



**NewSTEPS**

A Program of the Association of Public Health Laboratories™

# **Template Map for the Case Import File**

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## INSTRUCTIONS

This template map provides variable names and acceptable values for the [case import file](#). This import file is one of the two options for newborn screening programs to enter individual cases into the NewSTEPS Repository. The other option is to use the [online webform](#).

The [case import file](#) contains the common demographic and screening variables that are asked for all conditions. It also contains final diagnosis for certain conditions. General instructions to use the import file include:

- Required fields are indicated below; these variables must have an acceptable value entered in order for the import to work
- For fields that are not required, the variable or column is also not required
  - For non-required variables/columns included in the CSV file, enter an acceptable value or leave empty
- Variables/columns may be in any order
- Each row is unique to the case/baby; please be sure to select the correct condition, this includes secondary conditions

Download the [case import file](#), enter the data that is being reported, and save the document as a CSV file to your desktop. To import the file into the repository, select **Choose File** on the right-hand side of the screen. The File Explorer for your desktop will appear and the desired file can be selected. Next, select **Submit CSV** to import the file. If data isn't formatted correctly, the import will not be accepted.

Common errors in import files include:

- Abbreviation of the state or territory name; please spell out
- Conditions not spelled correctly or use the correct format; it is suggested that you copy and paste directly from this template map and only abbreviate conditions found on page 6
- NULL versus true zero: only enter zero when the value is a true zero, otherwise leave the cell empty

## INFANT DEMOGRAPHIC INFORMATION

**state** - name of the state/territorial newborn screening program, REQUIRED\*

Acceptable values:

- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Commonwealth of the Northern Mariana Islands
- Delaware
- District of Columbia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi
- Missouri
- Montana
- Nebraska
- Nevada
- New Hampshire
- New Jersey
- New Mexico
- New York
- North Carolina
- North Dakota
- Ohio
- Oklahoma
- Oregon
- Pennsylvania
- Puerto Rico
- Rhode Island
- South Carolina
- South Dakota
- Tennessee
- Texas
- US Virgin Islands
- Utah
- Vermont
- Virginia
- Washington
- West Virginia
- Wisconsin
- Wyoming

**birthYear** - The year in which the birth occurred, REQUIRED\*

**stateUniqueld** - The unique identifier assigned to the case by the state, REQUIRED\*

**condition** - Name of condition, REQUIRED\*

Acceptable values:

- 2,4 Dienoyl-CoA reductase deficiency - DE RED
- 2-Methyl-3-hydroxybutyric aciduria - 2M3HBA
- 2-Methylbutyrylglycinuria - 2MBG
- 3-Hydroxy-3-methylglutaric aciduria - HMG
- 3-Methylcrotonyl-CoA carboxylase deficiency - 3-MCC
- 3-Methylglutaconic aciduria - 3MGA
- Argininemia - ARG
- Argininosuccinic aciduria - ASA
- Beta-Ketothiolase deficiency - BKT
- Biopterin defect in cofactor biosynthesis - BIOPT (BS)
- Biopterin defect in cofactor regeneration - BIOPT (RG)
- Biotinidase deficiency - BIOT
- Carbamoyl phosphate synthetase I deficiency - CPS
- Carnitine acylcarnitine translocase deficiency - CACT
- Carnitine palmitoyltransferase type I deficiency - CPT IA
- Carnitine palmitoyltransferase type II deficiency - CPT II

