



Screening for heart disease in babies

Parent information

Why do we screen babies?

Although many babies affected by heart disease will have this detected on ultrasound scans during the pregnancy, some heart problems won't be found until after the baby is born. Even though a baby may have a problem with their heart, this may not be found when looking at the baby or listening to their heart with a stethoscope. A simple test to check your baby's oxygen levels (saturations) can detect most heart problems in newborn babies before they have symptoms. It can also help with detecting other problems such as infection or breathing difficulties.

What does screening involve?

Your midwife, nurse or doctor will explain oximetry screening to you and get your consent.

Your baby's oxygen saturation levels will be measured using a machine (oximeter) with a probe that is attached to your baby's foot. This is not painful or harmful to your baby and it usually only takes a few minutes to set up and get a measurement. It is best for your baby to be screened when they are quiet or asleep, not while feeding or crying.

Sometimes, screening may delay you and your baby from going home, even if your baby is well.

What happens with my baby's result?

If your baby's oxygen levels are normal, your baby will not need anything more to be done.

If your baby's oxygen levels are low, the screening test may be repeated. If the levels are very low or the repeat testing is still abnormal, then your baby will be examined by a doctor. The doctor will talk to you about their findings and any tests or treatments that your baby may need.

A very small number of babies with heart problems will have normal oxygen levels. If you are concerned about your baby once you take your baby home, please contact a health professional.



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