CHAPTER 19

NEWBORN SCREENING PROGRAM

Authority

N.J.S.A. 26:2-101 et seq., 26:2-110 and 26:2-111.

Source and Effective Date

R.2000 d.200, effective April 19, 2000. See: 31 N.J.R. 3943(b), 32 N.J.R. 1785(b).

Executive Order No. 66(1978) Expiration Date

Chapter 19, Newborn Screening Program, expires on April 19, 2005.

Chapter Historical Note

Chapter 19, Newborn Screening Program, was adopted as R.1980 d.173, effective July 1, 1980. See: 12 N.J.R. 10(d), 12 N.J.R. 273(d).

Pursuant to Executive Order No. 66(1978), Chapter 19, Newborn Screening Program, was readopted as R.1985 d.380, effective June 28, 1985. See: 17 N.J.R. 869(a), 17 N.J.R. 1892(a).

Subchapter 2, Newborn Biochemical Screening, was adopted as R.1990 d.146, effective March 5, 1990. See: 21 N.J.R. 3633(b), 22 N.J.R. 844(a).

Pursuant to Executive Order No. 66(1978), Chapter 19, Newborn Screening Program, was readopted as R.1990 d.289, effective May 11, 1990. See: 22 N.J.R. 733(a), 22 N.J.R. 1764(a).

Pursuant to Executive Order No. 66(1978), Chapter 19, Newborn Screening Program, was readopted as R.1995 d.274, effective May 8, 1995. See: 27 N.J.R. 807(a), 27 N.J.R. 2213(a).

Pursuant to Executive Order No. 66(1978), Chapter 19, Newborn Screening Program, was readopted as R.2000 d.200, effective April 19, 2000. See: Source and Effective Date. See, also, section annotations.

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SUBCHAPTER 1. NEWBORN HEARING SCREENING

8:19-1.1 Hearing development literature supplied to parents

Prior to the discharge of a live newborn from any hospital or birthing center in the State of New Jersey, the hospital nursery, neonatal intensive care unit or birthing center shall provide all parents or legal guardians of the newborn with literature provided by the Department of Health and Senior Services (hereafter, the Department) describing the normal development of auditory function and the Newborn Hearing Screening Program. Such literature will be designed to provide parents with an understanding of the implications of hearing loss on the development of speech-language and provide information regarding normal auditory behavior. All literature shall be furnished to hospitals and birthing centers by the Department.

Amended by R.2000 d.200, effective May 15, 2000. See: 31 N.J.R. 3943(b), 32 N.J.R. 1785(b).

Deleted "free of charge" following "furnished" in the last sentence.

8:19-1.2 Modules 3, 5, and 6 of the Electronic Birth Certificate System

- (a) All hospital nurseries, including neonatal intensive care units and birthing centers, shall complete Modules 3, 5, and 6 of the Electronic Birth Certificate (EBC) System on all live newborns regardless of the presence or absence of indicators associated with hearing loss. Modules 3, 5, and 6 contain indicators associated with possible hearing loss. These indicators are defined in N.J.A.C. 8:19–1.6. Registered nurses in the hospital nursery and neonatal intensive care unit or the birth attendant shall complete Modules 3, 5, and 6. If the hospital or birthing center has designated them to do so, licensed audiologists shall complete information regarding electrophysiological screening on Module 5, and the Parental Informed Consent section and document parental/legal guardian refusal to participate in the Newborn Hearing Program for religious reasons on Module 6.
- (b) Effective May 15, 2000, all newborns with one or more indicators associated with hearing loss as described in N.J.A.C. 8:19–1.6 shall be required to have an electrophysiological hearing screening done prior to discharge or before one month of age. The electrophysiologic hearing screening measure used is to be determined by the hospital, birthing center or pediatrician. Results of electrophysiologic hearing screening measures shall be documented on Module 5 of the EBC.
- (c) Effective January 1, 2002, all newborns, regardless of risk status, shall be required to be screened for hearing impairment with electrophysiologic measures prior to discharge or before one month of age. The electrophysiologic hearing screening measure used is to be determined by the

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hospital, birthing center or pediatrician. Results of the electrophysiologic hearing screening measures shall be documented on Module 5 of the EBC.

