**Section 661.500 Critical Congenital Heart Disease (CCHD)**

a) All newborns, including those in the neonatal intensive care unit, special care baby unit, *and birth centers*, shall receive pulse oximetry screening for critical congenital heart disease after 24 hours of age or before medical care facility discharge unless exempted from screening in accordance with subsection (b). [410 ILCS 240/1.10 2b]

b) Newborns are exempt from pulse oximetry screening for CCHD if:

1) A religious exemption is filed by a parent or legal guardian;

2) A prenatal diagnosis of a cardiac defect has been determined; or

3) An echocardiogram has already been performed.

c) If a failed screening is identified, the newborn shall be evaluated by a medical provider. If no cause for the hypoxia is found, the newborn shall receive an echocardiogram before medical care facility discharge. If an echocardiogram cannot be performed at the medical care facility where the failed screen is identified, the newborn shall be transferred to the nearest facility with echocardiogram capabilities if deemed medically necessary.

d) Medical care facilities shall report results of screening and follow-up evaluations to the Department within seven calendar days using the data system specified by the Department.

e) Medical management by a licensed pediatric cardiologist and referral to a Level III Neonatal Intensive Care Unit with the ability to perform cardiac surgery is highly recommended.