



KIDSNET

KIDSNET is Rhode Island's information system that helps make sure that children receive complete preventive healthcare. All babies born in Rhode Island have health information included in KIDSNET. As your baby grows, your doctor and other authorized professionals may add your child's immunizations, height and weight measurements, nutritional status, medical conditions, and results of developmental, hearing, lead, and newborn blood screenings. Information from your baby's birth certificate and from Family Visiting, Early Intervention, Head Start, Early Head Start, Cedar, Asthma, Child Outreach, and WIC Programs is also included. If your child has been to different doctors, KIDSNET will keep track of preventive health services in one place.

KIDSNET information is confidential and is protected under state and federal privacy laws. Only the Rhode Island Department of Health, doctors, nurses, and other authorized professionals can see KIDSNET information. You have the right to see your child's information and to ask that incorrect or incomplete information be changed. You also have the right to restrict who can see your child's information. For details, call the Health Information Line at 401-222-5960 / RI Relay 711, weekdays from 8:30 a.m. to 4:30 p.m.

Congratulations!

Congratulations on the birth of your baby! This guide explains several early screening tests and services that Rhode Island offers for newborns. Before leaving the hospital, your baby will have these screening tests to detect serious conditions that may affect his or her health and development. All conditions identified through these screenings can be treated if found early. You do not have to pay for any of these screenings.



Health Information Line

If you need more information about any of the newborn screening services or programs described in this guide, call the Health Information Line at 401-222-5960 / RI Relay 711, weekdays from 8:30 a.m. to 4:30 p.m. Our team speaks English and Spanish.



Newborn Screening and Services

A guide to test results, programs, and follow-up for your baby.



Newborn Blood Screening

Before your baby goes home from the hospital, a few drops of blood will be taken from your baby's heel. The blood will be screened for metabolic (how the body digests food), endocrine (how the body controls many functions), and hemoglobin (blood) conditions (refer to list for more details about these conditions). Newborn blood screening is required by law. Blood samples are stored until your baby reaches adulthood. To refuse, you must sign a waiver stating that you understand the risk of not having the screening test done.

The newborn blood screening should be done when your baby is at least 24 hours old. If your baby leaves the hospital before this time, you will have to bring your baby back for the screening. Sometimes, a screening may need to be repeated. This does not necessarily mean that your baby has a condition. If your baby's screening needs to be repeated, a doctor or nurse will call and tell you. The screening needs to be repeated as soon as possible. It is best to do this at the hospital where your baby was born, but you can go to the lab at any maternity hospital in Rhode Island.

Results from these screenings are reported to your baby's doctor. Screening is available for many conditions beyond those included in Rhode Island's Newborn Screening Program. These additional screenings are available for a fee through other labs. If you would like to have your baby receive additional screening tests, talk to a doctor or nurse while you are in the hospital about the tests and where you can get them done.

Newborn Hearing Screening

During your hospital stay, your baby's hearing will be screened to measure how the ear responds to soft sounds. How is the hearing screening done? A special machine shows if your baby responds to sounds. The screening takes about 10 to 15 minutes and does not hurt. You will receive the results verbally and in writing, before you leave the hospital.

If your baby does not pass the hearing screen, it means that your baby needs follow up. The birthing hospital will make an appointment for your baby to have follow-up hearing screening. Bring your baby back to the hospital for the repeat screening, as soon as possible.

Follow-up testing is very important. If your baby has a hearing loss it is important to find out early and get care to help with learning and language. If the hospital does not give you an appointment, you can call the

Rhode Island Hearing Assessment Program (RIHAP) at 401-277-3700 for further information.

If your baby has risk factors for hearing loss, RIHAP will recommend that you take your baby to a hearing specialist (audiologist) for more testing at 7 to 9 months of age. The RIHAP program will mail a letter to you with information on how to schedule this appointment. If you have questions about your baby's hearing screening results, please call RIHAP at 401-277-3700.

Your baby's doctor will continue to check your baby's hearing, speech, and language development.

