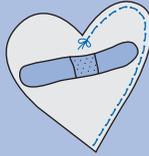


## HEART DISEASE SIGNS & SYMPTOMS

If your child has two or more of the following symptoms, talk to your pediatrician about a referral to a pediatric cardiologist.



### INFANTS (up to age 1)

Parents should be alert to the following symptoms in infancy:

- Tires easily during feeding (falls asleep before feeding finishes)
- Sweating around the head, especially during feeding
- Fast breathing when resting or sleeping
- Pale or bluish skin color
- Poor weight gain
- Sleeps a lot, not playful or curious for any length of time
- Puffy face, hands or feet
- Often irritable, difficult to console

### CHILDREN (ages 1-17)

Some children with CHD may not have any symptoms until later in childhood. Things to look for include:

- Gets out of breath during play (crouches or squats to catch breath)
- Difficulty 'keeping up' with playmates
- Tires easily, sleeps a lot
- Change in color during active play or sports (looks pale or has a bluish tint around mouth and nose)
- Frequent colds and respiratory illnesses
- Slow growth and weight gain, poor appetite
- Complains of chest pain or heart pounding

Source: *The Congenital Heart Information Network*  
[tchin.org](http://tchin.org)

*MultiCare Family Birth Centers partner with Mary Bridge Children's Hospital & Health Center to provide expert pediatric care and surgery a child may need.*

**MultiCare**   
**Mary Bridge Children's Hospital & Health Center**  
BetterConnected

Newborn screening for Critical Congenital Heart Disease (CCHD) is recommended by the U.S. Department of Health & Human Services and endorsed by the American Academy of Pediatrics.

*This publication sponsored in part by the  
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### PEDIATRIC CARDIAC PROVIDERS

#### NorthWest Children's Heart Care

*An affiliate of Pediatrix Cardiology*  
314 Martin Luther King, Jr. Way, Suite 303  
Tacoma, WA 98405  
253.396.4868  
[nwchc.com](http://nwchc.com)



NORTHWEST  
**Children's  
Heart Care**  
  
PEDIATRIX  
CARDIOLOGY

#### Pediatric Cardiac Surgery

Mary Bridge Children's Health Center  
311 South L Street  
Tacoma, WA 98405  
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[multicare.org/MBheart](http://multicare.org/MBheart)

### FOR MORE INFORMATION OR TO SHARE YOUR STORY, PLEASE CONTACT:

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Allenmore Hospital  
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# Newborn Screening for Heart Defects

Information for Parents



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GOOD SAMARITAN HOSPITAL ~ TACOMA GENERAL HOSPITAL

# Newborn Screening for Heart Disease

## THE FACTS

Congenital Heart Disease or Defects (CHD) are abnormalities of the heart or vessels that are present at birth. CHD may affect how the heart or vessels have developed or how well they work.

- Heart defects are the most common birth defect, occurring in 1 of every 100 births.
- About 40,000 babies with CHD are born in the US each year; 10,000 of these babies will have a critical CHD.
- Heart defects are a leading cause of newborn and infant death.
- Some babies with CHD can appear healthy at first and can be sent home before their heart defect is detected. Babies with critical CHD are at risk of having serious complications in the first few days or weeks of life, if their condition is not diagnosed soon after birth.
- Pulse oximetry (or 'pulse ox') screening can identify some newborns with CHD before they show signs of the condition. Once identified, babies with CHD can be seen by pediatric cardiologists and receive treatment that can prevent death or disability early in life.

## NEWBORN SCREENING

**Pulse oximetry screening to identify heart disease in newborns is offered at MultiCare Family Birth Centers.**



Pulse oximetry uses a light source and sensor to estimate the percentage of oxygen saturation in the blood.

A plastic finger clip sensor is used on adults and children; for babies, a soft sensor is gently wrapped around the hand and/or foot.



Light passing through the skin and tissues is read by the sensor to estimate the blood oxygen level.

The test is quick and painless.

Pulse ox screening should detect most serious heart problems.

**Please inform your nurse or provider, if you would like to have your baby screened.**

## FAQS

### **Will the test take long or hurt my baby?**

No, pulse oximetry (SpO<sub>2</sub>) screening should only take a few minutes and it will not hurt your baby.

### **Why do you check the blood oxygen level?**

Hypoxemia (a low blood oxygen saturation level) can be a sign of a heart or lung problem.

### **Will screening find all types of heart defects?**

No, but screening should detect most serious heart problems.

### **What does it mean if my baby has a 'negative' screening test?**

If the screening test is 'negative' [pass], it means that your baby did not have low blood oxygen levels. This means that s/he is less likely to have a serious heart problem. If undetected, some CHDs can cause serious or even life-threatening problems. Parents are advised to review the signs and symptoms of heart defects. If you notice these signs, please contact your baby's doctor.

### **What are the benefits of screening?**

Pulse ox screening and clinical evaluation should help to identify CHD and other health conditions associated with low blood oxygen levels, such as infections or breathing problems. If low blood oxygen levels are found, further evaluation will be necessary. Early identification and treatment result in the best chances for a healthy life.

### **What are the risks of screening?**

Families may experience stress or anxiety while waiting for and receiving the results of the screening test.

### **What will happen if my baby has a 'positive' screening test?**

If the screening test is 'positive' [fail], the test may be repeated. If blood oxygen levels are lower than expected, your baby's provider will be notified. This does not *always*

mean that the baby has a heart problem; it just means that further investigation is needed to find out why the oxygen level is low. In some cases, the doctor may decide to observe the baby a little longer in the hospital. A thorough physical exam will be done to determine the cause of hypoxemia and an echocardiogram (ultrasound of the heart) will be ordered. A pediatric cardiologist will determine if your baby has a heart defect.

### **If my baby has a heart defect, what can be done?**

If a heart defect is found, you will meet with a pediatric cardiologist to talk about the findings and treatment options. Most CHDs can be corrected or improved with medications, procedures and/or surgery.

### **Will I be billed for these tests?**

There is no additional charge for pulse oximetry screening. If low blood oxygen levels are found, further examination will be needed. If any other procedures or services are required (such as lab tests, echo, imaging studies), they will be billed to your child's insurance. Most babies will pass pulse ox screening and will not need more tests.

## Did you know...

- You can reduce the risk of having a baby with congenital heart disease (CHD). To help prevent CHD, maintain a healthy weight, control diagnosed diabetes, take folic acid daily, and quit smoking.
- Women with heart defects should check with their cardiologist before becoming pregnant. Women with CHD, or a family history of heart defects, may need careful monitoring by an obstetrician who specializes in high-risk pregnancies, as well as their cardiologist, throughout pregnancy.
- Adults with CHD require lifelong medical care from trained heart specialists; follow-up visits are recommended from every six months to every five years, depending on the type of heart defect.