

EXAMPLE HOSPITAL

November 20, 2023

Fax: 9999999999

RE: _____, **BABY BOY**
 NSO Episode #: NXXXXXXXX-XXXX
 Guardian's Name: _____
 Submitter Unique #: _____

Health Card #: _____
 Sex: _____
 DOB: _____
 DOC: 2023-11-05 07:00

A request for a repeat newborn screening sample was made in writing and/or by telephone for the above infant. Unfortunately, according to our records, no repeat sample has been received.

Please complete and return this form to Newborn Screening Ontario by fax to (613) 738-0853 as soon as possible, indicating which of the following applies:

A REPEAT newborn screening sample was collected and shipped to NSO:

Date of Collection: _____ Purolator Tracking #: _____
 Infant's Name (if different from above): _____

A negative report has been received for this infant, please indicate NSO Episode #: _____

OR

The family was contacted and advised that the initial newborn screen was unsatisfactory, their infant may still be at risk for all the diseases on the panel, and a repeat newborn screen is recommended.

Parent(s) indicated that they will be bringing the infant back to the hospital / midwifery practice for a sample

Parent(s) declined newborn screening

OR

The family was not contacted regarding the unsatisfactory result and need for a repeat newborn screen.

The infant's health care provider was informed of the need for a repeat newborn screen
 Name: _____ Phone: _____ Fax: _____

Health care provider not available / not informed

FORM COMPLETED BY: _____

(Please print - Name and Job Title)

Phone #: _____ Ext: _____ Date: _____





Confidential Fax

To: EXAMPLE HOSPITAL **From:** Newborn Screening Ontario

Fax: 19999999999 **Pages:** 2 (including cover page)

Re: Request for repeat newborn screen **Date:** November 20, 2023

URGENT PLEASE COMMENT FOR REVIEW PLEASE REPLY

Hello,

Please see the attached letter(s) requesting repeat samples for newborn screening.

It would be much appreciated if you could respond by faxing the completed letter(s) back to us at **613-738-0853** as soon as possible.

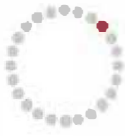
Thank you,

Newborn Screening Ontario

This message is intended for use of the individual or entity to which it is addressed and may contain information that is privileged, confidential and exempt from disclosure under The Municipal Freedom of Information and Privacy Act, 1989. If the reader of this message is not the intended recipient, you are hereby notified that dissemination, distribution or copying of the communication is strictly prohibited. If you have received this communication in error, please notify us at the telephone number below. Thank you.

IF COPIES ARE UNCLEAR OR PAGES MISSING, CONTACT THE OFFICE AT (613) 738-3222.





November 28, 2023

CRESCENT
CITY, ON

RE: [REDACTED], BABY BOY
DOB: [REDACTED]

Reference #: NXXXXXXXX-XXXX
Health Card #: [REDACTED]

A blood sample was taken from your baby shortly after birth for the newborn screening test. Unfortunately, this sample was not satisfactory for testing and a repeat test is needed. We notified EXAMPLE HOSPITAL that a repeat sample from your baby was needed but we have not yet received one.

We are sending you this letter to make sure you know that your baby's newborn screen is not complete and a new sample is needed, in case EXAMPLE HOSPITAL has not been able to reach you.

What is newborn screening?

Using a heel prick test, a small amount of blood is collected from all babies shortly after birth. This blood is sent to Newborn Screening Ontario where it is tested for rare treatable diseases. With these diseases, early diagnosis is the key to effective treatment. Early detection of these diseases through newborn screening prevents serious health problems and can save lives.

Newborn screening is not mandatory. It is considered the standard of care for every baby and is highly recommended. Newborn screening is the only way to find babies with these diseases early enough to prevent serious, long-term health problems. Additional information can be found in the enclosed pamphlet and at www.newbornscreening.on.ca.

Why does my baby need a repeat newborn screening test?

Your baby may need a repeat test if:

- Your baby's first sample was taken before 24 hours of age
- Not enough blood was taken
- The sample was of poor quality

It is important that the repeat sample is taken as soon as possible so that your baby gets the full benefit of newborn screening. Needing a repeat sample does not mean there is anything wrong with your baby.

Who should I contact to have a repeat sample taken?

Please contact the post-partum / mother-baby floor at the hospital where your baby was born or your midwife, who is responsible for arranging the repeat test. The repeat sample needs to be taken on a special filter paper that is NOT available at most community blood laboratories. For this reason, most babies born in hospital will have to go back to the hospital where they were born for their repeat test.

If you or your baby's health care provider (doctor / nurse practitioner / midwife) has questions about this letter you can contact Newborn Screening Ontario at 1-877-627-8330.

cc: EXAMPLE HOSPITAL

Fax: 1999999999

Fax:





Confidential Fax

To: EXAMPLE HOSPITAL **From:** Newborn Screening Ontario

Fax: 19999999999 **Pages:** 2 (including cover page)

Re: Newborn Screening Report **Date:** November 28, 2023

URGENT PLEASE COMMENT x FOR REVIEW PLEASE REPLY

Hello,

Please see the attached letter on which you have been cc'ed.

Thank you,

Newborn Screening Ontario

This message is intended for use of the individual or entity to which it is addressed and may contain information that is privileged, confidential and exempt from disclosure under The Municipal Freedom of Information and Privacy Act, 1989. If the reader of this message is not the intended recipient, you are hereby notified that dissemination, distribution or copying of the communication is strictly prohibited. If you have received this communication in error, please notify us at the telephone number below. Thank you.

IF COPIES ARE UNCLEAR OR PAGES MISSING, CONTACT THE OFFICE AT (613) 738-3222.

