

**Handle With Care...
My Future is in
Your Hands!**



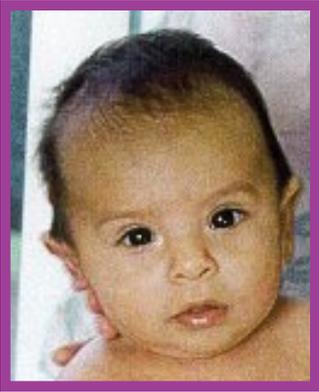
**Newborn Screening
Specimen Collection
Guide**

**Texas Department of State Health Services
Newborn Screening Program
1100 West 49th Street
Austin, Texas 78756
512/458-7111**



1-800-252-8023

**<http://www.dshs.state.tx.us/newborn/>
newborn@dshs.state.tx.us**



Every baby deserves the best chance to have a healthy future. That is why all children born in Texas are tested for certain serious birth defects.

The most critical step in preventing the damage caused by inherited diseases is to check a newborn's blood within the first 48 hours of life and again at one to two weeks of age. ***A satisfactory or valid newborn screening specimen is most important.*** These specimens must be submitted to the Texas Department of State Health Services (DSHS) Laboratory on a properly completed filter paper collection form obtained from the department.

Texas Administrative Code [TAC §37.55(a)] states either a nonphysician attending the delivery of a newborn or any physician or health care practitioner attending a newborn within the first 30 days of life after delivery shall cause the screens to be performed — and that a ***satisfactory and valid*** blood specimen be submitted to the DSHS on a properly completed filter paper collection form. The DSHS Laboratory performs the newborn screening test series on specimens received from over 4,000 locations around the state. Approximately 3,000 specimens arrive in the mail each day and each specimen is visually inspected to determine if it is suitable to test.

Unsuitable specimens cause delays that can seriously affect the health of a newborn. This booklet shows step-by-step how to collect a ***satisfactory and valid*** newborn screening specimen. Before collecting a newborn screening specimen, please carefully read and follow the directions provided in this booklet. Keep this booklet in a safe, convenient place for handy reference.

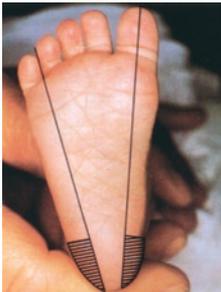
NEONATAL SCREENING BLOOD SPECIMEN COLLECTION AND HANDLING PROCEDURE



- 1 Equipment: sterile lancet with tip less than 2.4mm, sterile alcohol prep, sterile gauze pads, soft cloth, blood collection form (check expiration date), gloves.



- 2 Complete ALL information. Do not contaminate filter paper circles by allowing the circles to come in contact with spillage or by touching before or after blood collection. For 1st screen, remove the Parent Copy and give to the parent. Keep the yellow copy if applicable.



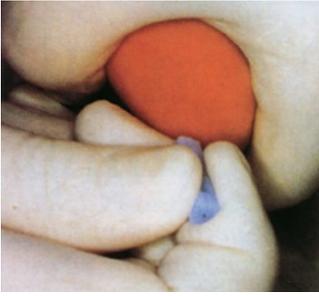
- 3 Hatched area indicates safe areas for puncture site.



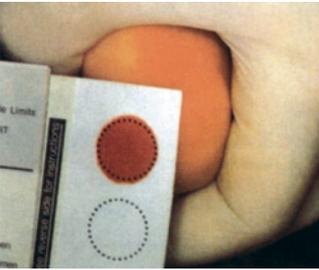
- 4 Warm site with soft cloth, moistened with warm water up to 41°C, for three to five minutes.



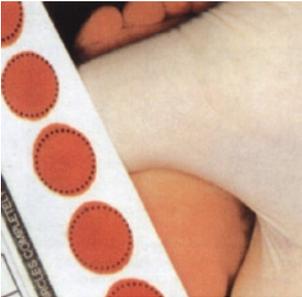
- 5 Cleanse site with alcohol prep. Wipe DRY with sterile gauze pad.



