

## Texas Department of State Health Services

LABORATORY SERVICES SECTION

Mailing Address: PO BOX 149347 AUSTIN, TEXAS 78714-9347 1-888-963-7111 ext. 7333 www.dshs.state.tx.us

Newborn Screening (NBS) Report Card - Specimen Submission					
Report Date Provider Name:	February 08, 2016			Provider ID:	0000001
Address:	REALLY BIG HOSPITAL 5555 BIG HOSPITAL BLVD				
Tiddless.	BIG CITY TX 75235				
Performance Period:	January 01, 2016 - January 31, 2016				
Provider Submission	Volume	Total			
Number of NBS specimens submitted		950			
Number of initial scree	en NBS specimens submitted (e.g. Birth to 7 days old) en NBS specimens submitted (e.g. 7 days or older)	894 56			
Specimens Unsuitable	e for Testing				
		Count	Percent	State Average	Goal
Total number of specimens with quality issues		3	0.32%	1.91%	0%
Specimens that are unsatisfactory to test for any of the disorders		1	0.11%	1.14%	0%
Specimens for which results can be reported for some but not all disorders		2	0.21%	0.77%	0%
Most frequent quality	y issues this reporting period for your facility $st$				
Blood was Caked, Clotted, or Layered onto the Filter Paper.		1	0.11%		
Filter paper is scratched from the possible use of capillary tubes.		1	0.11%		
Unsatisfactory – Please resubmit: Specimen inadequate for accurate dete		1	0.11%		
* Each specimen may l	have up to 3 separate quality issues				
<b>Fiming on Initial NB</b>	S Specimen Collection				
	-	Count	Percent	State Average	Goal
Goal: Collected betwee	en 24 and 48 hours	867	96.98%	91.24%	100%
Collected too early: < 24 hours of age		19	2.13%	5.31%	0%
Collected late: >48 hours of age		8	0.89%	3.45%	0%
Specimen Transit Tir	ne from Collection to State Laboratory				
		Count	Percent	State Average	Goal
Goal: Received within	72 hrs from collection	852	89.68%	80.31%	100%
Received by state laboratory <24 hrs from collection		0	0.00%	17.50%	
Received by state laboratory <48 hrs from collection		610	64.21%	57.84%	
Received on day 14 or	more - rejected for testing	0	0.00%	0.18%	0%
Specimen Missing K	ey Demographic Information				
		Count	Percent	State Average	Goal
Goal: Submission of al	l key demographic information listed below *	826	86.95%	62.77%	100%
Missing date of birth		0	0.00%	0.21%	0%
Missing time of birth		16	1.68%	18.41%	0%
Missing / Invalid date of collection - may result in rejection for testing		0	0.00%	2.97%	0%
Missing time of collection		1	0.11%	14.30%	0%
Missing birth weight		2	0.21%	5.86%	0%
Missing physician name Missing physician phone number		104 10	10.95% 1.05%	9.47% 14.25%	0% 0%
* Counts may reflect multiple key items missing from the same specimen		10	1.0070	17.2370	070

\* Counts may reflect multiple key items missing from the same specimen