

1 **DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT**

2 **Laboratory Services Division**

3 **NEWBORN SCREENING AND SECOND NEWBORN SCREENING**

4 **5 CCR 1005-4**

5 *[Editor's Notes follow the text of the rules at the end of this CCR Document.]*

7 **NEWBORN SCREENING REGULATIONS**

8 1.1 Under the authority contained in Sections 25-4-801 through 25-4-804 and 25-4-1001 through 25-4-
9 1006 (not including Section 25-4-1004.7) C.R.S. (1998), the following rules and regulations are
10 established.

11 1.2 Definitions: The following terms, whenever used in or referred to in these regulations, shall have the
12 following respective meanings, unless a different meaning clearly appears from the context:

13 "Department" shall mean the Colorado Department of Public Health and Environment.

14 "Laboratory" shall mean the Colorado Department of Public Health and Environment Laboratory.

15 "Initial Newborn Screening Specimen" shall mean specimen collected from a newborn prior to
16 discharge, but in all cases within 48 hours after birth for the purpose of conducting screening
17 tests.

18 1.3 Procedures

19 1.3.1 Births in Institutions: The blood specimens of newborns born in institutions and all other
20 specimens taken in conformity with the law and these regulations will be sent to the
21 Laboratory for testing. Follow up specimens from newborns with positive screening tests
22 will be obtained and tested as necessary for proper diagnosis.

23 1.3.1.1 The hospital or institution or the chief medical staff officer or other person in
24 charge thereof will cause an initial newborn screening specimen to be obtained
25 from every newborn born therein as late as possible before discharge, but no
26 later than 48 hours of age.

27 1.3.1.2 The specimen shall consist of capillary blood collected by heel puncture or
28 alternate method authorized by the Laboratory, directly upon special blotter
29 paper furnished by the Laboratory. All circles shall be saturated with blood from
30 one side of the blotter only. The specimen submitter will provide, on the attached
31 form, all information requested by the Laboratory. The specimens, after air
32 drying, will be forwarded to the Laboratory within 24 hours of collection, by
33 courier or overnight delivery if available.

34 1.3.1.3 If the newborn is to receive a blood transfusion, then the specimen for newborn
35 screening is to be obtained prior to this procedure .

36 1.3.2 Births Outside Institutions: The physician, nurse midwife, or other health professional
37 attending a birth outside a hospital, shall be responsible for the collections and forwarding
38 of the specimen described in 1.3.1.2 above. In the absence of a health professional, any

39 other person attending the birth, or in the absence of any person so attending, the father
40 or mother, or in the absence of the father and the inability of the mother, the person in
41 charge of the premises where the birth occurred shall be responsible.

42 1.4 Testing and Reporting: The prescribed tests will be initiated by the Laboratory within 24 hours of
43 receipt of the specimen, weekends and holidays excepted. The Laboratory shall report as follows:

44 1.4.1 Reports of normal test results will be sent to the submitting agency within seven working
45 days.

46 1.4.2 Abnormal test results will be reported immediately by telephone to the physician of record
47 and to designated consultants. In case of inability to identify or locate a physician of
48 record, the abnormal test result will be reported to the hospital or submitting agency
49 which originated the specimen, or, if the birth did not occur in a health facility, to the
50 father or mother.

51 1.4.3 Unsatisfactory specimens or specimens with equivocal results will be reported immediately
52 to the submitting agency which originated the specimen with an explanation of the
53 results. The submitting agency responsible for the newborn's care at the time of the
54 report will cause another specimen to be forwarded at the appropriate time.

55 1.4.4 The submitting agency that originated the specimen shall forward the Newborn Screening
56 results to the health care provider responsible for the newborn's care within the time
57 frame of 1.4.1 and 1.4.3 above.

58 1.5 Quality Control and Education

59 1.5.1 The Laboratory shall have available for review a written quality assurance program plan
60 covering all aspects of laboratory activity.

61 1.5.2 The Laboratory shall make available educational materials and training concerning
62 specimen collection to all submitting agencies.

63 1.6 List of Conditions for Newborn Screening

64 1.6.1 The Laboratory shall conduct screening tests for the following conditions:

65 1.6.1.1 Phenylketonuria

66 1.6.1.2 Congenital Hypothyroidism

67 1.6.1.3 Hemoglobinopathies

68 1.6.1.4 Galactosemia

69 1.6.1.5 Cystic Fibrosis

70 1.6.1.6 Biotinidase Deficiency

71 1.6.1.7 Congenital Adrenal Hyperplasia

72 1.6.1.8 Medium Chain Acyl-CoA dehydrogenase deficiency

73 1.6.1.9 Very Long Chain Acyl-CoA dehydrogenase deficiency

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74	1.6.1.10 Long-Chain L-3-Hydroxy Acyl-CoA dehydrogenase deficiency
75	1.6.1.11 Trifunctional protein deficiency
76	1.6.1.12 Carnitine Acyl-carnitine translocase deficiency
77	1.6.1.13 Short Chain Acyl-CoA dehydrogenase deficiency
78	1.6.1.14 Carnitine palmitoyltransferase II deficiency
79	1.6.1.15 Glutaric acidemia Type 2
80	1.6.1.16 Arginosuccinic acidemia
81	1.6.1.17 Citrullinemia
82	1.6.1.18 Tyrosinemia
83	1.6.1.19 Hypermethionemia
84	1.6.1.20 Maple Syrup urine disease
85	1.6.1.21 Homocystinuria
86	1.6.1.22 Isovaleric acidemia
87	1.6.1.23 Glutaric acidemia Type 1
88	1.6.1.24 3-hydroxy-3-methylglutaryl-CoA Lyase deficiency
89	1.6.1.25 Multiple Carboxylase deficiency
90	1.6.1.26 3-methylcrotonyl-CoA carboxylase deficiency
91	1.6.1.27 3-methylglutaconic aciduria
92	1.6.1.28 Methylmalonic acidemias
93	1.6.1.29 Propionic acidemia
94	1.6.1.30 beta-Ketothiolase deficiency
95	1.6.1.31 Carnitine uptake defect
96	1.6.1.32 Arginase deficiency
97	1.6.1.33 Malonic acidemia
98	1.6.1.34 Carnitine palmitoyltransferase deficiency 1A
99	1.6.1.35 Severe Combined Immunodeficiency