- Carnitine uptake defect/carnitine transport defect - CUD
- Citrullinemia, type I - CIT
- Citrullinemia, type II - CIT II
- Classic galactosemia - GALT
- Classic PKU & Hyperphe
- Congenital Toxoplasmosis - TOXO
- Congenital adrenal hyperplasia - CAH
- Congenital hypothyroidism - CH
- Critical congenital heart disease - CCHD
- Cystic fibrosis - CF
- Cytomegalovirus - CMV
- Ethylmalonic encephalopathy - EME
- Fabry
- Formiminoglutamic acidemia - FIGLU
- Galactoepimerase deficiency - GALE
- Galactokinase deficiency - GALK
- Gaucher
- Glucose-6-phosphate dehydrogenase deficiency - G6PDD/G6PD
- Glutaric acidemia type I - GA1
- Glutaric acidemia type II - GA2
- Guanidinoacetate Methyltransferase - GAMT
- Hb - No structural variant
- Hearing loss - HEAR
- Holocarboxylase synthetase deficiency - MCD
- Homocystinuria - HCY
- Human Immunodeficiency Virus - HIV Exposure
- Hypermethioninemia - MET
- Hyperornithinemia with Gyrate Deficiency - Hyper ORN
- Hyperornithinemia-hyperammonemia-homocitrullinemia syndrome - HHH
- Isobutyrylglycinuria - IBG
- Isovaleric acidemia - IVA
- Krabbe Disease
- Long-chain L-3 hydroxyacyl-CoA dehydrogenase deficiency - LCHAD
- Malonic acidemia - MAL
- Maple syrup urine disease - MSUD
- Medium-chain acyl-CoA dehydrogenase deficiency - MCAD
- Medium-chain ketoacyl-CoA thiolase deficiency - MCKAT
- Medium/short-chain L-3-hydroxyacyl-CoA dehydrogenase deficiency - M/SCHAD
- Methylmalonic acidemia (cobalamin disorders) - Cbl A,B
- Methylmalonic acidemia (methylmalonyl-CoA mutase) - MUT
- Methylmalonic acidemia with homocystinuria - Cbl C,D
- Mucopolysaccharidosis I - MPS I
- Mucopolysaccharidosis II - MPS II
- Niemann Pick
- Nonketotic Hyperglycinemia - NKH

- Ornithine transcarbamylase deficiency - OTC
- Pompe
- Presence of Hb S
- Presence of Other Hb Variant
- Prolinemia Type I/ Type II - PRO
- Propionic acidemia - PROP
- Pyroglutamic acidemia - 5-OXO
- Severe Combined Immunodeficiencies - SCID
- Short-chain acyl-CoA dehydrogenase deficiency - SCAD
- Spinal Muscular Atrophy - SMA
- T-cell related lymphocyte deficiencies
- Trifunctional protein deficiency - TFP
- Tyrosinemia, type I - TYR I
- Tyrosinemia, type II - TYR II
- Tyrosinemia, type III - TYR III
- Very long-chain acyl-CoA dehydrogenase deficiency - VLCAD
- X-linked Adrenoleukodystrophy
- Zellweger Syndrome

*Note: The following condition abbreviations can be used instead of using the entire **condition** name:*

- |           |          |
|-----------|----------|
| • 3-MCC   | • HEAR   |
| • ASA     | • HMG    |
| • BIOT    | • IVA    |
| • BKT     | • LCHAD  |
| • CAH     | • MCAD   |
| • Cbl A,B | • MCD    |
| • CCHD    | • MPS I  |
| • CF      | • MPS II |
| • CH      | • MSUD   |
| • CIT     | • MUT    |
| • CUD     | • Pompe  |
| • GA1     | • PROP   |
| • GALT    | • TFP    |
| • GAMT    | • TYR I  |
| • HCY     | • VLCAD  |

**gestationalAge** - the gestational age in weeks (please use whole numbers only)

**birthWeight** - the birth weight in grams

**biologicalGender** - the biological gender of the infant

Acceptable values: FEMALE, MALE, UNSPECIFIED, UNKNOWN

**ethnicity** - The ethnicity of the infant

Acceptable values:

- HISPANIC\_LATINO\_OR\_SPANISH
- NOT\_HISPANIC\_LATINO\_OR\_SPANISH
- NOT\_REPORTED
- UNKNOWN

*Note: only one value should be specified*

**race** - the race of the infant

Acceptable race values:

- ISLANDER
- ASIAN
- NATIVE\_AMERICAN
- BLACK\_OR\_AFRICAN\_AMERICAN
- WHITE
- UNKNOWN
- NOT\_REPORTED

*Note: If more than one value applies, separate each value with a colon (e.g., ISLANDER:WHITE)*

*Note: ISLANDER = Native Hawaiian or other Pacific Islander*

## SCREENING INFORMATION

**screeningIdentifyingRisk** - The screening result which indicated this infant was at risk for the disorder. Acceptable values:

- Initial Screen
- Second Required Screen
- Subsequent Screen

**prenatalTestForRisk** - Was prenatal testing done that indicated that this infant was at risk for this disorder? Acceptable values: TRUE, FALSE, UNKNOWN