- 6** Puncture heel. Wipe away first blood drop with sterile gauze pad. Allow another **LARGE** blood drop to form.



- 7** Lightly touch filter paper to **LARGE** blood drop. Allow blood to soak through and completely fill circle with **SINGLE** application to **LARGE** blood drop. (To enhance blood flow, **VERY GENTLE** intermittent pressure may be applied to area surrounding puncture site). Apply blood to one side of filter paper only.



- 8** Fill remaining circles in the same manner as step 7, with successive blood drops. If blood flow is diminished, repeat steps 5 through 7. Care of skin puncture site should be consistent with your institution's procedures.



- 9** Dry blood spots on a dry, clean, flat, horizontal non-absorbent surface for a minimum of four hours.



- 10** Mail completed form directly to the Newborn Screening Laboratory as soon as possible and **no later** than 24 hours after collecting the specimen.

Ideal Newborn Screening Specimen Characteristics



Demographic information and **date of collection** must be filled in completely. (Specimens without a date of collection **will be rejected**)



Use only Newborn Screening cards that HAVE NOT expired.



All five circles are completely filled and saturated with blood. Universal precautions pertaining to blood and body fluids should be maintained.



Blood should be applied from only one side of the paper and appear as an even, uniform layer. The recommended collection technique is to absorb the blood directly from the heel onto the back of the paper while watching the circle to ensure that it completely fills.



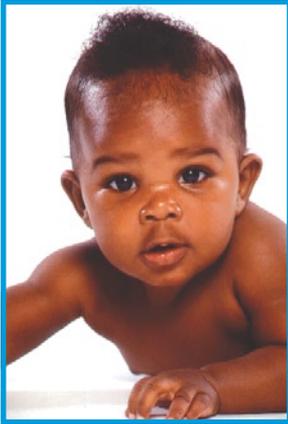
The specimen should be air dried for at least 4 hours on a flat, nonabsorbent surface in a horizontal position, protected from heat or direct sunlight.



The specimen should be mailed no later than 24 hours after collection (accumulated or “batched” specimens may result in specimens too old to test).



U.S. Postal regulations require that dried blood spots be double contained for shipping. Use flap on specimen card as the first containment and the mailing envelope as the second containment.



Invalid Newborn Screening Specimen Characteristics

The following characteristics will require a repeat specimen:



No date of collection.



Newborn screening card has expired.



Specimen accompanied by improper or incomplete demographic data.



Applying blood using capillary tubes. Layering successive drops of blood can cause incomplete or uneven saturation and incomplete filling of each circle.



Anticoagulants (EDTA, citrate) will interfere with NBS assays.



Failing to wipe off alcohol residue can dilute the specimen.



Serum separation caused by specimen being placed in plastic bag or plastic sleeve before the specimen has completely dried.



Specimen placed in a drawer, box, or other container while still wet, or mailing specimen before it has completely dried.



Hanging specimen to dry or standing it on end causing serum separation.

Do the Simple Spot Check ...

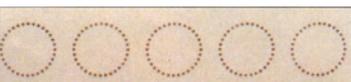
Make Sure Your Specimen is Valid

Valid Specimen



Allow a sufficient quantity of blood to soak through to completely fill the preprinted circle on the filter paper. Fill all required circles with blood. Do not layer successive drops of blood or apply blood more than once in the same collection circle. Avoid touching or smearing spots.

Invalid Specimens	Possible Causes
 <p data-bbox="106 738 425 803">1. Specimen quantity insufficient for testing.</p>	<ul data-bbox="478 633 957 925" style="list-style-type: none">• Removing filter paper before blood has completely filled circle or before blood has soaked through to second side.• Applying blood to filter paper with a capillary tube.• Allowing filter paper to come in contact with gloved or ungloved hands or substances such as hand lotion or powder, either before or after blood specimen collection.
 <p data-bbox="106 1055 425 1120">2. Specimen appears scratched or abraded.</p>	<ul data-bbox="478 958 957 1023" style="list-style-type: none">• Applying blood with a capillary tube or other device.
 <p data-bbox="106 1250 425 1315">3. Specimen not dry before mailing.</p>	<ul data-bbox="478 1153 957 1218" style="list-style-type: none">• Mailing specimen before drying for a minimum of four hours.
 <p data-bbox="106 1437 425 1502">4. Specimen appears supersaturated.</p>	<ul data-bbox="478 1347 957 1477" style="list-style-type: none">• Applying excess blood to filter paper, usually with a device.• Applying blood to both sides of filter paper.

