

Enrolled Senate Bill 172

Printed pursuant to Senate Interim Rule 213.28 by order of the President of the Senate in conformance with presession filing rules, indicating neither advocacy nor opposition on the part of the President (at the request of Senate Interim Committee on Health Care, Human Services and Rural Health Policy for American Heart Association)

CHAPTER

AN ACT

Relating to infant screening; and declaring an emergency.

Whereas congenital heart defects are structural abnormalities of the heart that are present at birth; and

Whereas congenital heart defects range in severity from simple problems, such as holes between chambers of the heart, to severe malformations, such as the complete absence of one or more chambers or valves of the heart; and

Whereas congenital heart defects can cause severe and life-threatening symptoms that require intervention within the first days of life; and

Whereas congenital heart defects cause more fatalities than any other birth defect; and

Whereas according to the United States Secretary of Health and Human Services' Advisory Committee on Heritable Disorders in Newborns and Children, congenital heart defects affect approximately seven to nine of every 1,000 live births in the United States and Europe; and

Whereas hospital costs for all individuals with congenital heart defects total approximately \$2.6 billion per year; and

Whereas current methods for detecting congenital heart defects generally include prenatal ultrasound screening; and

Whereas these screenings, alone, identify less than half of all cases of congenital heart defects; and

Whereas cases involving congenital heart defects are often missed during routine clinical exams performed prior to a newborn being discharged from a birthing facility; and

Whereas pulse oximetry is a noninvasive test that estimates the percentage of hemoglobin in blood that is saturated with oxygen; and

Whereas pulse oximetry, when performed on a newborn, is effective at detecting severe and life-threatening congenital heart defects that otherwise would go undetected; and

Whereas many lives would be saved by early detection and treatment of congenital heart defects; now, therefore,

Be It Enacted by the People of the State of Oregon:

SECTION 1. (1) As used in this section, "birthing facility" means a health care facility, as defined in ORS 442.015, that provides services related to the delivery of newborns.

(2) The Oregon Health Authority shall adopt rules requiring birthing facilities located in this state to perform a pulse oximetry screening on each newborn delivered at the birthing facility before discharging the newborn.

SECTION 2. The Oregon Health Authority shall adopt rules described in section 1 of this 2013 Act no later than January 1, 2014.

SECTION 3. This 2013 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2013 Act takes effect on its passage.

Passed by Senate February 26, 2013

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Robert Taylor, Secretary of Senate

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Peter Courtney, President of Senate

Passed by House May 30, 2013

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Tina Kotek, Speaker of House

Received by Governor:

.....M.,....., 2013

Approved:

.....M.,....., 2013

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John Kitzhaber, Governor

Filed in Office of Secretary of State:

.....M.,....., 2013

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Kate Brown, Secretary of State