

Screening for critical congenital heart disease is a very important issue that was addressed by legislation signed by Governor O'Malley last week. Most infants with critical congenital heart disease are identified before birth or because they have symptoms soon after they are born. However, about 10 to 20 babies a year in Maryland do not show any symptoms until they are sent home. While screening can save lives, the professional groups that usually establish standards of care for newborns have not yet recommended pulse oximetry screening for critical congenital heart disease as standard of care. Since there are many issues to consider in adding a new test for newborn screening, legislators, advocates and public health professionals worked together on House Bill 714 to move forward on this important issue in a thoughtful manner. The result was the legislation signed last week by the Governor which directs the State Advisory Council on Hereditary and Congenital Disorders to convene a panel of experts to review available information on pulse oximetry screening for critical congenital heart disease and provide a report to the State Legislature by December 2011. This is similar to what is going on at a national level. In a letter dated April 20, 2011, Secretary Sebelius asked for the Interagency Coordinating Committee on Newborn and Child Screening to review the information on this screening and recommend a plan of action in 90 days

(<http://www.hrsa.gov/heritabledisorderscommittee/correspondence/CCCHDsecResponse042011.pdf>). The legislation signed last week does state that Maryland will begin pulse oximetry screening for newborns if this test is adopted by the Secretary of Health and Human Services. To read the entire bill, see <http://mlis.state.md.us/2011rs/bills/hb/hb0714t.pdf>