

MEDITECH Expanse TIP SHEET

CCHD Screening UPDATE

Updates to CCHD Screening Guidelines

The American Academy of Pediatrics (AAP) has endorsed a new Critical Congenital Heart Disease (CCHD) screening algorithm. There are two important changes:

- The lower limit of an acceptable oxygen saturation should be $\geq 95\%$ in both the pre- AND post-ductal measurements.
- In current state, a pulse ox $\geq 95\%$ in the right upper extremity OR a lower extremity and a $\leq 3\%$ difference would result in PASSING. Now that will require a retest.

There will be only **one retest** for indeterminate results instead of two.

Neonatal/Pediatric Discharge Readiness	
Discharge Hearing Screen	
Hearing screen date	
Hearing screen time	
Hearing screen type discharge	<input type="radio"/> Automated auditory brain <input type="radio"/> Not done <input type="radio"/> Otoacoustic emissions
Hearing screen discharge	<input type="checkbox"/> Defer med reason - Left <input type="checkbox"/> Hearing screen right-Pass <input type="checkbox"/> Hearing screen left-Refer <input type="checkbox"/> Hearing screen right-Refus
	<input type="checkbox"/> Defer med reason - Right <input type="checkbox"/> Hrng scrn prev left-Pass <input type="checkbox"/> Hearing screen right-Refer <input type="checkbox"/> Hearing screen left-Refus
	<input type="checkbox"/> Hearing screen left-Pass <input type="checkbox"/> Hrng scrn prev right-Pass <input type="checkbox"/> Hearing screen left-Refus
Discharge Metabolic Screening	
Metabolic screen complete date	
Metabolic screen complete time	
Metabolic screen serial number	
Congenital Heart Disease Screening	
CCHD SPO2% right upper extremity initial screen	95
CCHD SPO2% second extremity initial screen	99
CCHD SPO2% second extremity location initial screen	<input type="radio"/> Lower extremity left <input type="radio"/> Lower extremity right
CCHD screening results initial screen	Repeat screening in one hour
CCHD SPO2% right upper extremity repeat 1	95
CCHD SPO2% second extremity repeat 1	98
CCHD SPO2% second extremity location repeat 1	<input checked="" type="radio"/> Lower extremity left <input type="radio"/> Lower extremity right
CCHD screening results repeat 1	Passed screen

The screenshot shows the 'Neonatology DC Summary' screen for a patient named 'Mon, Baby 1'. Under the 'Routine Newborn Screenings' section, the 'CCHD screening results initial screen' are displayed. The 'Repeat screening in one hour' section shows the following results:

- CCHD SPO2% right upper extremity initial screen: 95
- CCHD SPO2% second extremity initial screen: 100
- CCHD SPO2% second extremity location initial screen: Lower extremity left (selected), Lower extremity right
- CCHD SPO2% right upper extremity repeat 1: 98
- CCHD SPO2% second extremity repeat 1: 100
- CCHD SPO2% second extremity location repeat 1: Lower extremity left (selected), Lower extremity right

The final result is 'Passed screen'.

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TAR Pre-Issue Checklist



Item	Yes	No	Order verified/med necessity
Physician order verified/patient consent signed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Armband(s) on patient verified	<input type="radio"/>	<input type="radio"/>	
Previous history of transfusion reactions reviewed	<input type="radio"/>	<input type="radio"/>	Not applicable
Metabolic screening collected	<input checked="" type="radio"/>	<input type="radio"/>	Unknown
Metabolic screening collection date			
Pre-meds verified and available	<input type="radio"/>	<input type="radio"/>	Not applicable
Pre-transfusion vital signs reviewed	<input type="radio"/>	<input type="radio"/>	
IV patency and gauge appropriate	<input type="radio"/>	<input type="radio"/>	
Blood transfusion equipment available	<input type="radio"/>	<input type="radio"/>	Not applicable

Added queries "Metabolic screening collected" and "Metabolic screening collection date" to the TAR Pre-Issue Checklist.

These queries will not display on the checklist for patients who are 30 days old or older.

Item	Yes	No	Order verified/med necessity
Physician order verified/patient consent signed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Armband(s) on patient verified	<input type="radio"/>	<input type="radio"/>	
Previous history of transfusion reactions reviewed	<input type="radio"/>	<input type="radio"/>	Not applicable
Metabolic screening collected	<input checked="" type="radio"/>	<input type="radio"/>	Unknown
Metabolic screening collection date			Last metabolic screening 06/11/25 at 10:39
Pre-meds verified and available	<input type="radio"/>	<input type="radio"/>	Not applicable
Pre-transfusion vital signs reviewed	<input type="radio"/>	<input type="radio"/>	
IV patency and gauge appropriate	<input type="radio"/>	<input type="radio"/>	
Blood transfusion equipment available	<input type="radio"/>	<input type="radio"/>	Not applicable

If the patient has had a metabolic screening collected, the query "Metabolic screening collected" will default yes and the last collection date/time will display.

Item	Yes	No	Order verified/med necessity
Physician order verified/patient consent signed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Armband(s) on patient verified	<input type="radio"/>	<input type="radio"/>	
Previous history of transfusion reactions reviewed	<input type="radio"/>	<input type="radio"/>	Not applicable
Metabolic screening collected	<input type="radio"/>	<input type="radio"/>	Unknown
Metabolic screening collection date			
Pre-meds verified and available	<input type="radio"/>	<input type="radio"/>	Not applicable
Pre-transfusion vital signs reviewed	<input type="radio"/>	<input type="radio"/>	
IV patency and gauge appropriate	<input type="radio"/>	<input type="radio"/>	
Blood transfusion equipment available	<input type="radio"/>	<input type="radio"/>	Not applicable

Message

Discuss metabolic screening collection prior to transfusion

OK

If the nurse selects "No" to "Metabolic screening collected", a pop-up message will display with message: "Discuss metabolic screening collection prior to transfusion."

Thu Jun 12
10:31
by MOB

Interventions
Test TAR Pre-Issue Checklist ✓

Assessments
✓ **TAR Pre-Issue Checklist** ✓

Pre-Issue Checklist

Physician order verified/patient consent signed	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Order verified/med necessity
Armband(s) on patient verified	<input checked="" type="radio"/> Yes	<input type="radio"/> No	
Previous history of transfusion reactions reviewed	<input type="radio"/> Yes	<input checked="" type="radio"/> Not applicable	
Metabolic screening collected	<input type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Unknown
Metabolic screening collection date			
Pre-meds verified and available	<input checked="" type="radio"/> Yes	<input type="radio"/> Not applicable	
Pre-transfusion vital signs reviewed	<input type="radio"/> Yes	<input type="radio"/> No	
IV patency and gauge appropriate	<input type="radio"/> Yes	<input type="radio"/> No	
Blood transfusion equipment available	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Not applicable

If the nurse selects “Unknown” to “Metabolic screening collected”, the user continues to the next screening question.