102 **IMPLEMENTATION OF SECOND NEWBORN SCREENING**

103 1.1 Under the authority contained in Section 25-4-1004.5(3) C.R.S., the following Rules and Regulations
104 are established.

105 1.2 Definitions

106 "Department" shall mean the Colorado Department of Public Health and Environment.

107 "Executive Director" shall mean the executive director of the Colorado Department of Public
108 Health and Environment.

109 "Laboratory" shall mean the Colorado Department of Public Health and Environment Laboratory.

110 "Initial newborn screening specimen" shall mean specimen collected from a newborn prior to
111 discharge, but in all cases within ~~seven days~~ 48 HOURS after birth for the purpose of conducting
112 screening tests.

113 "Second newborn screening specimen" shall mean a specimen collected from a newborn
114 between eight and 14 days after birth, but in no case less than 72 hours or greater than 30 days
115 after birth, for the purpose of conducting screening tests.

116 1.3 Procedures

117 1.3.1 The parent(s) or other legal guardian(s) of the newborn shall be advised of the necessity of
118 the second newborn screening test.

119 1.3.1.1 Births in Institutions: It shall be the responsibility of the hospital or institution or
120 the chief medical staff officer or other person in charge thereof to advise, verbally
121 and in writing, such as by written information made available from the
122 Department, the parent(s) or other legal guardian(s) of the newborn that it is
123 necessary to have a second newborn screening test performed.

124 1.3.1.2 Births outside Institutions: It shall be the responsibility of the physician, nurse
125 midwife, lay midwife, or other health professional attending a birth outside a
126 hospital to advise, verbally and in writing, such as by written information made
127 available from the Department, the parent(s) or other legal guardian(s) of the
128 newborn, of the necessity of the second newborn screening.

129 1.3.2 The attending health care provider shall collect or require the specimen be collected from
130 all newborns at the first post partum appointment, but in no case less than 72 hours or
131 greater than 30 days after birth. The specimen shall consist of capillary blood collected by
132 heel puncture or alternate method authorized by the Laboratory, directly upon special
133 blotter paper furnished by the Laboratory. All circles shall be saturated with blood from
134 one side of the blotter only. ~~The specimen collector~~ SUBMITTER will provide, on the
135 ~~provided ATTACHED~~ form, all information requested by the Laboratory. The specimens,
136 after air drying, shall be forwarded to the Laboratory within 24 hours of collection by first
137 class mail, COURIER, or ~~other appropriate means~~ OVERNIGHT DELIVERY.

138 1.4 Testing and Reporting: The prescribed tests will be initiated by the Laboratory within 24 hours of
139 receipt of the specimen, weekends and holidays excepted. The Laboratory shall report as follows:

140 1.4.1 Reports of normal test results will be sent to the submitting agency within seven working
141 days.

142 1.4.2 Abnormal test results will be reported immediately by telephone to the physician of record
143 and to designated consultants. In case of inability to identify or locate a physician of
144 record, the abnormal test result will be reported to the submitting agency which originated
145 the specimen, or, if the birth did not occur in a health facility, to the father or mother.

146 1.4.3 Unsatisfactory specimens or specimens with equivocal results will be reported immediately
147 to the submitting agency which originated the specimen with an explanation of the
148 results. The health care provider responsible for the newborn's care at the time of the
149 report will cause another specimen to be forwarded at the appropriate time.

150 1.4.4 The submitting agency that originated the specimen shall forward the newborn screening
151 results to the health care provider responsible for the newborn's care.

152 1.5 Quality Control and Education

153 1.5.1 The Laboratory shall have available for review a written quality assurance program plan
154 covering all aspects of testing and reporting second specimens.

155 1.5.2 The Laboratory shall make available educational materials and training concerning
156 specimen collection to submitting agencies.

157 1.6 List of Conditions for Second Newborn Screening

158 1.6.1 The Laboratory shall conduct screening tests for the following conditions:

159 1.6.1.1 Phenylketonuria

160 1.6.1.2 Congenital Hypothyroidism

161 1.6.1.3 Hemoglobinopathies

162 1.6.1.4 Galactosemia ¹

163 1.6.1.5 Cystic Fibrosis ¹

164 1.6.1.6 Biotinidase Deficiency ¹

165 1.6.1.7 Congenital Adrenal Hyperplasia

166 ¹ These disorders need not be tested again unless:

167 a) an unsatisfactory specimen was submitted for first screen testing, or

168 b) an abnormal result was obtained on first screen testing, or

169 c) no record of a satisfactory first screen specimen submission can be ascertained.

170

171 **Editor's Notes**

172 **History**

173 Newborn Screening Regulation 1.6 eff. 01/30/2008.

174 Second Newborn Screening Regulation 1.6 eff. 04/01/2008.

175 Entire Rule eff. 04/30/2011.