Indiana Genomics and Newborn Screening Program

2017 Fact Sheet

Indiana's Genomics and Newborn Screening Program consists of 3 screens: heelstick, pulse oximetry, and hearing screen. Every baby receives a pulse oximetry screen, hearing screen, and an initial heelstick prior to leaving the hospital. Second screens may be needed for various reasons. It is important for parents to know that an abnormal or failed screen does not always mean that their baby has one of the 47* conditions. It does mean that additional testing is needed for confirmation.

Heelstick Screening

In 2017, the Indiana Genomics and Newborn Screening Program performed:

82,876 Initial Heelstick Screens

+

14,980 Second Heelstick Screens

=

97,856 Total Heelstick Screens

2,082

Abnormal screens were detected requiring repeat heelsticks and/or confirmatory testing

1,709

Babies with confirmed disease or trait

*In 2018, SCID and SMA will be added to the newborn screening panel for heelstick.

BDPR Indiana Birth Defects and Problems Registry

NEWBORN SCREENING INDIANA

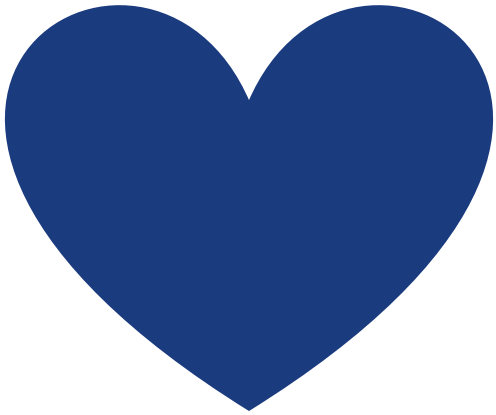
Indiana Genomics and Newborn Screening Program

2017 Fact Sheet

Pulse Oximetry Screening

In 2017, the Indiana Genomics and Newborn Screening Program detected:

40 babies who needed cardiology consultations who weren't prenatally diagnosed with congenital heart defects



The IBDPR received **136** reports of critical congenital heart defects (CCHDs).

Hearing Screening

In 2017, the Indiana Genomics and Newborn Screening Program through the Early Detection and Intervention Program screened:

94%

of live births for hearing loss

About **3,000** were referred for diagnostic audiological evaluation.

IBDPR Indiana Birth Defects and Problems Registry

NEWBORN SCREENING INDIANA