**familyHistoryRisk** - Was there a family history that indicated that this infant was at risk for this disorder? Acceptable values: TRUE, FALSE, UNKNOWN

**diagnosedAfterNewbornScreening** - Was this individual identified outside of newborn screening? Acceptable values: TRUE, FALSE, UNKNOWN

**missedDiagnosisReason** - The reason this diagnosis was not identified by newborn screening. *Note: should only be answered if diagnosedAfterNewbornScreening is TRUE*

Acceptable values:

- Parental Refusal
- Lost to follow-up after unsatisfactory specimen
- Biologic false negative / result within normal range
- Did not have a valid screen due to error
- Other

**otherMissedDiagnosisReason** - Text description of the missed diagnosis reason up to 254 characters long. *Note: should only be answered if missedDiagnosisReason is OTHER*

## INITIAL SPECIMEN COLLECTION INFORMATION

**birthToInitialSpecimenCollection** - hours between birth and initial specimen collection. Integer value. *Not specified for conditions "Critical congenital heart disease - CCHD", "Hearing loss - HEAR"*

**birthToInitialSpecimenCollectionIncludesTime** - Acceptable values: TRUE, FALSE *Note: TRUE signifies that the data available for the calculation of elapsed time included time as well as date*

**birthToInitialReceiptByLab** - Time elapsed from birth until the initial NBS specimen was received by the lab, in days (as measured by 24-hour periods since the birth). Integer value. *Not specified for conditions "Critical congenital heart disease - CCHD", "Hearing loss - HEAR"*

**birthToInitialReceiptByLabIncludesTime** - Acceptable value: TRUE, FALSE *Note: TRUE signifies that the data available for the calculation of elapsed time included time as well as date*

**birthToInitialResultRelease** - Time elapsed from birth until the release of out-of-range results as a result of the initial screen, in days (as measured by 24-hour periods since the birth). *Not specified for conditions "Critical congenital heart disease - CCHD", "Hearing loss - HEAR"*

**birthToInitialResultReleaseIncludesTime** - Acceptable value: TRUE, FALSE. *Note: TRUE signifies that the data available for the calculation of elapsed time included time as well as date*

## SUBSEQUENT SPECIMEN COLLECTION INFORMATION

**birthToSubsequentSpecimenCollection** - Time elapsed from birth until the subsequent NBS specimen was collected, in days (as measured by 24-hour periods since the birth). *Not specified for conditions "Critical congenital heart disease - CCHD", "Hearing loss - HEAR"*

**birthToSubsequentSpecimenCollectionIncludesTime** - Acceptable value: TRUE, FALSE *Note: TRUE signifies that the data available for the calculation of elapsed time included time as well as date*



**birthToSubsequentReceiptByLab** - Time elapsed from birth until the subsequent NBS specimen was received by the lab, in days (as measured by 24-hour periods since the birth). *Not specified for conditions "Critical congenital heart disease - CCHD", "Hearing loss - HEAR"*

**birthToSubsequentReceiptByLabIncludesTime** - Acceptable value: TRUE, FALSE *Note: TRUE signifies that the data available for the calculation of elapsed time included time as well as date*

**birthToSubsequentResultRelease** - Time elapsed from birth until the release of out-of-range results as a result of the subsequent screen, in days (as measured by 24 hour periods since the birth). *Not specified for conditions "Critical congenital heart disease - CCHD", "Hearing loss - HEAR"*

**birthToSubsequentResultReleaseIncludesTime** - Acceptable value: TRUE, FALSE. *Note: TRUE signifies that the data available for the calculation of elapsed time included time as well as date*

## POINT-OF-CARE TEST INFORMATION

**birthToPointOfCareTestInterval** - Time elapsed from birth in hours until the point of care screening test was performed. *Only specified for conditions "Critical congenital heart disease - CCHD", "Hearing loss - HEAR"*

**birthToPointOfCareTestIntervalIncludesTime** - Acceptable value: TRUE, FALSE *Note: true signifies that the data available for the calculation of elapsed time included time as well as date. Only specified for conditions "Critical congenital heart disease - CCHD", "Hearing loss - HEAR"*

