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Quality Indicator	Description Note: Please see the QI Source Document for complete definitions		
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QI 1a	Percent of first dried blood spot specimens that were unacceptable due to improper collection.		
QI 1b	Percent of first dried blood spot specimens that were unacceptable due to improper transport.		
QI 1c	Percent of requested subsequent dried blood spot specimens that were unacceptable due to improper collection.		
QI 1d	Percent of requested subsequent dried blood spot specimens that were unacceptable due to improper transport.		
QI 2a	Percent of first dried blood spot specimens submitted with at least one missing state-defined essential data field.		
QI 2b	Percent of requested subsequent dried blood spot specimens submitted with at least one missing state-defined essential data field.		
QI 3a	Total newborns without a valid dried blood spot screen.		
QI 3b	Newborns without a valid dried blood spot screen due to parental refusal.		
QI 3c	Newborns without a valid first dried blood spot screen due to pre-analytic error.		
QI 3d	In two-screen states, newborns without a valid first and routine second screen due to a missing or unmatched dried blood spot specimen.		
QI 4a	Percent of infants lost to follow-up following the receipt of an unacceptable dried blood spot specimen.		
QI 4b	Percent of infants lost to follow-up following a borderline result for which a subsequent dried blood specimen was requested for repeat screening.		
QI 4c	Percent of infants lost to follow-up following an out-of-range result from a dried blood spot screen requiring clinical diagnostic workup.		
QI 5a.i	Time from birth to specimen collection for first dried blood spot specimens (in unit of hours).		
QI 5a.ii	Time from birth to specimen collection for the routine second screen dried blood spot specimens (in unit of days).		
QI 5a.iii	Time from birth to specimen collection for requested subsequent specimens dried blood spot specimens (in unit of days).		
QI 5b.i	Time from specimen collection to lab receipt for first dried blood spot specimens (in unit of days).		
QI 5b.ii	Time from specimen collection to lab receipt for requested subsequent dried blood spot specimens (in unit of days).		
QI 5b.iii	Time from specimen collection to lab receipt for routine second screen dried blood spot specimens (in unit of days).		
QI 5c.i	Time from specimen receipt to reporting for time-critical results (in unit of days).		

QI 5c.ii	Time from specimen receipt to reporting for non-time critical results (in unit of days).
QI 5c.iii	Time from specimen receipt to reporting for first dried blood spot specimens with normal or out-of-range results for any disorder (in unit of days).
QI 5.iv	Time from specimen receipt to reporting for requested subsequent specimens with a normal or out-of-range result for any disorder (in unit of days).
QI 5.v	Time from specimen receipt to reporting for routine second screen dried blood spot specimens for any disorder (in unit of days).
QI 5d.i	Time from birth to reporting for time-critical results (in units of days).
QI 5d.ii	Time from birth to reporting for non-time critical results (in unit of days).
QI 5d.iii	Time from birth to reporting for first dried blood spot specimens with normal or out-of-range results for any disorder (in unit of days).
QI 5d.iv	Time from birth to reporting for requested subsequent dried blood spot specimens with normal or out-of-range results for any disorder (in unit of days).
QI 5d.v	Time from birth to reporting for routine screen dried blood spot specimens with normal or out-of-range results for any disorder (in unit of days).
QI 5e	Time from reporting out-of-range results to medical intervention for infants with a confirmed clinical diagnosis. <i>Note: this metric is pulled from individual case entries.</i>
QI 5f	Time from birth to confirmation of clinical diagnosis. <i>Note: this metric is pulled from individual case entries.</i>
QI 5g	For newborns with an out-of-range result, time from birth to determining if a result was a false positive result.
QI 6	Percent of newborns with a screen positive result from the dried blood spot screen, reported by disorder or disorder category.
QI 7a	Birth prevalence of disorders detected by newborn screening with a confirm diagnosis, reported by disorder. <i>Note: this metric is pulled from aggregate case counts.</i>
QI 7b	Number of infants detected from the first dried blood spot specimen, with a confirmed diagnosis, reported by disorder. <i>Note: this metric is pulled from individual case entries.</i>
QI 7c	Number of infants detected from a requested subsequent dried blood spot specimen with a confirmed diagnosis, reported by disorder. Note: this metric is pulled from individual case entries.
QI 7d	In two-screen states, number of infants detected from the routine second dried blood spot specimen, with a confirmed diagnosis, reported by disorder. <i>Note: this metric is pulled from individual case entries</i> .
QI 8a	Number of infants that have a confirmed diagnosis by a physician but did not have an out-of-range screen newborn screen result, reported by disorder. <i>Note: this metric is pulled from individual case entries.</i>
QI 8b	Number of infants that have a confirmed diagnosis by a physician but did not have an out-of-range screen newborn screen result because they did not have a valid dried blood spot screen due to error, reported by disorder. <i>Note: this metric is pulled from individual case entries.</i>