## **Questions and Answers**

# How do I find out about my baby's newborn screening results?

Results are available from your baby's primary care provider. Ask about your baby's results at his/her well child visit.

# <u>Does my baby need the screening if there</u> is no family history of these disorders?

YES. Most children who have disorders that have been detected by newborn screening DO NOT have a family history of genetic or metabolic disorders, and often seem healthy at birth.

#### Is a second screen really necessary?

It is highly recommended that a second screen be performed to detect conditions that might not show up on the initial screen due to several factors.

# If the screen is abnormal, does that mean my baby has the disease?

Not necessarily. Further testing and evaluation by a specialist is required to determine if the disease is present. Your primary care provider will refer your infant to a specialist if necessary.

For more detailed information on Newborn Metabolic Screening please visit: www.marchofdimes.com



# Discharge prior to 24 hours If babies go home from the hospital before they are 24 hours old, the baby's newborn screen MUST be repeated.

#### Second testing

You will need to bring your baby to the hospital or doctor's office for a repeat (2nd) screening before your baby is two weeks old.



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Available services may vary by location.

This publication is available in an alternative format by request.

Call 307-777-6921

# A healthy first step for you and your baby



## Maternal and Family Health



## Things you should know about The Newborn Metabolic Screening Program

### When your baby is screened

Between 24 and 72 hours after birth, your baby will be screened for hearing loss and many rare diseases.

If these diseases are diagnosed and treated early, serious problems may be prevented.



## How your baby is screened

A few drops of blood from your baby's heel will be sent to the lab to test for many rare diseases.

#### Why your baby is screened

Wyoming State Law (W.S.35-4-801 and W.S.35-4-802) requires screening of ALL newborns for these diseases, unless parents sign a waiver opting out of the screening.

For more information about Newborn Metabolic Screening visit: www.marchofdimes.com

#### You should also know

- Risks of not screening a newborn can be serious although rare. When test results show that a baby has a birth defect, early diagnosis and treatment can make the difference between lifelong disabilities and healthy development.
- It is highly recommended that a 2nd screen is completed at 7-10 days of age for conditions that may not show positive on the initial screening.
- Do not be alarmed if test results come back abnormal. The initial screening tests give only preliminary information that must be followed up by more precise testing.
- Parents can decline having their baby screened by completing the Consent/Waiver form at the hospital.



# What can be detected by the Newborn Screen

Here is a description of some of the conditions and available treatments:

PKU (Phenylketonuria): Babies with this disorder have problems digesting phenylalanine, which is found in almost all food. If detected early, intellectual disability may be prevented by feeding the baby a special diet.

Hypothyroidism: Babies with this disorder have a hormone deficiency that slows growth and brain development. If detected early, treatment with oral doses of the hormone can permit normal development.

<u>Sickle Cell Anemia:</u> Babies with this inherited blood disease can be treated to prevent pain and organ damage.

Congenital Adrenal Hyperplasia (CAH):
Babies who have this group of disorders are deficient in certain hormones. Treatment with the missing hormones suppresses the disease and can prevent organ damage and

even death

<u>Galactosemia:</u> Babies with this disorder can not digest milk sugar (galactose). Treatment can prevent blindness, intellectual disability, and death.