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SECRETARY OF STATE

WEST VIRGINIA LEGISLATURE

FIRST REGULAR SESSION, 1991



ENROLLED

Com. Sub. for
HOUSE BILL No. 2616

(By ~~Mr.~~ *Debs. Spencer and Kessel*)



Passed *March 9,* 1991

In Effect *90 Days From* Passage

ENROLLED
COMMITTEE SUBSTITUTE
FOR
H. B. 2616
(By DELEGATES SPENCER AND KESSEL)

[Passed March 9, 1991; in effect ninety days from passage.]

AN ACT to amend and reenact section twelve-a, article five, chapter sixteen of the code of West Virginia, one thousand nine hundred thirty-one, as amended, relating to registration of newborn infants and minors with a hearing impairment or with risk of developing a hearing impairment; requiring that such information be recorded and reported to the commission on the hearing impaired on forms provided by the commission.

Be it enacted by the Legislature of West Virginia:

That section twelve-a, article five, chapter sixteen of the code of West Virginia, one thousand nine hundred thirty-one, as amended, be amended and reenacted to read as follows:

ARTICLE 5. VITAL STATISTICS.

§16-5-12a. Registration of infants born with specified birth defects; requiring physician or midwife to check for defects, registration of minors with previously undiagnosed birth defects; form for reporting birth defects to be provided by and filed with registrar of vital statistics; confidentiality; exceptions; parental consent to subsequent reporting to various agencies; form for hearing impair-

**ment to be provided by and filed with
commission on hearing impaired; defini-
tions; registration of infants born with
hearing impairments or risk of hearing
impairment; registration of minors with
previously undiagnosed hearing impair-
ments.**

1 (a) When a live birth occurs, the physician or midwife
2 in attendance at, or present immediately after, the birth
3 shall examine the infant for any of the following birth
4 defects:

5 (1) Anencephaly;

6 (2) Spina bifida;

7 (3) Hydrocephaly;

8 (4) Cleft palate;

9 (5) Total cleft lip;

10 (6) Esophageal atresia and atenosis;

11 (7) Rectal and anal atresia;

12 (8) Hypospadias;

13 (9) Reduction and deformity — upper limb;

14 (10) Reduction and deformity — lower limb;

15 (11) Congenital dislocation of the hip;

16 (12) Down's syndrome;

17 (13) Visual impairments; and

18 (14) Others as may be requested by the director of
19 health.

20 (b) If any such impairment is found in an infant,
21 and/or if such impairment is found in any subsequent
22 examination of any minor which has not been previously
23 diagnosed, the examining physician, midwife or other
24 health care provider licensed under chapter thirty of the
25 code shall within thirty days of the examination make
26 a report of the diagnosis to the state registrar of vital
27 statistics on forms provided by the state registrar of

28 vital statistics. The report shall include the name of the
29 child, the name or names of the parents or parent or
30 guardian and a description of the impairment.

31 (c) The information received by the state registrar
32 pursuant to this section pertaining to the identity of the
33 persons named shall be kept confidential: *Provided,*
34 That if consent of the parents, or if only one of the
35 parents exists, of the parent, or of the guardian is
36 obtained, the registrar may provide such information to
37 the division of health, the division of human resources,
38 the department of education, the division of vocational
39 rehabilitation, and the school for the deaf and the blind
40 so that such information can be utilized to provide
41 assistance or services for the benefit of the child.

42 (d) The commission on the hearing impaired as
43 provided for in section one, article fourteen, chapter five
44 of this code shall develop and provide a form, to every
45 physician or midwife attending a birth or providing
46 medical care to a newborn infant, which assists the
47 physician or midwife in collecting information from the
48 infant's family about the infant's potential for a hearing
49 impairment. The form shall identify an infant with a
50 hearing impairment or at risk of developing a hearing
51 impairment. For purposes of this section, an infant with
52 a hearing impairment is a child at birth with a
53 significant hearing loss which prevents the acquisition
54 of speech and language through normal channels. An
55 infant at risk of being hearing impaired is a child at
56 birth who is at a higher risk than normal of being
57 hearing impaired due to one or more of the following
58 factors present at birth:

- 59 (1) Family history of a congenital hearing loss;
- 60 (2) Rubella or virus during pregnancy;
- 61 (3) Congenital ear, nose or throat anomalies;
- 62 (4) Below normal birth weight;
- 63 (5) Abnormal level of jaundice;
- 64 (6) Anoxia or apnea; and
- 65 (7) A low APGAR score derived from the evaluation

66 of the infant's color, muscle tone, reflexes, pulse rate and
67 respiration.

68 (e) If any such hearing impairment or risk of hearing
69 impairment is found in an infant, and/or if such
70 impairment or risk of hearing impairment is found in
71 any subsequent examination of any minor which has not
72 been previously diagnosed, the examining physician,
73 midwife shall within thirty days of the examination
74 make a report of the diagnosis to the commission on the
75 hearing impaired on the forms provided by the commis-
76 sion on the hearing impaired. The report shall include
77 the name of the child, the name or names of the parents
78 or parent or guardian and a description of the hearing
79 impairment or of the risk of hearing impairment.

The Joint Committee on Enrolled Bills hereby certifies that the foregoing bill is correctly enrolled.

Somer Heck

Chairman Senate Committee

Ernest C. Moore

Chairman House Committee

Originating in the House.

Takes effect ninety days from passage.

Harrell E. Adams

Clerk of the Senate

Donald L. Hopp

Clerk of the House of Delegates

Keith Brantette

President of the Senate

Robert Cole

Speaker of the House of Delegates

The within is approved _____ this the *27th*
day of *Main* _____ 1991.

Yaston Caperton

Governor

PRESENTED TO THE

GOVERNOR

Date 3/20/91

Time 4:55 pm