

Newborn Screening Process Self-Assessment

The Texas Department of State Health Services Newborn Screening Laboratory created this Newborn Screening (NBS) Process Self-Assessment tool to help you evaluate your newborn screening practices. It covers blood spot collection, submission, and follow-up processes. Review each section carefully and check “Yes” or “No” to identify opportunities for improvement.

Established Newborn Screening Policies and Procedures	
Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you assigned a primary NBS coordinator and a backup to oversee the NBS process?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you have written procedures for NBS blood spot collection and submission to minimize unsatisfactory specimens?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do your procedures ensure that staff collect NBS specimens at least 4 to 5 hours before the scheduled pickup or mailing to allow adequate drying time and preparation for shipment?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you signed up for the no additional charge DSHS Laboratory courier service?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you review NBS procedures annually with all staff and during the onboarding of new or temporary personnel?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Have all relevant staff subscribed to receive DSHS NBS program notices?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Are NBS Collection Kits stored away from direct sunlight and stacked upright as shipped (usually on edge) to protect the filter paper?
Collection of Newborn Screening Blood Spots	
Before Collection:	
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you require parents or guardians to sign newborn screening refusals and do you place the signed refusal in the patient’s medical record?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you verify the infant’s payor source to ensure that you use the appropriate NBS Collection Kit (Medicaid/Unfunded/CHIP or Insurance/Self-Pay)?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you confirm that the NBS collection kit is not expired?
Yes <input type="checkbox"/> No <input type="checkbox"/>	For the first NBS, do you verify that the infant is 24 to 48 hours of age?
Yes <input type="checkbox"/> No <input type="checkbox"/>	For the second NBS, do you confirm the infant is 7 to 14 days of age, a minimum of 168 hours?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you explain the purpose of the NBS to the parent or guardian and give the Parent Information sheet (page 1) to the parent or guardian?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you provide the Storage and Use of Newborn Screening Blood Spots form (page 2) to parents or guardians and document distribution by checking the box on the demographic form?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you review the NBS demographic page with the parent or guardian for accuracy?
After collection:	
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you verify NBS blood spot quality before the infant leaves your facility?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you verify that the parent or guardian completes and signs the Storage and Use of Newborn Screening Blood Spot Card form?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you document the NBS Collection Kit serial number in the patient’s medical record or collection log?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you retain the yellow, submitter copy, demographic page in the patient's medical record?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you monitor NBS Collection Kit drying conditions and times?

Daily Oversight (preferably not by the collector):	
Yes <input type="checkbox"/> No <input type="checkbox"/>	Is a staff member assigned to log all NBS specimens into a daily NBS Collection Log?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Is demographic information reviewed for legibility and accuracy?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Are dried NBS specimens gathered from all collection areas at least one hour before the scheduled pickup or mailing?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Are completed Storage and Use of Newborn Screening Blood Spot Card forms included with shipped specimens?
Shipping Newborn Screening Collection Kits	
Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you assigned a staff member and a backup to oversee NBS specimen shipping and tracking?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you maintain a daily shipping log of NBS Collection Kits submitted?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Are NBS specimens shipped directly from your facility to the DSHS Laboratory?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Are all collected NBS specimens included in the next available shipment?
Yes <input type="checkbox"/> No <input type="checkbox"/>	For Friday shipments, are NBS specimens marked for Saturday delivery when using overnight courier services?
Texas NBS Web Application (Neometrics) Use	
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you use Neometrics to access NBS patient results?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you review your facility's monthly NBS report card and monitor specimen quality?
Follow-Up for Newborn Screening Results	
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you verify that you receive NBS results for all submitted specimens?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you have a written protocol for abnormal NBS result follow-up?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Is a staff member designated as the point of contact for abnormal NBS results?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Are staff aware of how to contact the NBS Clinical Care Coordination Team?
Specimens Unsuitable for Testing	
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you notify the parent or guardian and arrange for the recollection of NBS specimens reported as unsatisfactory?
Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you reference the DSHS NBS Specimen Quality Improvement webpage for guidance on avoiding common issues?

If you answered "Yes" to all items – great job! If not, please identify areas for improvement and develop an action plan to strengthen your newborn screening practices.

For Assistance

Contact DSHS Newborn Screening Laboratory:

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