Family Visiting

Being a parent is very rewarding and sometimes challenging. Having a little extra help and guidance can make it just a little easier to be a parent. Our Family Visiting program will:

- Offer tips to help your baby grow up healthy
- Provide prenatal support and help with infants and toddlers
- Support you on how to manage a busy life
- Easy ways to connect and share with other moms

We will visit you at home or anywhere in your community. Every visit is about helping you help your baby develop and grow up healthy. To learn more or request a visit, **text baby to 444999; call 401-222-5960; or see FamilyVisitingRI.org**

Birth Defects Program

Babies identified with birth defects in the newborn period are included in a Birth Defects Information System at the Rhode Island Department of Health. The Birth Defects Program uses information in this system to make sure that families and their children receive appropriate services and referrals. This information is also used to study patterns of birth defects. All information in the system is confidential and is protected under state and federal privacy laws.

If you do not want your child's information entered into the Birth Defects Information System, you may either contact your child's doctor directly or call the Health Information Line at **401-222-5960 / RI Relay 711**, weekdays from 8:30 a.m to 4:30 p.m. You also have the right to restrict the release of information on your child from the Birth Defects Information System and to choose to not be contacted by the Birth Defects Program.



Rhode Island screens babies for 31 health conditions including hearing loss and critical congenital heart disease. The conditions are grouped in the categories explained below. Early detection and treatment can prevent many serious effects of these conditions.

HEMOGLOBIN CONDITIONS: These conditions affect a baby's blood. They can lead to anemia (not enough red blood cells), slowed growth, pain, and damage to vital organs. Babies with hemoglobin disorders are treated with antibiotics because they can get very sick and even die from common infections.

ENDOCRINE CONDITIONS: Babies with endocrine disorders do not make enough of certain types of hormones. This affects their growth and development. These conditions are treated with special medicine.

CYSTIC FIBROSIS (CF): Cystic Fibrosis affects the salt or water content of certain body fluids, such as sweat and mucus. This can lead to problems with breathing, digesting, and other body functions. Treatment may include medicines, special diets, and other therapies.

AMINO ACID CONDITIONS: Babies with these conditions cannot digest certain amino acids (parts of proteins in our food). This can affect health, growth, and learning. Medicines and special diets can help prevent these problems.

FATTY ACID OXIDATION CONDITIONS: Babies with these conditions have problems making energy from fat in the body or from food. Serious health problems can occur if these conditions are not treated. Medicines, special low fat diets, and feeding a newborn at least every four hours can help prevent these problems.

ORGANIC ACID CONDITIONS: Babies with these conditions have problems digesting certain parts of protein from the food they eat. This can cause serious effects on health, growth, and learning. Early treatment with medicine can help prevent these problems.

OTHER CONDITIONS: Babies with biotinidase deficiency can have problems with growth and development. This condition is treated with special medicine. Babies with galactosemia cannot use the sugars in milk, formula, and breast milk. If it is not treated, it can hurt the baby's eyes, liver, and brain. This condition is treated with special formula and diet. Babies with severe combined immunodeficiency are more at risk to develop infections. This condition is treated with a bone marrow transplant or another intervention.

Certain other conditions may be detected through newborn screening. As testing methods improve, new conditions may be added to the list. The most current list is at www.health.ri.gov/newbornscreening/blood. For more information about newborn screening and specific conditions visit www.marchofdimers.org/baby/newborn-screening.aspx. You can also call the Health Information Line at 401-222-5960 / RI Relay 711, weekdays from 8:30 a.m. to 4:30 p.m. Our team speaks English and Spanish.



CRITICAL CONGENITAL HEART DISEASE: Some babies are born with heart conditions that can be dangerous if not treated or if treatment is delayed. Some of these conditions can cause low oxygen levels in the blood. We will do a painless test called "pulse oximetry screening" (also known as "pulse ox") to measure your baby's oxygen level. You will be given the results of the pulse ox before you leave the hospital. A passing pulse ox screen does not pick up all heart conditions. If your baby does not pass the pulse ox screening, more tests will be done. If you have questions about pulse ox, you should ask the nurse or doctor caring for your baby. Also, if you have any concerns about the health of your baby after you go home, please talk to your baby's doctor.