

NEWBORN SCREENING PROGRAM
New York State Department of Health
Wadsworth Center, Biggs Laboratory, P.O. Box 509
Albany, NY 12201-0509
Phone: (518)473-7552 Fax: (518) 474-0405
E-mail: nbsinfo@health.ny.gov

Dear Parent:

The Newborn Screening Program has test results to send to your baby's doctor and we would like to verify that we have the correct doctor on file. **Please call** (518) 473-7552 with the name, address and telephone number of the doctor currently caring for your baby, e-mail nbsinfo@health.state.ny.us or fill out the form below and mail it to:

Newborn Screening Program
Wadsworth Center
P.O. Box 509
Albany, NY 12201-0509

Sincerely



Michele Caggana, Sc.D., FACMG
Director, Newborn Screening Program

Accession Number: _____

Child's Name: _____

Mother's Name: _____

Date of Birth: _____

Gender: Male Female

Hospital of Birth: _____

Phone Number where **you** can be reached: _____

Doctor's Name: _____

Doctor's Street Address: _____

City: _____ State: _____ Zip: _____

Doctor's phone number: _____