

## Newborn Screening Panel

<b>Test Description</b>	Screening of newborn infants for analytes suggestive of inherited metabolic diseases and other congenital conditions.
<b>Test Use</b>	To ensure early recognition and timely intervention of inherited congenital disorders and thereby prevent adverse health outcomes
<b>Test Department</b>	Newborn Screening Phone: (860) 920-6706 FAX: (860) 920-6633
<b>Methodology</b>	Various, to include tandem mass spectrometry, high performance liquid chromatography, polymerase chain reaction, time-resolved fluoro-immunoassay
<b>Availability</b>	Daily, Monday-Friday
<b>Specimen Requirements</b>	Whole blood spotted onto a specialized filter paper collection card
<b>Collection Kit/Container</b>	Newborn screening filter paper collection card. To obtain collection cards, refer to Collection Kit Ordering Information.
<b>Collection Instructions</b>	Puncture heel and allow a large drop of blood to form. Touch filter paper to blood drop. Allow to soak through and completely fill circle. Apply blood to one side of filter paper only. Fill all 4 preprinted circles. Do not layer successive drops of blood or apply blood more than once in the same collection circle.
<b>Specimen Handling &amp; Transport</b>	Allow card to air dry horizontally for at least 3 hours at room temperature. Avoid touching or smearing blood spots. Place collection card into envelope. Deliver as soon as possible after drying (but no later than 48 hours after collection) at ambient temperature. Avoid heat, direct sunlight, humidity, and moisture during shipping.
<b>Unacceptable Conditions</b>	Unlabeled or mislabeled collection card Expired collection card Improperly collected specimen Insufficient quantity
<b>Requisition Form</b>	Patient and specimen collection information is electronically entered into MAVEN by the birth center. A bar code label containing an 8 digit identification number, unique to each baby, is generated and must be affixed to the specimen. Subsequent specimens must include the identification number, mother's name, infant's name and sex, date of birth, hospital medical record number, and date of specimen collection.
<b>Required Information</b>	Baby's last name and sex, date and time of birth, birth weight, hospital medical record number, date of collection, mother's name, name and address of primary care provider
<b>Limitations</b>	Newborn screening is not diagnostic. Patients identified with abnormal findings must undergo further testing and clinical evaluation. Specimens collected from infants less than 24 hours of age, from ill or low birth weight babies, or after a blood transfusion may produce false negative or positive results and must be recollected.
<b>Additional Comments</b>	Reference ranges for all analytes may be viewed at: <a href="http://www.ct.gov/dph/NBStestresultlevels">www.ct.gov/dph/NBStestresultlevels</a>

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