



Birthing Facility-based Newborn Screening Coordinator

The suggested responsibilities of the birthing facility-based newborn screening coordinator are:

1. Perform Quality Assurance Activities:
 - a. Establish a protocol to assure that every baby born at the facility, or transferred there after birth, is appropriately screened.
 - b. Maintain log to track newborn screening specimens collected and sent.
 - c. Assure adequate inventory of blood collection cards.
 - d. Establish an internal check for demographic data, blood collection quality, and timeliness of specimen submission.
 - e. Implement blood collection protocols and ensure proper documentation on the specimen card (based upon screening program guidelines) for:
 - i. Transfusion
 - ii. TPN (Total Parenteral Nutrition) administration
 - iii. Early discharges
 - iv. Transferred
 - v. Premature/extended stay babies
 - f. Coordinate physician/parent notification process if the specimen is unsatisfactory for testing.
 - g. Establish a process to assure timely documentation of a newborn screening report for all babies screened.
2. Perform Educational activities:
 - a. Serve as a contact person and facilitator between the state screening program and the birthing facility staff.
 - i. Inform and educate facility staff about new program guidelines and protocol changes (new disorders added to test panel, changes in specimen collection requirements, administrative rule changes and other newborn screening information, as necessary).
 - ii. Disseminate information (newsletters, Quality Assurance (QA) reports, etc.) received from the newborn screening program to the appropriate facility staff (nursing, laboratory, clinicians).
 - b. Maintain adequate supply of newborn screening parent brochures/pamphlets for parents.
 - c. Establish an education protocol for parents prior to specimen collection, including a dissemination process for the parent NBS brochure/pamphlet before the blood collection.
 - d. Work with the Obstetrics Department staff to incorporate NBS educational information in existing and future prenatal classes offered to parents.
 - e. Assure blood drawing (specimen collection) staff competency (new and existing staff).
3. Collect and report missing/incorrect demographic information requested by the newborn screening laboratory (program) via telephone or fax within the appropriate timeframe (established by the newborn screening program).
4. Establish a procedure for witnessing and recording those parents who refuse newborn screening testing on their baby.

