Is there anything else I need to do?

ASK Hospital staff or your midwife

if newborn screening was

done.

BE SURE The hospital or midwife

and your baby's healthcare provider have the right phone number and address

to reach you.

CHECK With your baby's healthcare

provider or midwife about

the NBS results.

FOLLOW Directions from your

baby's healthcare provider if more tests or medical appointments are needed.

Saving babies since 1965



Would you like to learn more?

Please talk to your baby's healthcare provider or contact us by:

Telephone:

1-866-673-9939 (toll-free)

Fax:

517-335-9419

Email

newbornscreening@michigan.gov



P.O. Box 30195 Lansing, MI 48909

www.michigan.gov/newbornscreening



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Michigan Newborn Screening

Saving babies since 1965



Learn about blood spot screening...

What is Newborn Screening (NBS)?

NBS is a program that screens all babies at 24-36 hours of age for rare but serious

disorders.
Michigan
law requires
newborn
screening
to make
sure that
babies
who need
treatment



are found early. As part of newborn screening, your baby is checked for hearing loss and signs of critical congenital heart disease. A few drops of blood are also taken from your baby's heel to fill spots on a filter paper card. The card is sent to the State Newborn Screening Laboratory where blood spots are tested for over 50 different disorders that benefit from early treatment. This pamphlet describes newborn blood spot screening.

My baby seems really healthy. Is NBS still needed?

YES! Whether your baby is born in a hospital, non-hospital setting or at home, screening should be done. Most babies with these disorders seem healthy at birth but can become very sick in a short time. If not treated early, serious health problems, severe developmental delay and even death can occur. NBS is the best way to find nearly all babies with these disorders as early as possible.

What happens if screening suggests a health problem?

The NBS Follow-up Program will alert your baby's healthcare provider. You will get a call about what to do next, but it does not always mean your baby will have a problem. Additional testing may be needed.

What are the disorders?

In Michigan, blood spot screening looks for over 50 disorders that may affect:

- Blood cells
- Brain development
- How the body breaks down nutrients from food
- Lungs and breathing
- Hormones
- How the body fights infection

Congenital hypothyroidism, sickle cell disease, and cystic fibrosis are some of the most common disorders. For a complete list, visit:

www.michigan.gov/newbornscreening.

NBS may also find some babies who are healthy carriers of these disorders.

What happens if my baby has one of these disorders?

Help is available if your baby is found to have a disorder. Treatment usually begins early and continues through life. Each year, newborn blood spot screening finds about 270 Michigan babies with these medical disorders.



How is the cost of NBS covered?

If your baby is born in a hospital, the cost is part of the hospital charge. If your baby is born in a non-hospital setting, the NBS card may be purchased online at www.michigan.gov/nbsorders or by calling 1-866-673-9939. Some homebirths may qualify for a free screening.

What happens to my baby's blood spots after screening?

All of the blood spots are not always needed for screening. The lab saves one full blood spot for future use by you or your child, if it is ever needed. The remaining blood spots are sent for storage.

Remaining blood spots from newborn screening may be made available for future medical research with a parent's consent. To learn more, please read the Michigan BioTrust for Health pamphlet or visit www.michigan.gov/biotrust.

State law allows you to ask that a second blood spot sample be taken for your safekeeping. If you would like a second sample, please talk to your healthcare provider.

Forms are available if you want your child's blood spots destroyed after newborn screening is complete.
Please call 1-866-673-9939 for more information or visit
www.michigan.gov/newbornscreening.