

# Newborn Pulse Oximetry Screening for Critical Congenital Heart Disease

## For Babies Born at Home or in Freestanding Birth Centers in Maine

Infant's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Time: \_\_\_\_\_  
 Mother's Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
 Infant's PCP: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Infant's Data Status     Screened     Missed Screen     Informed Refusal\*     Deferred\*\*

\*If screen refused, submit signed informed choice document

\*\*If screen deferred, indicate reason:  PN Dx     NICU     Echo     On O2     Transferred     Other \_\_\_\_\_

Screening Location:                     Home                     Birth Center

Symptomatic of CCHD:                 Yes                     No

Known Elevated Risk of CCHD:       Yes                     No

\*If elevated risk, indicate how risk was identified:     Prenatal U/S     Pulse Ox     Physical Exam     Other \_\_\_\_\_

### Screen #1

Date:	Time:	Age in hours:	
Right hand (%):		Foot (%):	Difference (%):
<input type="checkbox"/> Pass	<input type="checkbox"/> Fail	<input type="checkbox"/> Continue Screening	

### Screen #2

Date:	Time:	Age in hours:	
Right hand (%):		Foot (%):	Difference (%):
<input type="checkbox"/> Pass	<input type="checkbox"/> Fail	<input type="checkbox"/> Continue Screening	

### Screen #3

Date:	Time:	Age in hours:	
Right hand (%):		Foot (%):	Difference (%):
<input type="checkbox"/> Pass	<input type="checkbox"/> Fail	<input type="checkbox"/> Refer for further evaluation	

### Guidelines:

- If pulse oximetry saturation is less than 90% in either hand or foot OR newborn is symptomatic, Neonatology must be notified immediately.  
(FAIL MUST BE CHECKED)
 

<input type="radio"/> Maine Medical Center Neonatology (Portland): 207-662-2246
<input type="radio"/> Eastern Maine Medical Center Neonatology (Bangor): 207-973-8781
- If pulse oximetry saturations are less than 95% in both hand and foot
- OR If there is a greater than 3% difference between the two saturations on three readings each separated by one hour
- AND newborn is asymptomatic, Pediatric Cardiology must be notified (FAIL MUST BE CHECKED)
 

<input type="radio"/> Maine Medical Center Pediatric Cardiology (Portland): 207-883-5532
<input type="radio"/> Eastern Maine Medical Center Pediatric Cardiology (Bangor): 207-942-4108
- If pulse oximetry saturations are 95% or higher in both extremities
- AND there is less than 3% difference between the two saturations, the reading is considered normal (PASS MUST BE CHECKED)

#### Newborns with failed screening:

<input type="checkbox"/> Neonatology Notified	Name of Provider Consulted: _____	Date/Time: _____
Plan: _____		
<input type="checkbox"/> Peds Cardiology Notified	Name of Provider Consulted: _____	Date/Time: _____
Plan: _____		
<input type="checkbox"/> Newborn's PCP Notified		Date/Time: _____

Midwife's Name: _____	Practice Name: _____	
Mailing Address: _____		Phone Number: _____
Midwife's Signature: _____		Date/Time: _____

# Mueller CCHD Screening Table

<b>RIGHT HAND</b>	<b>FOOT</b>											<b>&lt;90</b>
<b>100</b>	100	99	98	97	96	95	94	93	92	91	90	*
<b>99</b>	100	99	98	97	96	95	94	93	92	91	90	*
<b>98</b>	100	99	98	97	96	95	94	93	92	91	90	*
<b>97</b>	100	99	98	97	96	95	94	93	92	91	90	*
<b>96</b>	100	99	98	97	96	95	94	93	92	91	90	*
<b>95</b>	100	99	98	97	96	95	94	93	92	91	90	*
<b>94</b>	100	99	98	97	96	95	94	93	92	91	90	*
<b>93</b>	100	99	98	97	96	95	94	93	92	91	90	*
<b>92</b>	100	99	98	97	96	95	94	93	92	91	90	*
<b>91</b>	100	99	98	97	96	95	94	93	92	91	90	*
<b>90</b>	100	99	98	97	96	95	94	93	92	91	90	*
<b>&lt;90</b>	*	*	*	*	*	*	*	*	*	*	*	<90

**Green= Negative Screen (PASS)**  
**Red=Rescreen in 1 hour**  
**Red for 3 consecutive screens= Positive Screen (FAIL)**  
**\*Red\*= Automatic Positive Screen (FAIL)**