## INTERVENTION, FOLLOW-UP, AND DIAGNOSIS

**birthToIntervention** - Time elapsed from birth until intervention by an appropriate medical provider occurred, in days (as measured by 24-hour periods since the birth)

**birthToDiagnosisConfirmation** - Time elapsed from birth until confirmation of the diagnosis occurred, in days (as measured by 24-hour periods since the birth)

**treatmentInOtherState** - Is infant receiving treatment/care out-of-state?  
Acceptable values: TRUE, FALSE, UNKNOWN

**treatmentState** - state where infant receives treatment/care? *Note: should only be answered if treatmentInOtherState is TRUE*  
Acceptable values: see list provided for **state**

**diagnosisReversed** - Is this diagnosis reversed? *Note: this does not refer to the therapeutic interventions to address a condition (i.e., surgery, treatment, therapy, etc)*  
Acceptable values: TRUE, FALSE, UNKNOWN

**diagnosisReversedYear** - year diagnosis reversed (*note: enter four-digit year*)  
*Note: should only be answered if diagnosisReversed is TRUE*

## FINAL DIAGNOSIS

**finalDiagnosis** - final diagnosis as determined by the medical provider performing the clinical diagnostic workup, REQUIRED\*

*Note: not all conditions require a final diagnosis; please use the table to see what conditions need a final diagnosis and the associated acceptable values. The final diagnosis categories do NOT include any of the secondary or other conditions listed on the RUSP. These should be entered as a separate case (see **conditions**).*

Condition	Acceptable Values
3-Methylcrotonyl-CoA carboxylase deficiency - 3-MCC	<ul style="list-style-type: none"> <li>• 3-Methylcrotonyl-CoA Carboxylase Deficiency - 3-MCC</li> <li>• Maternal MCC deficiency</li> <li>• MT-ATP6 related mitochondrial disorders</li> <li>• Unknown</li> </ul>
Argininosuccinic aciduria - ASA	<ul style="list-style-type: none"> <li>• Argininosuccinic Acidemia/ Aciduria (ASA)</li> <li>• Pyruvate carboxylase deficiency</li> <li>• Unknown</li> </ul>
Biotinidase deficiency - BIOT	<ul style="list-style-type: none"> <li>• Profound Biotinidase deficiency</li> <li>• Partial Biotinidase deficiency</li> <li>• Unknown</li> </ul>
Citrullinemia, type I - CIT	<ul style="list-style-type: none"> <li>• Citrullinemia, Type I</li> <li>• Pyruvate carboxylase deficiency</li> <li>• Unknown</li> </ul>
Carnitine uptake defect/carnitine transport defect - CUD	<ul style="list-style-type: none"> <li>• Carnitine Uptake Deficiency (CUD)</li> <li>• Maternal Carnitine Deficiency (primary and secondary)</li> <li>• Unknown</li> </ul>
Classic PKU & Hyperphe	<ul style="list-style-type: none"> <li>• Classic phenylketonuria - PKU</li> <li>• Benign hyperphenylalaninemia - H-PHE</li> <li>• HyperPhe diet controlled</li> <li>• Dihydropterine reductase deficiency (DHPR)</li> <li>• DNAJC12</li> <li>• Parenteral nutrition</li> <li>• Maternal PKU</li> <li>• Unknown</li> </ul>
Classic galactosemia - GALT	<ul style="list-style-type: none"> <li>• Classic Galactosemia</li> <li>• Duarte variant galactosemia</li> <li>• Unknown</li> </ul>
Congenital hypothyroidism - CH	<ul style="list-style-type: none"> <li>• Primary Congenital Hypothyroidism</li> <li>• Secondary Congenital Hypothyroidism</li> <li>• TBG Deficiency (Thyroxine Binding Globulin) or other protein binding defect</li> <li>• Transient Congenital Hypothyroidism</li> <li>• Unknown</li> </ul>

