

# Filling Out the Blood Spot Card essentials



## Remember

- Make all reasonable efforts to find missing or unavailable information for the blood spot card, but make sure you send the blood spot card to the Alberta Newborn Screening Lab even if some information is not available.

## For more information

visit [www.ahs.ca/newbornscreening](http://www.ahs.ca/newbornscreening)

### Staff Education

- Collecting
- Special Situations when Collecting

### Clinical Policy Suite

Newborn Blood Spot Screening Sample Collection Procedure

## Finding the information

Use the **infant's health record, notice of birth or community lab requisition** to find most of the information you need to fill out the blood spot card (requisition). If you need a different information source, it is mentioned beside the corresponding field in this essentials sheet.

### First steps

- double check the blood spot card is **not expired** **Expires** **YYYY-MM-DD**
- print clearly
- use **black ink**
- put the **specimen label** only on the **front** and the **demographic label** only on the **back** of the blood spot card
- pull the fold-over cover all the way back to expose both sides of the filter paper during collection and drying.

Field	What you need to know
	<ul style="list-style-type: none"> <li>the infant's Unique Lifetime Identifier (ULI)</li> <li>if there's no ULI, write "ULI PENDING" in the field</li> <li><b>do not</b> use a parent's Alberta Health Care number here</li> </ul>
	<ul style="list-style-type: none"> <li>the province where the infant was born and assigned a personal health number (PHN)</li> <li>we need the province of birth because the Alberta Newborn Screening Lab receives some infants' blood spots from other provinces and territories</li> </ul>
	<ul style="list-style-type: none"> <li>the infant's last [family] name</li> <li>with <b>multiple births</b>, clearly identify birth order i.e. Twin 1 or Twin 2</li> <li>with <b>adoption</b>, use either the birth identity or adoptive identity based on infant's identity at the time of collection, see the <i>Special Situations when Collecting essentials</i> </li> </ul>
	<ul style="list-style-type: none"> <li>include the chart number or LAB number or Medical Records Number (MRN) if available</li> </ul>
	<ul style="list-style-type: none"> <li>the infant's biological sex</li> </ul>



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## Field What you need to know

Multiple Birth Set  
 Yes  No If yes, which multiple 1 (e.g., 1, 2, 3)

- check “Yes” if the infant is part of a multiple birth set (e.g. twins)
- check “No” if the infant is not part of a multiple birth set
- if the infant is part of a multiple birth set, identify which multiple (1,2,3, etc.)
- this information is important because the genetics of one infant in the birth set can affect the screen results of others in the birth set

Birth: Date and Time (e.g., 01 Jan 25)  
 Date 06 SEP 23 Time 17 49 24 hr clock

- (dd/Mon/yy) and (hh:mm) using a 24-hour clock (for example, 06 SEP 23 and 1759)
- births occurring at midnight should be entered as 00:00
- **the exact time the infant was born** is extremely important to interpret the screen results accurately
- if this information is missing, inaccurate or illegible, the Alberta Newborn Screening Lab will need to correct the data and diagnosis and treatment may be delayed

Collection: Date and Time (Collect after 24 hrs of age)  
 Date 07 SEP 23 Time 18 30 24 hr clock

- (dd/Mon/yy) and (hh:mm) using a 24-hour clock (for example, 07 SEP 23 and 1830)
- blood spots collected at midnight should be entered as 00:00
- the exact age of the infant (in hours) **at the time the blood spots are collected** is extremely important to interpret the screen results accurately
- if this information is missing, inaccurate or illegible, the infant will need to have blood spots collected again to prevent an inaccurate analysis and potential harm to the infant
- observe and record the time immediately **after** you collect the blood spots

Preterm:  Yes  No  
 If yes, gestational age 36 weeks

- check “Yes” for infants born less than 37 weeks of gestation
- specify gestational age in weeks at the time of birth (not adjusted age)
- check “No” if the infant was not preterm
- this information supports the detection of severe combined immunodeficiency (SCID) and sickle cell disease (SCD) in preterm infants (less than 37 weeks)

Birth weight in grams  
2458

- the infant’s birth weight (in grams) for all blood spot collections
- birth weight is important to support the detection of congenital hypothyroidism (CH) and congenital adrenal hyperplasia (CAH) in low birth weight (LBW) infants (less than 2000 grams)
- if birth weight is left blank the Alberta Newborn Screening Lab assumes the infant was not LBW and notifications for their repeat collection will not be generated

Mother's Last Name Tran Mother's First Name Mary  
 Mother's Postal Code T9C 4V8 Birth Location Foothills  
Max Character Case Hours: All cases MUST be completed

- the parent’s last name, first name and postal code
- with **adoption**, use either the birth mother’s identity or adoptive mother’s identity based on information linked to infant’s identity at the time of collecting the blood spots, see the *Special Situations when Collecting essentials* \*
- the mother’s postal code is reconciled with the infant’s zone of residence on occasions when there are several mothers with the same name

