Indiana State Department of Health | Division of Maternal and Child Health

Newborn Screening Program

Instructions for Completing Monthly Summary Report

The Heel-Stick Monthly Summary Report (MSR) has been updated to add data elements that will help birthing facilities and the ISDH Newborn Screening Program provide timely, appropriate follow-up for all children who do not receive a newborn screen. **Please read the instructions below when completing your Heel-Stick MSR.**

NOTE: **The Heel-Stick Exception Reporting Form is now two (2) pages. Each infant is labeled with an "Infant #." This will enable you to enter corresponding data on page 2 for a child without re-writing his/her demographic information.**

Heel-Stick Exception Reporting Form – PAGE 1

1. Enter your facility's name and the month for which you are submitting your MSR in the top line.

2. Infant demographic details

   Complete demographic information for the child. **All items marked with an asterisk (*) are required.** These data points are extremely helpful in identifying accurate matches for children and preventing the creation of duplicate records. **Your MSR will not be processed until all required information is complete.**

3. Transfer details

   a. Enter a transfer option for each child. **You must select a transfer code for every child on your MSR.** Transfer codes include:

      i. **Not transferred** (code a) – This child was born in your facility and was not transferred to another facility before discharge.

      ii. **Transferred out of your facility** (code b) – This child was born at your facility, but was transferred to another facility.

      iii. **Transferred into your facility** (code c) – This child was born at another facility, but was transferred to your facility.

   b. If you chose "Transferred out" or "Transferred in," enter the date the child was transferred in/out of your facility ("Date of transfer") and the name of the other facility involved in the transfer.

4. Exception details

a. Select an exception code for each child. Exception codes include:

i. **Transfer only** (code 1)

This code is for children who were either:

1. Transferred out of your facility before receiving a newborn screen

OR

2. Transferred into your facility & received a newborn screen, AND do not have any additional exceptions (e.g., not in the NICU, not deceased, no Religious Waiver)

ii. **Finally screened** (code 2)

This code is for children who were "hold-overs" from the previous month's MSR and received a newborn screen during this calendar month. Children who are considered "hold-overs" on an MSR are children who were listed with "NICU," "Initial screen next month," or "Discharged without NBS" exception codes last month. **If you select this option, please enter the date that the child received his/her NBS in the "Date of NBS/death/Religious Waiver/discharge" box.**

iii. NICU (code 3)

This code is for a child who did not receive his/her NBS because he/she is in the NICU. Children with the "NICU" exception code are considered "hold-overs" and will need to be updated next month.

iv. **Initial screen next month** (code 4)

This code is for children who were born at the end of a calendar month and were not old enough to receive a NBS before the end of the month. Children with the "Initial screen next month" exception code are considered "hold-overs" and will need to be updated next month.

v. Deceased (code 5)

This child did not receive a NBS because he/she is deceased. **If you select this option, please enter the child's date of death in the"Date of NBS/death/Religious Waiver/discharge" box.**

vi. Religious Refusal (code 6)

Children with this exception code did not receive a NBS because their parents completed & signed a Religious Waiver declining the newborn screen. **If you select this option, please enter the date that the child's parents signed the Religious Waiver in the "Date of NBS/death/Religious Waiver/discharge" box and send a copy of the completed, signed Religious Waiver to the ISDH Newborn Screening Program.**

vii. Discharged without newborn screen (code 7)

This exception code is for children who did not receive an initial newborn screen either due to an error on the part of the birthing facility (e.g., discharged from the hospital before receiving a NBS) or due to an unauthorized parent refusal (e.g., parents refused NBS but did not complete a Religious Waiver). If you select this option, please enter the date that the child was discharged in the "Date of NBS/death/Religious Waiver/discharge" box.

NOTE: Any child who is discharged from your facility without receiving a NBS must be immediately reported to the ISDH Newborn Screening Program!

Heel-Stick Exception Reporting Form – PAGE 2

1. Enter your facility's name and the month for which you are submitting your MSR in the top line.

2. Mother's demographic details

   Complete demographic information for the child's biological mother. All items marked with an asterisk (*) are required. These data points are extremely helpful in identifying accurate matches for children and preventing the creation of duplicate records. Your MSR will not be processed until all required information is complete.

3. Primary care provider's demographic details

   Complete demographic information for the child's primary care provider. All items marked with an asterisk (*) are required. Your MSR will not be processed until all required information is complete.

NOTE: Each child is labeled on page 1 of the Heel-Stick Exception Reporting Form with an "Infant #". This will enable you to complete corresponding data on page 2 without re-entering the child's demographic information.

NOTE: A "Comments" section is included at the bottom of each page of the Heel-Stick Exception Reporting Form for any notes you would like to include. Please label all comments with the appropriate child's MRN.

Summary Statistics

Complete all fields on the "Hospital/Midwifery Monthly Summary Report" form. If your facility's contact information has changed, please check the box to help the ISDH Newborn Screening Program maintain current e-mail and phone distribution lists.

Completed reports are due to the ISDH Newborn Screening Program by the 15th of each month. Please submit your MSR to:

Iris Stone, Heel-Stick Program Director

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Indianapolis, IN 46204

(317) 234 – 2995 (fax) or IStone@isdh.IN.gov