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1 A bill to be entitled
2 An act relating to newborn screening for critical
3 congenital heart disease; creating s. 383.146, F.S.;
4 providing definitions; providing requirements for
5 screening newborns for critical congenital heart
6 disease; providing an exception; requiring that the
7 physician, midwife, or other person attending the
8 newborn maintain a record if the screening has not
9 been performed and attach a written objection signed
10 by the parent or guardian; requiring appropriate
11 documentation of the screening completion in the
12 medical record; requiring that each hospital and each
13 licensed birth center designate a lead physician and a
14 licensed health care provider, respectively, to
15 provide programmatic oversight for the screening;
16 requiring that the screening for critical congenital
17 heart disease be conducted on all newborns in
18 hospitals and birth centers in this state; authorizing
19 the Department of Health to adopt rules to administer
20 the screening program; providing powers and duties of
21 the department; providing an effective date.

22
23 WHEREAS, congenital heart disease is the most common birth
24 defect in infants, affecting 8 out of every 1,000 newborn
25 babies, and

26 WHEREAS, early detection of congenital heart disease is
27 crucial to the health of a newborn baby because, if the
28 condition goes undiagnosed, it can cause major problems later in

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29 | the child's life, and

30 | WHEREAS, pulse oximetry is a noninvasive method of
31 | monitoring the oxygen level in the blood and is recommended as a
32 | method of screening a patient for critical congenital heart
33 | disease, and

34 | WHEREAS, physical exertion and participation in sports can
35 | cause excessive stress on the heart and, if the disease is not
36 | detected and is severe enough, participation in strenuous
37 | activity can result in death, NOW, THEREFORE,

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39 | Be It Enacted by the Legislature of the State of Florida:

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41 | Section 1. Section 383.146, Florida Statutes, is created
42 | to read:

43 | 383.146 Newborn screening for critical congenital heart
44 | disease.—

45 | (1) DEFINITIONS.—As used in this section, the term:

46 | (a) "Department" means the Department of Health.

47 | (b) "Newborn" means an age range from birth through 29
48 | days.

49 | (c) "Screening" means measuring blood oxygen saturation
50 | using pulse oximetry to determine whether a newborn needs
51 | additional diagnostic evaluation for critical congenital heart
52 | disease.

53 | (2) REQUIREMENTS FOR SCREENING OF NEWBORNS; REFERRAL FOR
54 | ONGOING SERVICES.—

55 | (a) Except as provided in paragraph (c), each licensed
56 | hospital that provides maternity and newborn care services shall

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57 ensure that, prior to discharge, all newborns are screened for
58 the detection of critical congenital heart disease.

59 (b) Except as provided in paragraph (c), each licensed
60 birth center that provides maternity and newborn care services
61 shall ensure that, prior to discharge, all newborns are screened
62 for the detection of critical congenital heart disease.

63 (c) If the parent or legal guardian of the newborn objects
64 to the screening, the screening must not be completed. In such
65 case, the physician, midwife, or other person who is attending
66 the newborn shall maintain a record that the screening has not
67 been performed and attach a written objection that must be
68 signed by the parent or guardian.

69 (d) For home births, the health care provider in
70 attendance is responsible for the screening.

71 (e) Appropriate documentation of the screening completion,
72 results, interpretation, and recommendations must be placed in
73 the medical record within 24 hours after completion of the
74 screening procedure.

75 (f) Each hospital shall designate a lead physician who is
76 responsible for programmatic oversight of newborn congenital
77 heart disease screening. Each licensed birth center shall
78 designate a licensed health care provider to provide the
79 programmatic oversight. The physician or health care provider
80 shall ensure that the appropriate referrals are completed
81 following a positive screening test result.

82 (g) Beginning no later than October 1, 2013, screening for
83 critical congenital heart disease shall be conducted on all
84 newborns in hospitals and birth centers in this state following

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85 birth admission.

86 (3) RULES.—After consultation with the Genetics and
87 Newborn Screening Advisory Council, the department shall adopt
88 and enforce rules requiring that every newborn in this state be
89 screened for critical congenital heart disease. The department
90 shall adopt the additional rules as are necessary for the
91 administration of this section, including rules providing
92 definitions of terms, rules relating to the methods used and
93 time or times for testing as accepted medical practice
94 indicates, rules relating to charging and collecting fees for
95 the administration of the newborn screening program required by
96 this section, rules for processing requests and releasing test
97 and screening results, and rules requiring mandatory reporting
98 of screenings and test results for this condition to the
99 department.

100 (4) POWERS AND DUTIES OF THE DEPARTMENT.—The department
101 shall administer and provide services required pursuant to this
102 section and shall:

103 (a) Furnish to all physicians, county health departments,
104 perinatal centers, birth centers, and hospitals forms on which
105 the results of tests for critical congenital heart disease shall
106 be reported to the department.

107 (b) Have the authority to charge and collect fees
108 sufficient to administer the newborn screening program required
109 under this section.

110 Section 2. This act shall take effect July 1, 2013.