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2 10A NCAC 43K.0102 is proposed as a temporary rule as follows:

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4 **10A NCAC 43K .0102 SCREENING REQUIREMENTS**

5 (a) All medical facilities and attending providers of the neonate or infant shall assure:

6 (1) Screening of every neonate for critical congenital heart defects (CCHD) using pulse oximetry must
7 be performed at 24 to 48 hours of age using a protocol based upon and in accordance with the most
8 current recommendations from the American Academy of Pediatrics and American Heart
9 Association (AAP/AHA) unless a diagnostic neonatal echocardiogram has been performed, which
10 are incorporated by reference including subsequent amendments and editions. A copy of the
11 recommendations is available by contacting the Division of Public Health, 1928 Mail Service
12 Center, Raleigh, North Carolina 27699-1928 or by accessing the American Academy of Pediatrics
13 web site at:

14 [http://pediatrics.aappublications.org/content/128/5/e1259.full.pdf+html?sid=85e81711-f9b8-43d1-](http://pediatrics.aappublications.org/content/128/5/e1259.full.pdf+html?sid=85e81711-f9b8-43d1-a352-479168895a72)
15 [a352-479168895a72.](http://pediatrics.aappublications.org/content/128/5/e1259.full.pdf+html?sid=85e81711-f9b8-43d1-a352-479168895a72)

16 (2) Screening of neonates and infants in neonatal intensive care units for critical congenital heart
17 defects using pulse oximetry screening must be performed using a protocol based on the
18 AAP/AHA recommendations as soon as the neonate or infant is stable and off oxygen and before
19 discharge unless a diagnostic echocardiogram is performed on the neonate or infant after birth and
20 prior to discharge from the medical facility.

21 (3) Access to FDA approved pulse oximetry equipment is available and maintenance is performed to
22 screen the neonate or infant for the presence of critical congenital heart defects.

23 (b) Parents or guardians may object to the critical congenital heart defects screening in accordance with G.S. 130A-
24 125.

25 (c) All medical facilities and attending providers of the neonate or infant shall have and implement a plan for
26 evaluation and follow up of positive critical congenital heart defect screenings.

27 (1) Evaluation and follow up of a positive screening for all neonates shall be in accordance with the
28 most current published recommendations from the American Academy of Pediatrics and American
29 Heart Association (AAP/AHA) which is incorporated by reference including subsequent
30 amendments and editions. A copy of the recommendations is available by contacting the
31 Division of Public Health, 1928 Mail Service Center, Raleigh, North Carolina 27699-1928 or by
32 accessing the American Academy of Pediatrics web site at:

33 [http://pediatrics.aappublications.org/content/128/5/e1259.full.pdf+html?sid=85e81711-f9b8-43d1-](http://pediatrics.aappublications.org/content/128/5/e1259.full.pdf+html?sid=85e81711-f9b8-43d1-a352-479168895a72)
34 [a352-479168895a72](http://pediatrics.aappublications.org/content/128/5/e1259.full.pdf+html?sid=85e81711-f9b8-43d1-a352-479168895a72)

35 (2) For neonates with positive screenings who are born in a birthing facility, a home or other location,
36 the AAP/AHA recommended evaluation and follow up should occur as soon as possible but no
37 later than 24 hours after obtaining the positive screening result.

- 1 (3) Attending providers of neonates and infants in neonatal intensive care units must have a process
2 for evaluation and follow up of positive screenings in place at their medical facility.
- 3 (4) Options for neonatal or infant echocardiograms can include on-site, telemedicine, or by transfer or
4 referral to an appropriate medical facility with the capacity to perform and interpret a neonatal or
5 infant echocardiogram. Echocardiograms must be interpreted as recommended by the most current
6 recommendations from the AAP/AHA which are incorporated by reference including
7 subsequent amendments and editions.. A copy of the recommendations is available by
8 contacting the Division of Public Health, 1928 Mail Service Center, Raleigh, North Carolina
9 27699-1928 or by accessing the American Academy of Pediatrics web site at:
10 <http://pediatrics.aappublications.org/content/128/5/e1259.full.pdf+html?sid=85e81711-f9b8-43d1->
11 [a352-479168895a72.](http://pediatrics.aappublications.org/content/128/5/e1259.full.pdf+html?sid=85e81711-f9b8-43d1-a352-479168895a72)
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13 *History Note: Authority G.S. 130A-125*