

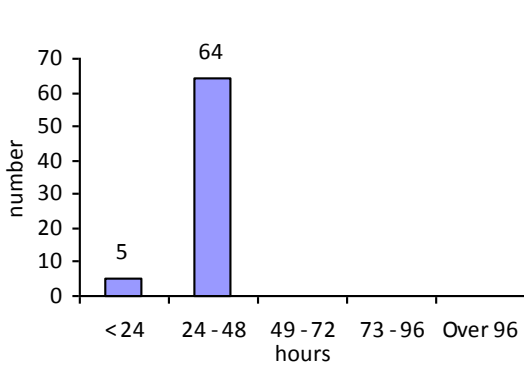


Montana Public Health Laboratory Quality Assurance Report (Quarter 4, 2016)

**Number of Specimens Received**

	Q1	Q2	Q3	Q4
Number of Total Screening Specimens:	90	51	77	81
Number of Initial Screening Specimens:	83	50	72	69
Number of Unsatisfactory Screening Specimens:	0	0	2	7
Number of Specimens with Missing or Incorrect Information:	3	0	2	1

**Age (in hours) at Initial Specimen Collection**

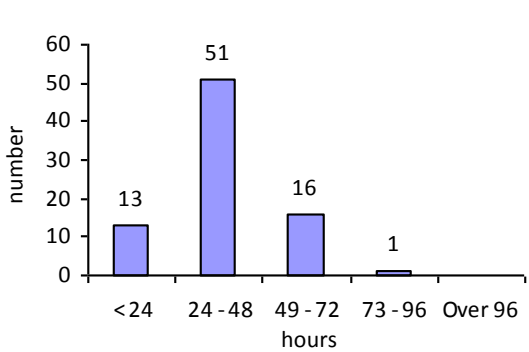


Period at a Glance:

Q1	Q2	Q3	Q4
94.0%	98.0%	95.8%	92.8%

**% Initial specimens collected within recommended 24 to 48 hours of age.**

**Hours Between Specimen Collection and Receipt**

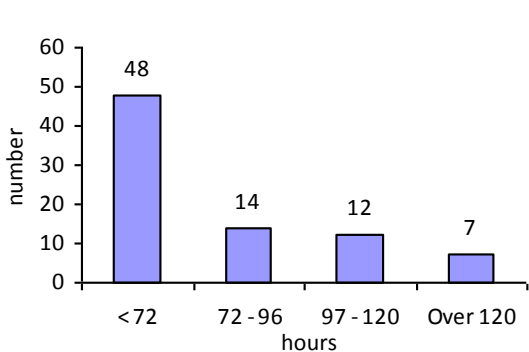


Period at a Glance:

Q1	Q2	Q3	Q4
70.0%	80.4%	66.2%	79.0%

**% All Specimens received within 48 hours after collection.**

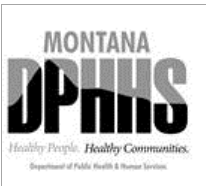
**Hours Between Specimen Receipt and Approved Result**



Period at a Glance:

Q1	Q2	Q3	Q4
62.2%	62.7%	58.4%	59.3%

**% All Specimens resulted within 72 hours after receipt.**



### Montana Public Health Laboratory Quality Assurance Report (Quarter4, 2016)

This facility report card is being sent to each Montana birthing facility as an aid to help track and improve newborn screening turnaround times. Each step in the process to produce a newborn screening result is being tracked, as well as unsatisfactory specimens and missing or incorrect information which both cause substantial delays.

#### **UNSATISFACTORY SPECIMENS**

The goal of our program is to reduce unsatisfactory specimens to a theoretical goal of zero. There are many reasons that a specimen can be classified as an unsatisfactory specimen, the most common being insufficient specimen to completely fill the circle on both sides of the filter paper, overlaying sample where several drops are applied on top each other with partial drying in between each application, and abrasion by capillary tubes or bending of the spots during transport.

Please phone our facility for educational materials to aid your staff in collecting adequate specimens. An adequate specimen is one in which the concentration of blood in all parts of the circle is consistent.

If in doubt of the adequacy of a specimen please collect a second sample immediately, to avoid delays in obtaining a newborn screening report for that infant.

We will designate a specimen unsatisfactory if there is a delay of more than 7 DAYS between collection and receipt at the Public Health Laboratory.

#### **AGE AT INITIAL SPECIMEN COLLECTION**

According to the revised Montana Administrative Rule 37.57.305 effective July 1, 2014 initial specimens should be collected between 24 and 48 hours of age unless the infant is hospitalized for neonatal intensive care and there are medical contraindications.

#### **HOURS BETWEEN SPECIMEN COLLECTION AND RECEIPT AT MONTANA PUBLIC HEALTH LABORATORY**

It is crucial that newborn screening blood spots are sent as possible and are not batched. If you are having problems with delivery times we would welcome the opportunity to consult with you to try and determine the most time effective transport method for your location. DPHHS supplies a courier to larger facilities. UPS prepaid next day shipping labels are also available. Please contact us.

#### **MISSING INFORMATION**

In order to facilitate follow up of out of range results we need the newborn card completed in full and with correct information. There are several providers within the State and even in the same town with identical last names. Please list the provider's first name or initial to prevent confusion. If possible please provide the correct NPI number also.

Each time there is missing information we have to phone the facility to obtain it. Often we are transferred to several numbers before we can obtain an answer. This involves time for our clinical scientists and your staff that could be put to much better use. Please review the cards before sending to check for missing or incorrect information.

#### **HOURS BETWEEN RECEIPT AT MONTANA PHL AND RESULT FOR OUT OF RANGE RESULTS**

Our goal is to provide all screening results within as short a time as possible. All out of range results are faxed to providers, and those that require actions to be taken are phoned.