

15A NCAC 21F .1201 - .1204 and 15A NCAC 21H .0314 permanent rules, effective 08/01/2000, as follows:

.1201 GENERAL

The hearing screening component of the Department of Health and Human Services' Newborn Screening Program is administered by the central office staff for Children's Special Health Services. The genetic screening component of the Department's Newborn Screening Program is found in 15A NCAC 21H .0314.

.1202 DEFINITIONS

As used in this Section:

- (1) "CSHS" means the Children's Special Health Services Program central office staff.
- (2) "Neonate" means any term infant less than one month of age or any preterm infant less than one month corrected age.
- (3) "Person" means any natural person, partnership, corporation, unit of government of this State, and any unincorporated organizations.

.1203 SCREENING REQUIREMENTS

- (a) The attending physician shall order that each neonate, born in North Carolina, be physiologically screened in each ear for the presence of permanent hearing loss. Medical facilities that provide birthing or inpatient neonatal services shall maintain the equipment necessary to perform physiologic hearing screenings for neonates prior to discharge home.
- (b) Parents or guardians may object to the hearing screening in accordance with G.S. 130A-125(b).
- (c) When the attending physician has issued a standing order that diagnostic brainstem auditory evoked response testing shall be performed for neonates who exhibit medically recognized risk indicators of auditory deficits, the order for the hearing screening may be superseded but the outcome of the diagnostic testing procedure shall be reported in accordance with 15A NCAC 21F .1204.

15A NCAC 21F .1204 has been amended under a temporary action as follows:

.1204 REPORTING REQUIREMENTS

- (a) The attending physician shall order that all persons performing physiologic hearing screenings for infants less than six months of age shall identify the child and report to the North Carolina State Laboratory for Public Health the outcome of each hearing screening for all infants. All hearing screening reports shall be submitted simultaneously with each infant's blood specimen for genetic screening, or within five days following the date of each infant's hearing screening. Any missed scheduled hearing screening shall be reported simultaneously with each infant's blood specimen, or within five days following the date of the missed appointment for such screening.
- (b) All persons performing neonatal physiologic hearing screenings shall report quarterly to CSHS, within 30 days after the end of each quarter in the calendar year, the following:
 - (1) Total number of neonates who were screened by each tester, with multiple screenings for the same

neonate being clarified.

(2) Total number of neonates whose parents or guardians objected to the hearing screening.

(3) Total number of live births, if the report is being submitted by a medical facility.

(c) All persons performing diagnostic auditory tests and those persons performing assessments for selection of amplification, for infants less than twelve months of age, shall identify the child and report the outcome of the diagnostic and amplification selection process to the North Carolina State Laboratory for Public Health, within five days following each evaluation date and the date of any missed scheduled appointment for such evaluations.

History Note: Authority G.S. 130A-125;

Temporary Amendment Eff. October 1, 1999;

Eff. August 1, 2000;

Temporary Amendment Eff. January 8, 2001.