Newborn Screening Pre-Analytic Initiatives
Developing an Electronic Birth Notification
System to Improve NBS Processes
The Montana Experience

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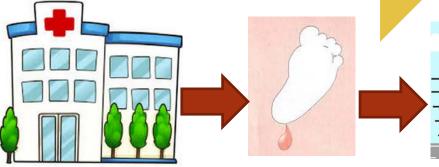
Montana Newborn Screening Program

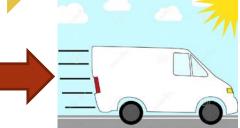
Montana has a birth rate of ~12,000

Only one screen is mandated

Courier System picks up at major birth hospitals M-F









Montana Public Health Laboratory



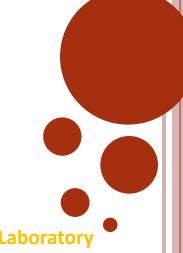




Montana Public Health Laboratory







MT Newborn Screening Program (cont'd)

Unique Hybrid Program

Specimens received at MTPHL, accessioned Monday - Saturday



Partnership with Wisconsin Newborn Screening Laboratory

MTPHL

Wisconsin NBS Laboratory



WI specimens shipped via Fed Ex (Mon – Sat)

MT – Data Entry/Testing

WI – Data Entry/Testing



Montana Newborn Screening Card

4-4369 6979314 W121	Public Health Laboratory P.O. Box 4369, Helena, MT 59604-4369 Do Not Write in This Space
IN SCREENING , Helena, MT 596044369 ; 27D0652531 LOT 8979314	Last Name
REE na, M 16525	Baby's Gender BIRTH DATE AND TIME
N SC Heler 27D0	Mother's Last Name
NEWBORN J. Box 4369, H CLIA ID # 27	Mother's First Name
Box	Baby's Physician SINGLE BIRTH BIRTH WEIGHT (grams)
0	Medicaid IF MULTIPLE A B
ratory 1-728	Physician NPI # HAS THE BABY RECEIVED A RBC TRANSFUSION? Y N NTPHL 0112 DATE OF TRANSFUSION
Health Laboratory, (800) 821-7284	Submitting Facility: MISCELLANEOUS INFORMATION
(80	FEEDING METHOD TPN Breast Formula, Soy Formula, Lactose
ic He	IS MOTHER OR INFANT ON STEROIDS?
Public 2017-03	OTHER CONSIDERATIONS INICU Adopted ————



MT Newborn Screening Program (cont'd)

Results Obtained

MT – Interface/ Manual results WI – Reports downloaded through secure portal



Submitters download results through a secure web portal (Copia)

HL7 messages transferred to Client Management System (Natus)



Submitters (Missoula Community Med Ctr pilot)

Wisconsin Newborn Screening Laboratory



MT NBS Quality Assurance Program

Provide Facility
Report Cards

- Turnaround Time
- Unsatisfactory Rates
- Missing Information

Track Noncompliant Events in iPassport

- Changes in Demographic Information
- Amended or Corrected Reports

Short Term Follow-up Metrics

- Time from Birth to NBS Report
- Time from Request to Receipt of Followup Specimen
- Time from Birth to Diagnosis



Current Tracking of Quality Indicators

Category	Measurable Metric			
Pre-Analytic	Time from birth to NBS specimen collection			
Process Metrics	Time from collection to receipt at the MTPHL			
	Percentage of unsatisfactory specimens,			
	separated out by reason			
	Number of NBS specimens with missing relevant			
	data			
	Number of NBS specimens with inaccurate			
	relevant data			
Post-Analytic	Number of corrected or amended NBS reports			
Process Metrics	Time from request for additional specimen to			
	receipt at MTPHL (more timely follow-up			
	practices)			





MT NBS Proof of Concept Project

Extension of the CMC ETORs Project

CMC accounts for ~15% of births in MT

Cerner is CMC's LIMS vendor

Demographic information is transmitted at birth (birth notification)

Data to be used for improving pre-analytic quality indicators





Baby is born

Order Entry Workflow Process

Live birth is registered

 Demographics sent (ADT HL7 message via sFTP)

NBS ordered at CMC

 Order sent (ORM HL7 message via sFTP)

Specimen is collected, received in CMC Lab

 Phlebotomists add additional information as a result (ask at order entry - AOE)

CMC transform results into HL7 order

 Change order entry process

HL7 messages received in MTPHL LIMS



MT NBS Proof of Concept Challenges

sFTP processes took time to work out (push/pull)

Not all newborn screening data is easily accessed from Electronic Health Record

Adopted?	On Steroids?
On Antibiotics?	Repeat Specimen?

CMC needed to modify processes

Ask At Order Entry (AOE) Questions

Risk of resulting other fields besides the AOE questions

Generates an ORM (HL7 result message)

Needed to convert this ORU into an order message (ORM)



MT NBS Proof of Concept Barriers

NICU data in HL7 message, no field in Copia

Was able to use a patient level "user defined field"

Demographic information not easily accessed in Copia prior to specimen collection

No reports – each record is reviewed individually

Multiple screens need to be reviewed to see all information

Copia not currently configured to accept time of birth

Needed to compute < 24 hour collections

Cerner configuration issues for results reporting



MT NBS Proof of Concept Successes

Messages can be received before specimens are collected (Birth Notification)

Will provide opportunities to give advice for improving pre-analytics

Ensuring NICU babies have a specimen collected prior to treatment

Recommend collection times to ensure timely courier pickup and delivery

Improved Communication and Collaboration

Success at CMC → Billings Clinic



MT NBS Proof of Concept Baseline Data

Measure Sept 2014 – Feb 2016	Total Baseline	CMC Baseline	CMC Electronic
Average time from birth to NBS specimen collection	2.81	2.51	
Average time from collection to receipt at the MTPHL	2.38	2.40	
Percentage of unsatisfactory specimens	1.84%	0.34%	
Number of NBS specimens with missing/inaccurate relevant data	34	3	
Number of corrected or amended NBS reports	3	0	



MT NBS Proof of Concept Findings

Electronic interfaces take longer than anticipated

It is possible to receive birth notification data to be used to improve pre-analytics

Even in pilot, able to compare electronic and paper requisitions – QA opportunities

Can already see improvements in data accuracy



MT NBS Proof of Concept Findings

Pilot is solving process questions in Copia and Cerner (other vendors will benefit)

Communications Developing long term relationships

Once Proof of Concept is successful, others will participate

See the value for the future

