N.H. Code Admin. R. He-P 3008.01 - Purpose

Current through Register Vol. 42, No. 14, April 7, 2022

The purpose of this part is to describe the requirements for the screening of all newborns pursuant to RSA 132:10-a, RSA 132:10-aa and for newborn hearing screening pursuant to RSA 132:10-b, V.

Notes

N.H. Code Admin. R. He-P 3008.01

#8529, eff 12-23-05; ss by #9725, eff 7-1-10

Amended by Volume XXXVIII Number 41, Filed October 11, 2018, Proposed by #12632, Effective 9/28/2018, Expires 9/28/2028.

N.H. Code Admin. R. He-P 3008.02 - Scope

Current through Register Vol. 42, No. 14, April 7, 2022

This part shall apply to:

(a) Birth facilities and laboratories performing newborn dried blood spot screening;

(b) Birth facilities performing newborn hearing screening;

(c) Birth facilities performing newborn critical congenital heart disorder screening;

(d) Providers, certified midwives, and nurse midwives performing newborn dried blood spot screening, newborn hearing screening, and critical congenital heart disorder screening;

(e) Audiologists providing pediatric diagnostic audiology services; and

(f) Organizations and agencies providing intervention and early supports and services to children between the ages of birth and 3 years with hearing conditions.

Notes

N.H. Code Admin. R. He-P 3008.02

#8529, eff 12-23-05; ss by #9725, eff 7-1-10

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N.H. Code Admin. R. He-P 3008.03 - Definitions

Current through Register Vol. 42, No. 14, April 7, 2022

(a) "Birth facility" means the hospital or birthing center where the infant was born.

(b) "Commissioner" means the commissioner of the New Hampshire department of health and human services, or his or her designee.

(c) "Critical Congenital Heart Disorder (CCHD) screening" means screening for 7 different heart disorders that can be detected via pulse oximetry.

(d) "Department" means the department of health and human services, State of New Hampshire.

(e) "Diagnostic hearing evaluation" means comprehensive testing of infants to determine type and classification of hearing loss.

(f) "Dried blood spot (DBS) " means a specimen of blood obtained from an infant through the heel stick procedure, which is then applied to a filter paper and dried.

(g) "Early hearing detection and intervention (EHDI) program" means a department program, which oversees the newborn hearing screening process in New Hampshire.

(h) "EHDI database" means the information collection system used by the department for the reporting of newborn hearing screening, diagnosis, and treatment information.

(i) "Filter paper" means the department-approved specimen collection card which is made specifically for the purpose of collecting an infant's blood, and which is used by the laboratory for testing.

(j) "Infant's healthcare provider" means the licensed medical doctor, licensed doctor of osteopathy, licensed advanced practice nurse, licensed physician's assistant, or certified midwife, responsible for the care of the newly born infant.

(k) "Informed dissent" means the written refusal by an infant's parent or guardian to participate in newborn screening as defined in this rule.

(I) "Laboratory" means the testing facility authorized by the State of New Hampshire to conduct DBS testing on its behalf.

(m) "Newborn hearing screening" means evaluating the hearing status of infants.

(n) "Newborn screening" means the DBS testing of infants.

(o) "Newborn screening program (NSP) " means the department program which has responsibility for managing all aspects of infant DBS screening pursuant to RSA 132:10-a.

(p) "Out of range (OOR) result" means a DBS test result that is inconclusive.

(q) "Pediatric audiologist" means a person who specializes in the assessment and rehabilitation of hearing loss in infants and children.

(r) "Unsatisfactory specimen" means a DBS specimen which is unacceptable for testing.

Notes

N.H. Code Admin. R. He-P 3008.03

#8529, eff 12-23-05; ss by #9725, eff 7-1-10

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N.H. Code Admin. R. He-P 3008.15 -Reporting of Newborn Hearing Screening Information to EHDI Program

Current through Register Vol. 42, No. 14, April 7, 2022

(a) Within 2 weeks of testing, individuals conducting newborn hearing screening and diagnostic hearing evaluation shall report the following information to the EHDI program via the EHDI database:

- (1) Demographic information, including:
- a.The infant's name;
- b.The infant's sex;
- c.The infant's race;
- d.The family of the infant's preferred language for communication;
- e.The infant's date of birth;
- f.The infant's medical record number;
- g.The infant's birth facility;
- h.Family contact information; and
- i.The infant's health care provider; and
- (2) Results from testing, including:
- a.Birth facility;
- b.Testing date;
- c.Type of testing;
- d.Testing results;
- e.Diagnosis; and

f.Risk factors for progressive hearing loss.

(b) Birth facilities shall fax to the EHDI program within 48 hours the hearing screening and diagnostic hearing in (a) above for any infant who does not pass the final newborn hearing screening.

(c) Newborn screen and diagnostic hearing information shall be faxed via secure fax line at 603 271 4519.

(d) In addition to the information in (a) , above, New Hampshire audiologists providing diagnostic hearing evaluation shall submit to the department the following information:

(1) Referral information for medical, genetic, and early support services; and

(2) Hearing follow-up information, such as post-referral disposition.

(e) In addition to the information in (a) above, New Hampshire organizations and agencies providing intervention and early supports and services to children between the ages of birth and 3 years with hearing conditions shall submit to the department the following information:

(1) Early supports and services, individual family service plan, start date and discharge date; and

(2) Nature of the services provided and post referral disposition date.

Notes

N.H. Code Admin. R. He-P 3008.15

#8529, eff 12-23-05; ss by #9725, eff 7-1-10 (from <u>He-P 3008.14</u>)

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N.H. Code Admin. R. He-P 3008.20 - Quality Assurance

Current through Register Vol. 42, No. 14, April 7, 2022

(a) Birth facilities shall allow periodic reviews of their newborn screening, CCHD, and newborn hearing screening activities by department staff for quality assurance purposes.

(b) Reviews shall include, but not be limited to:

(1) The review of policies and procedures regarding newborn screening, CCHD, newborn hearing screening, and diagnostic hearing evaluation;

(2) Interviews with staff performing any aspect of newborn screening, CCHD, and newborn hearing screening; and

(3) The on-site review of medical records.

(c) The NSP shall provide upon request:

(1) Information regarding acceptable procedures for the collection, handling, short-term storage and transport of a DBS;

(2) Information regarding newborn screening that shall be given to and reviewed with the parent or guardian of each infant prior to testing; and

(3) Text to be used in statements of informed dissent.

(d) The NSP and the EHDI program shall compare the data sets of infants screened with New Hampshire birth certificate files, in order to ensure that every infant born in New Hampshire is screened, or had the opportunity to be screened, for hearing, CCHD, and for those conditions that are determined by DBS testing.

Notes

N.H. Code Admin. R. He-P 3008.20

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