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2 10A NCAC 43K.0103 is proposed as a temporary rule as follows:

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4 **10A NCAC 43K .0103 REPORTING REQUIREMENTS**

5 (a) All medical facilities and attending providers of neonates or infants performing critical congenital heart  
6 defect screening shall report to the NC Birth Defects Monitoring Program the following information within  
7 seven days of all positive screenings:

8 (1) Name, date and time of birth of the neonate or infant, the medical facility or birth location, and the  
9 medical record number of the neonate or infant

10 (2) Age in hours at time of screening, all pulse oximetry saturation values which include initial,  
11 subsequent and final screening results, final diagnosis if known, any known interventions and  
12 treatment and any need for transport or transfer

13 (b) All medical facilities and attending providers of neonates or infants performing critical congenital heart  
14 defect screening shall report aggregate information related to critical congenital heart defect screenings  
15 quarterly using a web-based system to the Perinatal Quality Collaborative of North Carolina (PQCNC).

16 (c) PQCNC shall report aggregate information to the NC Birth Defects Monitoring Program within 30 days  
17 after the end of each quarter during a calendar year.

18 (d) The required quarterly aggregate information from medical facilities and attending providers of neonates or  
19 infants reported to PQCNC and that PQCNC must report to the NC Birth Defects Monitoring Program shall  
20 include the total unduplicated counts of:

21 (1) Live births

22 (2) Neonates and infants who were screened

23 (3) Negative screenings

24 (4) Positive screenings

25 (5) Neonates or infants whose parents or guardians objected to the critical congenital heart defect  
26 screening

27 (6) Transfers into the medical facility, not previously screened, and

28 (7) Neonates and infants not screened due to diagnostic echocardiograms being performed after birth  
29 and prior to discharge, transfer out of the medical facility, missed screening, death or other  
30 reasons.

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32 *History Note: Authority G.S. 130A-125*