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*California Newborn Screening Program*

Recommendations for Care of Infants with  
Newborn Screening Results of  
Sickle Cell Disease

The purpose of statewide screening for sickle cell disease and other hemoglobinopathies is to identify families at risk for hemoglobinopathies and to assure that these families bring their infants to an authorized facility to receive the proper attention as described in the revised guidelines, *The Management of Sickle Cell Disease, Fourth Edition (US Dept. Of Health and Human Services publication 04-2117, June 2002, reprinted 2004)\**. These guidelines are recommended for infants identified in California with newborn screening results indicating sickle cell disease. The guidelines include, but are not limited to, the following:

1. Confirmation of diagnosis.
2. Twice daily oral prophylactic penicillin started before age two months and folic acid therapy as soon as practical.
3. Education and genetic counseling for family members by health care professionals sensitive to the needs of patients with sickle cell disease. Follow-up visits for babies with sickle cell disease every 2 to 3 months during the first two years of life, planned to coincide with the immunization schedule.

Please remember that according to *California Code of Regulations, Title 17, Subchapter 9, Heritable Diseases (Section 6506 (h))*, all physicians making a diagnosis of a preventable heritable disorder for which testing is required shall report such diagnosis to the California Department of Public Health, Genetic Disease Screening Program.

\* available on-line at: [http://www.nhlbi.nih.gov/health/prof/blood/sickle/sc\\_mngt.pdf](http://www.nhlbi.nih.gov/health/prof/blood/sickle/sc_mngt.pdf)

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