

What to expect for your Baby's First Test

There are nearly 4 million babies born in the United States each year. While most babies are born healthy, some infants are born with a serious but treatable medical condition. These conditions can be present in any family, even those without a family history of them.

Newborn screening helps health professionals to identify and treat these conditions before they make a baby sick.



Newborn screening usually happens 24 hours after your baby is born, before you leave the hospital.



You do not need to request the screening. **It is standard at hospitals.**



The conditions newborns are screened for differ in each state. **Most states screen for 29 of the 35 conditions** recommended by the Secretary of Health and Human Services.

Each year, **12,000** babies with serious, but treatable conditions grow up healthy, thanks to newborn screening.

Talk to your healthcare provider about newborn screening.



To learn more, visit BabysFirstTest.org

This project was funded through cooperative agreement #U36MC16509 from the Maternal and Child Health Bureau (MCHB), Health Resources and Services Administration (HRSA).

The Three Steps

There are three parts to newborn screening:



Heel Stick

A small blood sample is taken from your baby's heel and placed on a newborn screening card. This card is mailed to a state laboratory for analysis. If an out-of-range result is detected, your baby's health provider will be notified immediately.



Hearing Test

One of two tests may be used to screen for hearing loss in your baby: an otoacoustic emissions or an auditory brainstem response. Both tests are simple, safe and can be done while your baby is asleep!



Pulse Oximetry

Pulse oximetry is a test that measures the amount of oxygen in your baby's blood and can detect some heart problems called Critical Congenital Heart Disease (CCHD).



To request additional copies of this resource, email info@BabysFirstTest.org.

© 2019 Baby's First Test