- (d) If a birth occurs outside a hospital or birthing center and the baby is then transferred to a hospital or birthing center, it shall be the responsibility of these receiving facilities to ensure that Modules 3, 5, and 6 are completed. From May 15, 2000 to December 31, 2001, if one or more of the indicators associated with hearing loss as described in N.J.A.C. 8:19–1.6 are present, an electrophysiologic hearing screening shall be done. Beginning January 1, 2002, all newborns, regardless of the presence or absence of an indicator associated with hearing loss, shall have an electrophysiologic hearing screening done prior to discharge or before one month of age.
- (e) From May 15, 2000 to December 31, 2001, if a birth occurs outside a hospital or birthing center and the baby is not transferred to a hospital or birthing center, or a newborn is discharged before electrophysiological hearing screening is done, then the midwife or pediatrician caring for the newborn shall ensure that an electrophysiologic hearing screening is performed prior to one month of age, if one or more of the indicators associated with hearing loss as described in N.J.A.C. 8:19–1.6 are present. Beginning January 1, 2002, all newborns, regardless of the presence or absence of an indicator associated with hearing loss, shall have an electrophysiologic hearing screening done prior to one month of age.
- (f) The hospital nursery, neonatal intensive care unit, birthing center or facility to which a newborn is transferred shall, upon discharge or transfer and regardless of the presence or absence of an indicator associated with hearing loss, forward Modules 3, 5, and 6 of the EBC to the Department via modem at PO Box 360, Trenton, New Jersey 08625–0360. The hospital or birthing center shall submit Modules 3, 5, and 6 of the EBC to the Department within one week of discharge or transfer.
- (g) The hospital nursery, including neonatal intensive care units, and birthing centers shall assure that the newborn's parent, legal guardian or custodian is informed of the purpose and need for newborn hearing screening, shall obtain consent from the parent, legal guardian or custodian and shall document consent by obtaining the legal guardian's or custodian's signature on Module 6 of the EBC. When a parent, legal guardian or custodian objects to the screening on the grounds screening would conflict with his or her religious tenets or practices, such refusal shall be documented on Module 6. Module 6 shall be placed in the newborn's permanent medical record.

Amended by R.2000 d.200, effective May 15, 2000. See: 31 N.J.R. 3943(b), 32 N.J.R. 1785(b). Rewrote the section.

8:19–1.3 Hearing screening follow-up

The hospital or birthing center shall inform the parent, legal guardian or custodian of an infant who failed electrophysiological hearing screening of the need for follow-up screening by three months of age by a licensed physician, licensed audiologist or person(s) under their direction or supervision, and provide the parent, legal guardian or custodian with a Newborn Hearing Follow-Up Report (see N.J.A.C. 8:19-1.4). If diagnostic testing is indicated, personnel providing the testing shall include a licensed physician and a licensed audiologist. The hospital shall provide information regarding resources for referrals including the Special Child Health Services County Case Management offices.

Repeal and New Rule, R.2000 d.200, effective May 15, 2000. See: 31 N.J.R. 3943(b), 32 N.J.R. 1785(b). Section was "High risk infant registry".

8:19-1.4 Newborn hearing follow-up report

- (a) The person completing the Newborn Hearing Followup Report for infants who failed electrophysiological screening prior to discharge or before one month of age, shall report their results to Special Child, Adult and Early Intervention Services, New Jersey Department of Health and Senior Services, PO Box 364, Trenton, New Jersey 08625-0364. The Newborn Hearing Follow-up Report shall be submitted when a formal diagnostic impression is obtained or by six months of age. When a hearing loss is confirmed, the person completing the Newborn Hearing Follow-up Report shall register the child with the Special Child Health Services Registry and indicate this by checking "yes": The child has been registered with Special Child Health Services Registry in the "Impressions" section of the follow-up form. A Newborn Hearing Follow-up Report shall be provided at no cost by Special Child, Adult and Early Intervention Services to the parents of infants who are to be screened and to any other persons who may request such forms.
- (b) If a newborn is not screened prior to discharge from a hospital or birthing center or is born outside a hospital or birthing center and not transferred to a hospital or birthing center, the baby shall be screened with electrophysiological measures prior to one month of age. The pediatrician or midwife shall ensure that the electro-physiological screening is done and that the "Electrophysiological Responses" section of the Newborn Hearing Follow-up Report is completed and sent to Special Child, Adult and Early Intervention Services, New Jersey Department of Health and Senior Services, PO Box 364, Trenton, New Jersey 08625–0364. The Newborn Hearing Follow-up Report shall be sent to the Department within one week of the screening/testing.
- (c) The Newborn Hearing Program shall establish a system to evaluate the extent to which infants who fail the electrophysiologic screen are receiving timely diagnostic testing.

Amended by R.2000 d.200, effective May 15, 2000.