WEST VIRGINIA CODE: §16-44-1

§16-44-1. Legislative findings.

The Legislature finds and declares that:

(1) Congenital heart defects are structural abnormalities of the heart that are present at birth; congenital heart defects range in severity from simple problems such as holes between chambers of the heart, to severe malformations, such as the complete absence of one or more chambers or valves; some critical congenital heart defects can cause severe and life-threatening symptoms which require intervention within the first days of life;

(2) According to the United States Secretary of Health and Human Services' Advisory Committee on Heritable Disorders in Newborns and Children, congenital heart disease affects approximately seven to nine of every thousand live births in the United States and Europe; the federal Centers for Disease Control and Prevention states that congenital heart defects are the leading cause of infant death due to birth defects;

(3) Current methods for detecting congenital heart defects generally include prenatal ultrasound screening and repeated clinical examinations; while prenatal ultrasound screenings can detect some major congenital heart defects, these screenings, alone, identify less than half of all congenital heart defect cases, and critical congenital heart defect cases are often missed during routine clinical exams performed prior to a newborn's discharge from a birthing facility;

(4) Pulse oximetry is a noninvasive test that estimates the percentage of hemoglobin in blood that is saturated with oxygen; when performed on a newborn when the baby is twenty-four to forty-eight hours of age, or as late as possible if the baby is to be discharged from the hospital before he or she is twenty-four hours of age, pulse oximetry screening is often more effective at detecting critical, life-threatening congenital heart defects which otherwise go undetected by current screening methods; newborns with abnormal pulse oximetry results require immediate confirmatory testing and intervention; and

(5) Many newborn lives could potentially be saved by earlier detection and treatment of congenital heart defects if birthing facilities in the state were required to perform this simple, noninvasive newborn screening in conjunction with current congenital heart defect screening methods.