Birth Location  
Foothills  
All cases MUST be completed. Birth date

- the name of the birth facility
- for home births, write “home birth” in this field

Feeding type within last 12 hours (check all that apply)  
 Breast  Milk base  Non-lactose  Parenteral nutrition  NPO

- check all feeding types within the last 12 hours regardless of the amount
- selecting all feeding types is important to support the detection of classic galactosemia (GALT), missing this information can lead to false-positive screen results and potential harm to the infant
- milk base contains lactose
- parenteral nutrition refers to either total or partial parenteral nutrition (TPN or PPN)
  - check this box for infants on any intravenous feeding
- NPO refers to “nothing by mouth”



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## Field What you need to know

Blood transfusion before collection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Date of last transfusion
Collector ID 0100491	Day Month Year

- check “YES” for infants who received blood transfusion before this collection
- write the date of last transfusion
- blood transfusion could cause false-negative results

Collector ID 0100491
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- **collector ID needs to be non-identifiable, it is shared with patients’ test results**
- use your Connect Care - EPIC user ID if you have one (found in your Session Information Report within EPIC)
- for non-EPIC users, use a numerical ID, for example your employee identification number or other identifier number
- this information is important to help improve quality and patient safety

Collection Location FMCNC
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- the unique code that identifies a location and service area
- this information is important to help improve quality and patient safety
- collection location codes are available through [www.ahs.ca/newbornscreening](http://www.ahs.ca/newbornscreening) by clicking on *Health Professional Information*, then *Collection Resources*
- if your site/practice does not have a collection location code email [newbornscreening@ahs.ca](mailto:newbornscreening@ahs.ca)

Zone of Collection 2
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- AHS zone where you collected the blood spots
- this information is important to help improve quality and patient safety
- Zone 1 – South      Zone 2 – Calgary      Zone 3 – Central
- Zone 4 – Edmonton      Zone 5 – North

Ordering Practitioner Name (Last, First) Cayocan, Frida	Provider ID 12345
Complete Mailing Address 101 Utopia Blvd, Calgary T9C1H7	Submitter ID 0345

- the ordering practitioner’s full name, provider ID, submitter ID and complete mailing address should always be filled out
- this can be a physician, nurse practitioner or registered midwife involved with the infant’s care
- this information is important because a copy of the screen results is sent to the ordering practitioner

Copy to Name (Last, First) Drabny, Mark	Provider ID 54321
Complete Mailing Address 456 Hills St, Calgary T9C5H1	Submitter ID 5432

- the full name, provider ID, submitter ID and address of a physician you want to copy results to
- fill out this field if another physician is involved with the infant’s care
- for example, a neonatologist or pediatrician
- this information is important because a copy of the screen results is sent to them

Provider ID 12345
Submitter ID 0345
Provider ID 54321
Submitter ID 5432

- the Connect Care provider ID is a unique identifying number
- the provider ID is important to make sure the correct practitioner gets the infant’s screen results
- the provider ID is available through [SER, DEP, and SUB Lookup: EMR Results Delivery - AHS Tableau Server \(albertahealthservices.ca\)](http://www.ahs.ca/newbornscreening)
- The Connect Care submitter ID identifies the unique location (clinic or site) from which an order is placed
- The submitter ID is important to make sure the infant’s screen results are delivered to the correct clinic or site the provider is associated with
- the submitter ID is available through [SER, DEP, and SUB Lookup: EMR Results Delivery - AHS Tableau Server \(albertahealthservices.ca\)](http://www.ahs.ca/newbornscreening)



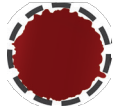
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## Field What you need to know

Fold-over cover

- the fold-over cover should always cover the filter paper area, until the time of collection
- it provides protection from contamination before blood collection and during transportation, before analysis
- pull the fold-over cover all the way back to expose both sides of the filter paper during collection and drying
- do not place over the blood spots until they have completely dried, for at least 3 hours

Start Here



- circles are filled with blood beginning with the “Start Here” circle before moving on to another circle
- always begin with the “Start Here” circle
- the perforated section containing the “Start Here” circle is removed for SCID and spinal muscular atrophy (SMA) testing and sent to the Molecular Genetics Laboratory, which is separate from the Alberta Newborn Screening Lab

Infant's ULI/ PHN		Province of PHN	
Infant's Last Name			
Chart # / LAB # / MRN		Biological Sex <input type="checkbox"/> M <input type="checkbox"/> F	
<input type="checkbox"/> Clinically Undetermined			
Multiple Births Set: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which multiple _____ (e.g., 1, 2, 3)			

- put the specimen label only on the front of the blood spot card in the dotted area on the top left

Space for label

- put the demographic label only on the back of the blood spot card in the “Space for label” rectangle