Invalid Specimens	Possible Causes
 <p data-bbox="109 240 416 331">5. Specimen appears diluted, discolored or contaminated.</p>	<ul data-bbox="485 147 957 428" style="list-style-type: none"> • Squeezing or “milking” of area surrounding the puncture site. • Allowing filter paper to come in contact with gloved or ungloved hands or substances such as alcohol, formula, antiseptic solutions, water, hand lotion or powder, etc., either before or after the blood specimen collection. • Exposing blood spots to direct heat.
 <p data-bbox="109 537 373 602">6. Specimen exhibits serum rings.</p>	<ul data-bbox="485 449 957 732" style="list-style-type: none"> • Not wiping alcohol from puncture site before making skin puncture. • Allowing filter paper to come in contact with alcohol, hand lotion, etc. • Squeezing area surrounding puncture site excessively. • Drying specimen improperly. • Applying blood to filter paper with capillary tube.
 <p data-bbox="109 841 373 906">7. Specimen appears clotted or layered.</p>	<ul data-bbox="485 753 957 883" style="list-style-type: none"> • Touching the same circle on filter paper to blood drop several times. • Filling circle on both sides of filter paper.
 <p data-bbox="109 1008 263 1040">8. No blood.</p>	<ul data-bbox="485 920 905 953" style="list-style-type: none"> • Failure to obtain blood specimen.

Remember! Handle With Care...



Our Future is in Your Hands!

TIPS TO ENSURE VALID SPECIMENS



Date of collection is required.



Use newborn screening cards that have not expired.



Fill out demographic information completely and legibly.



Don't "batch" specimens (waiting for 4 or 5 specimens to mail at the same time).



Plan ahead for holidays and weekends. If the holiday falls on Thursday or Friday, and the specimen is not mailed until Monday, there will be a 3-4 day delay in receiving the specimen in the laboratory.



If known, use the DSHS Laboratory number of previous specimens.



Mail the specimen from the post office rather than a neighborhood mailbox (specimen could become overheated or baked).



Designate a responsible party to mail specimens and to receive results.



Keep a log of the form number or keep the yellow copy from all submitted specimens.



The NBS test are not run "stat." Please contact the DSHS Laboratory if results from particular tests are needed as soon as possible.



Follow the recommended collection procedures carefully to ensure a specimen is valid and acceptable.

For more information call 800/252-8023. Please use the following extensions to direct your call to the appropriate Newborn Screening staff:

Laboratory _____	7333
★ General information	
★ Technical information	
★ Specimen collection and handling procedures	
Supplies _____	7661
★ Forms (filter paper)	
★ Envelopes	
★ Provider labels	
Billing _____	7317
★ Payments (NBS4 Forms)	
Results _____	7578
★ Routine specimen reporting (For follow-up on abnormal screens/disorders, call Case Management.)	
Report Cards _____	6030
★ Unsatisfactory specimens received and transit time from collection to receipt at the laboratory	
Case Management _____	2129
★ General information	
★ Education Materials (Free)	
Congenital Adrenal Hyperplasia (CAH) _____	2819
Congenital Hypothyroidism _____	3666
Galactosemia _____	6827
Hemoglobinopathies (e.g., Sickle Cell Disease) _____	6832
Phenylketonuria (PKU) _____	6827
Biotinidase Deficiency _____	2071
Fatty Acid Disorders, Organic Acid Disorders, Amino Acid Disorders _____	7715

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