Condition	Acceptable Values
Congenital adrenal hyperplasia - CAH	<ul style="list-style-type: none"> <li>• Classic 21-Hydroxylase Deficiency- Salt Wasting</li> <li>• Classic 21-Hydroxylase Deficiency- Simple Virilizing</li> <li>• Other Adrenal disorder</li> <li>• Unknown</li> </ul>
Critical congenital heart disease - CCHD	<ul style="list-style-type: none"> <li>• CCHD</li> <li>• Non critical CCHD</li> <li>• Other</li> <li>• Unknown</li> </ul>
Cystic fibrosis - CF	<ul style="list-style-type: none"> <li>• CFTR-Related Metabolic Syndrome (CRMS)</li> <li>• CFTR-Related Disease</li> <li>• Typical Cystic Fibrosis (CF)</li> <li>• Unknown</li> </ul>
Holocarboxylase synthetase deficiency - MCD	<ul style="list-style-type: none"> <li>• Holocarboxylase synthetase deficiency (MCD)</li> <li>• Maternal 3-methylcrotonyl-CoA carboxylase deficiency</li> <li>• MT-ATP6 related mitochondrial disorders</li> <li>• Other biotin disorder</li> <li>• Unknown</li> </ul>
Homocystinuria - HCY	<ul style="list-style-type: none"> <li>• Classic Homocystinuria</li> <li>• Methionine Adenosyltransferase (MAT I/III Deficiency)</li> <li>• Glycine n-methyltransferase (GNMT)</li> <li>• Adenosylhomocysteine Hydrolase Deficiency</li> <li>• Unknown</li> </ul>
Isovaleric acidemia - IVA	<ul style="list-style-type: none"> <li>• Isovaleric Acidemia/ Aciduria (IVA)</li> <li>• Short/branched chain acyl-CoA dehydrogenase Deficiency (SBCAD) or 2-methylbutyryl CoA dehydrogenase deficiency</li> <li>• Unknown</li> </ul>
Maple syrup urine disease - MSUD	<ul style="list-style-type: none"> <li>• Maple Syrup Urine Disease, Type IA</li> <li>• Maple Syrup Urine Disease, Type IB</li> <li>• Maple Syrup Urine Disease, Type II</li> <li>• Maple Syrup Urine Disease, Type III</li> <li>• Hydroxyprolinemia</li> <li>• Unknown</li> </ul>
Methylmalonic acidemia (methylmalonyl-CoA mutase) - MUT	<ul style="list-style-type: none"> <li>• Mutase (-) (mut-)</li> <li>• Mutase (0) (mut0)</li> <li>• Maternal vitamin B12 deficiency</li> <li>• Succinate-CoA ligase deficiency</li> <li>• Unknown</li> </ul>
Methylmalonic acidemia (cobalamin disorders) - Cbl A,B	<ul style="list-style-type: none"> <li>• Cobalamin A deficiency (Cbl A)</li> <li>• Cobalamin B deficiency (Cbl B)</li> <li>• Cobalamin Dv2 deficiency (Cbl Dv2)</li> <li>• Maternal vitamin B12 deficiency</li> <li>• Succinate-CoA ligase deficiency</li> </ul>

