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TO: Senate Health Care and Human Services Committee
FROM: Dr. H. Stacy Nicholson, MD, MPH, Chair of Pediatrics,
Oregon Health & Science University, Physician-in-Chief,
Doernbecher Children's Hospital
DATE: February 14, 2013
SUBJECT: Written Testimony in Support of SB 172

Dear Members of the Senate Health Care and Human Services Committee,

Oregon Health & Science University supports Senate Bill 172, which requires the Oregon Health Authority to adopt rules requiring all infants at birthing facilities to be screened for congenital heart disease.

Congenital heart disease is a common birth defect affecting hundreds of infants in Oregon each year. Some of these defects are critical and require intervention early in life. Unfortunately, an estimated 25% of affected newborns are diagnosed after discharge, which is associated with poorer outcomes such as stroke, multi-organ system failure and even death.

The American Academy of Pediatrics and US Health and Human Services recently recommended routine screening for congenital heart disease on all newborns. Pulse oximetry screening is an effective and non-invasive method to screen for these defects.

OHSU started universal pulse oximetry screening just over a year ago, which has been quite successful. We diagnosed one infant with a significant critical heart defect and were able to provide early surgical interventions. We also haven't had any false positives to date after screening thousands of newborns. The pulse oximetry test is a test that nurses are familiar with and perform in several other settings. Therefore, it was quite simple to start this program from a nursing perspective. Our nurses perform this test during other routine assessments in order to avoid additional nursing time.

Oregon is limited with pediatric cardiology services located primarily in the Portland Metropolitan area, which may make routine screening in rural areas more difficult. Because of this, a group of physicians at OHSU led by Dr. Heather Carpentier launched an educational outreach program to encourage pulse oximetry screening in Oregon, Idaho and Southwest Washington. As a result of this program, we now know that most hospitals in Oregon are already screening or planning to screen, and that universal screening is considered very beneficial amongst most newborn nursery directors.

Unfortunately, at least 20% of Oregon nurseries report not having access to echocardiography, the test required if an infant has a positive screen. Despite limited access to echocardiography, most of these nurseries are screening or planning to screen. OHSU's Doernbecher Children's Hospital helps bridge the gap in pediatric cardiology services in rural areas by offering clinics in 10 cities outside the Portland Metropolitan. Our cardiologists also receive and interpret echocardiograms from 11 hospitals outside the Portland area. OHSU has expanded its telemedicine options as well to provide specialty consultation in regions with limited access. We therefore anticipate successful universal pulse oximetry screening in our state and urge you to support state-wide screening for congenital heart disease. Thank you for your time and consideration of this important bill.