

COMMUNICATING WITH CONFIDENCE ABOUT NEWBORN SCREENING: FOR MIDWIVES IN THE COMMUNITY BIRTH SETTING

SCREENED DISORDERS:

- Metabolic Disorders
- Endocrine Disorders
- Sickle Cell/Hemoglobin Disorders
- Cystic Fibrosis
- Neurological Disorders
- Immunological Disorders

Approximately **425,000** are babies born in **California each year**, with over 5,000 babies born at home or at a community birth center.

Every year, the California Newborn Screening (NBS) Program **diagnoses between 800 to 1,000 babies with a disorder**.

Educating your families about newborn screening early allows your client to make an informed decision and supports the client's maternal autonomy. The Important Information for Parents (IIP) trifold must be provided to parents during a prenatal visit in the 2nd or 3rd trimester. It is intended to foster a dialogue by encouraging your client to ask questions about this important screening.



**INFORMATION
FOR MIDWIVES
IN COMMUNITY
BIRTH SETTINGS**

For more information, visit the [Information for Midwives web page](https://go.cdph.ca.gov/NBSMidwives) (go.cdph.ca.gov/NBSMidwives). Use the QR code to the left by holding your phone's QR reader to it.

www.cdph.ca.gov/NBS



➤➤➤ NEWBORN SCREENING IS REQUIRED

California law requires that every baby born in California must be screened **12 to 48 hours after birth**. Timeliness in newborn screening is critical to prevent delays in diagnosis and treatment. Some disorders may begin to affect the baby's health within a few days of birth. Early treatment is crucial and promotes improved development and health outcomes.

➤➤➤ A COMPLETED TRF IS REQUIRED FOR EVERY BIRTH YOU ATTEND

Always complete the test request form (TRF) and send it to the Newborn and Prenatal Screening (NAPS) Laboratory. Make sure to give the pink/blue copies to the parent(s) as a receipt. If your client refuses newborn screening because of a religious objection, have them sign the form to indicate refusal.

These TRF pink/blue copies are legal evidence of a birth. They must be given to the parents to register the birth and to obtain a birth certificate from the registrar. Information on how to send the specimens to the NAPS lab is available on the [Information for Midwives web page](https://go.cdph.ca.gov/NBSMidwives) (go.cdph.ca.gov/NBSMidwives).

➤➤➤ WHAT TO EXPECT AFTER TESTING AND POTENTIAL FOLLOW UP AFTER SCREENING

In most cases, the results of the newborn screening will be ready within 14 days of collection and are sent directly to the midwife and the pediatric provider listed on the TRF. Sometimes a repeat screen is needed because the screen is inadequate and a repeat screen will need to be collected as soon as possible, within 48 hours of the notification.

Additional screening may be also required to either confirm or rule out a positive result. In this case, you or baby's pediatric care provider listed on the TRF will contact the parent. Please remind your client(s) that a positive newborn screening result is NOT diagnostic but indicates that additional testing is needed.

➤➤➤ STORAGE OF NEWBORN SCREENING BLOOD SPOTS

Clients have the right to have the baby's blood spots destroyed after screening. For instructions on how clients can do this, visit the [NBS Program blood spot web page](https://bit.ly/NBSResearch) (<https://bit.ly/NBSResearch>).

➤➤➤ BILLING AND INVOICING

Parent(s) are directly billed for newborn screening. They will receive an invoice along with a form for their insurance information. By law, insurance must cover all NBS Program fees, with some exceptions. Insurance information can be provided by mail, by phone (1-800-597-0832) or online through the [CDPH payment portal](https://cdphpaymentportal.sutherlandglobal.com/) (<https://cdphpaymentportal.sutherlandglobal.com/>). Parents can also choose to pay for the newborn screening directly through the payment portal.

The midwife is not billed for the NBS Program screening. Additional information on the current NBS Program fee and payment options can be found on the NBS Program website.