Condition	Acceptable Values
	<ul style="list-style-type: none"> <li>Unknown</li> </ul>
Methylmalonic acidemia with homocystinuria - Cbl C,D	<ul style="list-style-type: none"> <li>Cobalamin C deficiency (Cbl C)</li> <li>Cobalamin D deficiency (Cbl D)</li> <li>Cobalamin F deficiency (Cbl F)</li> <li>Cobalamin Dv1 deficiency (Cbl Dv1)</li> <li>Cobalamin J deficiency (Cbl J)</li> <li>Maternal vitamin B12 deficiency</li> <li>Succinate-CoA ligase deficiency</li> <li>Other cobalamin deficiency</li> <li>Unknown</li> </ul>
Mucopolysaccharidosis I - MPS I	<ul style="list-style-type: none"> <li>MPS I - severe</li> <li>MPS I - severity not determined</li> <li>MPS I - attenuated</li> <li>Unknown</li> </ul>
Pompe	<ul style="list-style-type: none"> <li>Infantile Onset (IO) Pompe Disease</li> <li>Late Onset (LO) Pompe Disease</li> <li>Unknown</li> </ul>
Presence of Hb S	<ul style="list-style-type: none"> <li>S,S disease (Sickle cell anemia) - Hb SS</li> <li>S, Beta 0-thalassemia - Hb S/B0Th</li> <li>S, Beta + thalassemia - Hb S/B+ Th</li> <li>S,C disease - Hb S/C</li> <li>S, Other</li> <li>Unknown</li> </ul>
Presence of Other Hb Variant	<ul style="list-style-type: none"> <li>Hemoglobin C disease</li> <li>Hemoglobin D disease</li> <li>Hemoglobin E disease</li> <li>Hemoglobin O-Arab disease</li> <li>Other hemoglobin disorder</li> <li>Unknown</li> </ul>
Hb - No structural variant	<ul style="list-style-type: none"> <li>Alpha thalassemia major (Fetal Hydrops)</li> <li>Beta thalassemia major (Cooley's anemia)</li> <li>Hgb H disease</li> <li>Unknown</li> </ul>
Propionic acidemia - PROP	<ul style="list-style-type: none"> <li>Propionic Acidemia (PROP)</li> <li>Maternal vitamin B12 deficiency</li> <li>Succinate-CoA ligase deficiency</li> <li>Unknown</li> </ul>
Severe Combined Immunodeficiencies - SCID	<ul style="list-style-type: none"> <li>Classic SCID</li> <li>Leaky SCID</li> <li>Omenn Syndrome</li> <li>Unknown</li> </ul>
Tyrosinemia, type I - TYR I	<ul style="list-style-type: none"> <li>Tyrosinemia, Type I (hepatorenal)</li> <li>Transient Tyrosinemia of the neonate (TTN)</li> <li>Unknown</li> </ul>
X-linked Adrenoleukodystrophy	<ul style="list-style-type: none"> <li>X-Linked Adrenoleukodystrophy (in Males)</li> <li>X-Linked Adrenoleukodystrophy (in Females)</li> </ul>

Condition	Acceptable Values
	<ul style="list-style-type: none"> <li>• Contiguous ABCD1 DXS1357E deletion syndrome (CADD5)</li> <li>• Peroxisomal Disorder</li> <li>• Acyl-CoA Oxidase Deficiency</li> <li>• D-Bifunctional Protein Deficiency</li> <li>• Dyamin-like protein 1 (DLP1)</li> <li>• ABDC5</li> <li>• Non-peroxisomal Disorder</li> <li>• Unknown</li> </ul>

**otherFinalDiagnosisName** - Specify the name for the other final diagnosis when the value "OTHER" is entered for *finalDiagnosis*

***If condition is Presence of Other Hb Variant***

**alphaThalassemiaPresent**- Alpha thalassemia present?

Acceptable values: TRUE, FALSE, UNKNOWN

*Note: must only be entered when condition is "Presence of Other Hb Variant"*

***If condition is Critical congenital heart disease - CCHD and finalDiagnosis is CCHD***

**cchdFinalDiagnosesDetails**- Specify type of CCHD diagnosed.

Acceptable values:

- TRUNCUS\_ARTERIOSUS
- TOTAL\_ANOMALOUS\_PULMONARY\_VENOUS\_CONNECTION
- TETRALOGY\_OF\_FALLOT
- PULMONARY\_ATRESIA
- EBSTEIN\_ANOMALY
- HYPOPLASTIC\_LEFT\_HEART\_SYNDROME
- SINGLE\_VENTRICLE
- TRICUSPID\_ATRESIA
- TRANSPOSITION\_OF\_GREAT\_ARTERIES
- DOUBLE\_OUTLET\_RIGHT\_VENTRICLE
- COARCTATION\_OF\_AORTA
- INTERRUPTED\_AORTIC\_ARCH
- AORTIC\_VALVE\_DISEASE

*Note: must only be entered when CCHD FinalDiagnosis is CCHD; can add multiple selections by using a colon to separate each acceptable value (e.g., TRUNCUS\_ARTERIOSUS:PULMONARY ATRESIA:SINGLE\_VENTRICLE)*

***If condition is Spinal Muscular Atrophy - SMA***

**newbornSMN2MolecularTest** - newborn screen molecular test for SMN2?

Acceptable values: TRUE, FALSE, UNKNOWN

*Note: only enter if condition is "Spinal Muscular Atrophy - SMA"*

**newbornSMN2MolecularTestValue** - SMN2 copy number?

Acceptable values: ONE, TWO, TWO\_OR\_MORE, UNKNOWN

*Note: only enter if condition is "Spinal Muscular Atrophy - SMA" and newbornSMN2MolecularTest is TRUE*

