for reasons pertaining to religious beliefs only shall so indicate by signing a statement of informed refusal. The objection shall become part of the medical record, and the newborn or infant shall be exempted from the testing.