

1 HR318

2 139948-1

3 By Representatives Lee, Baker, Ball, Bandy, Barton, Baughn,
4 Beckman, Beech, Black, Boman, Boothe, Boyd, Bracy, Bridges,
5 Brown, Burdine, Buskey, Buttram, Carns, Chesteen, Clouse,
6 Coleman, Collins, Colston, Davis, DeMarco, Drake, England,
7 Farley, Faust, Fincher, Ford, Forte, Galliher, Gaston, Givan,
8 Greer, Greeson, Grimsley, Hall, Hammon, Harper, Henry, Hill,
9 Holmes, Howard, Hubbard (J), Hubbard (M), Hurst, Ison,
10 Jackson, Johnson (K), Johnson (R), Johnson (W), Jones,
11 Kennedy, Knight, Laird, Lindsey, Long, Love, Mask, McAdory,
12 McCampbell, McClammy, McClendon, McClurkin, McCutcheon,
13 McMillan, Melton, Merrill, Millican, Mitchell, Moore (B),
14 Moore (M), Morrow, Newton (C), Newton (D), Nordgren, Oden,
15 Patterson, Payne, Poole, Rich, Roberts, Robinson (J), Robinson
16 (O), Rogers, Sanderford, Scott, Sessions, Shiver, Thomas,
17 Todd, Treadaway, Tuggle, Vance, Wallace, Warren, Weaver,
18 Williams (D), Williams (J), Williams (P), Wood and Wren

19 RFD:

20 First Read: 03-APR-12

8 COMMENDING THE DEPARTMENT OF PUBLIC HEALTH FOR ITS
9 EFFORTS IN IMPLEMENTING A POLICY REQUIRING PULSE OXIMETRY
10 TESTING OF NEWBORNS.

11
12 WHEREAS, Congenital Heart Defects (CHDs) are
13 structural abnormalities of the heart that are present at
14 birth; and

15 WHEREAS, CHDs range in severity from simple problems
16 such as holes between chambers of the heart to severe
17 malformations such as the complete absence of one or more
18 chambers or valves; and

19 WHEREAS, some critical CHDs can cause severe and
20 life-threatening symptoms which require intervention within
21 the first days of life; and

22 WHEREAS, according to the United States Secretary of
23 Health and Human Services' Advisory Committee on Heritable
24 Disorders in Newborns and Children, congenital heart disease
25 affects approximately seven to nine of every 1,000 live births
26 in the United States and Europe and the federal Centers for

Disease Control and Prevention states that CHD is the leading cause of infant death due to birth defects; and

WHEREAS, pulse oximetry is a noninvasive test that estimates the percentage of hemoglobin in blood that is saturated with oxygen and when performed on a newborn within 24 hours after birth, pulse oximetry screening is often more effective at detecting critical, life-threatening CHDs which otherwise go undetected by current screening methods; and

WHEREAS, many newborn lives could potentially be saved by earlier detection and treatment of CHDs if birthing facilities in the state were required to perform this simple, noninvasive newborn screening in conjunction with current CHD screening methods; now therefore,

BE IT RESOLVED BY THE HOUSE OF REPRESENTATIVES OF
THE ALABAMA LEGISLATURE, That the Alabama Department of Public
Health be commended for the efforts the department is making
to implement a policy requiring that the pulse oximetry
testing be completed on all newborns prior to discharge.

BE IT FURTHER RESOLVED, That the Alabama Hospital Association, the Medical Association of Alabama, the Alabama Chapter of the American Academy of Pediatrics and the American Heart Association also be commended for their collaborative effort working in conjunction with the Alabama Department of Public Health to achieve this very important change in policy in the health care of newborns in Alabama.

RESOLVED FURTHER, That the Alabama Department of Public Health, the Alabama Hospital Association, the Medical

1 Association of Alabama, the Alabama Chapter of the American
2 Academy of Pediatrics, and the American Heart Association be
3 presented with a copy of this resolution.