**postNewbornSMN2MolecularTest** - post-newborn screen molecular test for SMN2?

Acceptable values: TRUE, FALSE, UNKNOWN

*Note: only enter if condition is "Spinal Muscular Atrophy - SMA"*

**postNewbornSMN2MolecularTestValue** - SMN2 copy number?

Acceptable values: ONE, TWO, TWO\_OR\_MORE, UNKNOWN

*Note: only enter if condition is "Spinal Muscular Atrophy - SMA" and newbornSMN2MolecularTest is TRUE*

## CHANGE LOG

### Modifications made from August 2023 version

- Removed all diagnostic variables
  - Note: Collecting diagnostic information was well intended to standardize the identification and classification of disorders, aligning with the [public health surveillance case definitions](#) for newborns in the United States. However, it was decided that the cons (i.e., staff time, poor feedback loop with clinicians, inability to obtain all diagnostic information to feed into the classification system) outweigh the benefits of collecting this information. **NewSTEPS will continue to collect demographic and newborn screening information for individual cases**, which will continue to help inform our birth prevalence, health equity, and quality improvement practices.

### Modifications made from January 2024 version

- Updated spelling from Holocarboxylase synthase deficiency - MCD to Holocarboxylase synthetase deficiency - MCD

### Modifications made from March 2024 version

- Updated language for diagnosedAfterNewbornScreening to clarify that the diagnosis was made outside of newborn screening. *Note: this was just a change to the variable label and does not impact queries.*

### Modifications from May 2024 version

- Final diagnosis category is now a required field

- Unknown was added to the final diagnosis for all conditions that have a final diagnosis option

### Modifications from June 2024 version

- In the case template map, separated NOT\_REPORTED and UNKNOWN for ethnicity. This was a typo only in the case template map as these two categories were accidentally on the same line.
- Updated spelling from Cobalamin Dv2 (CbIDv2) to Cobalamin Dv2 deficiency (CbIDv2).
- Updated spacing in the following final diagnosis options
  - Classic 21-Hydroxylase Deficiency- Salt Wasting
  - Classic 21-Hydroxylase Deficiency- Simple Virilizing
  - Cobalamin A deficiency (Cbl A)
  - Cobalamin B deficiency (Cbl B)
  - Cobalamin C deficiency (Cbl C)
  - Cobalamin Dv2 deficiency (Cbl Dv2)
  - Cobalamin D deficiency (Cbl D)
  - Cobalamin F deficiency (Cbl F)
  - Cobalamin Dv1 deficiency (Cbl Dv1)
  - Cobalamin J deficiency (Cbl J)
  - S,C disease- Hb S/C
  - S,S disease (Sickle cell anemia) - Hb SS
- Updated formatting
  - Argininosuccinic aciduria - ASA
  - Beta-Ketothiolase deficiency - BKT
  - Biotinidase deficiency - BIOT
  - Carbamoyl phosphate synthetase I deficiency - CPS
  - Carnitine acylcarnitine translocase deficiency - CACT
  - Carnitine uptake defect/carnitine transport defect - CUD
  - Citrullinemia, type I - CIT
  - Citrullinemia, type II - CITII
  - Classic galactosemia - GALT
  - Congenital Toxoplasmosis - TOXO
  - Congenital adrenal hyperplasia - CAH
  - Congenital hypothyroidism - CH
  - Critical congenital heart disease - CCHD
  - Cystic fibrosis - CF
  - Cytomegalovirus - CMV
  - Ethylmalonic encephalopathy - EME
  - Formiminoglutamic acidemia - FIGLU
  - Galactoepimerase deficiency - GALE
  - Galactokinase deficiency - GALK
  - Guanidinoacetate Methyltransferase - GAMT
  - Hb - No structural variant
  - Hearing loss - HEAR
  - Holocarboxylase synthetase deficiency - MCD
  - Homocystinuria - HCY
  - Hypermethioninemia – MET
  - Spinal Muscular Atrophy – SMA

### Modifications from September 2024 version

- Added clarification that gestational age should be in whole numbers
- Updated spelling for SMA molecular variables from UKNOWN to UNKNOWN

**Modification from December 2024**

- Updated language from was this individual identified not identified by newborn screening to was this individual identified outside of newborn screen.