

# WASHINGTON STATE BOARD OF HEALTH

**Date:** October 13, 2021

**To:** Washington State Board of Health Members

**From:** Tom Pendergrass, Board Vice Chair

**Subject:** Briefing – Chapter 246-650 WAC, Newborn Screening; Congenital Cytomegalovirus

## Background and Summary:

The Washington State Board of Health (Board) has the authority under RCW 70.83.050 to define and adopt rules for screening of Washington-born infants for hereditary conditions. WAC 246-650-010 defines the conditions and WAC 246-650-020 lists conditions for which all Washington-born newborns are to be screened. The Board convenes a technical advisory committee (TAC) in order to inform its decision on which conditions to include in the newborn screening (NBS) panel. The TAC uses available information to evaluate candidate conditions using an established set of criteria.

Congenital cytomegalovirus (cCMV) occurs when a pregnant individual is infected with cytomegalovirus and subsequently passes the infection to their unborn child. cCMV is the most common congenital infection with a birth prevalence of approximately 0.58 percent. cCMV can result in hearing loss and is the leading cause of nonhereditary, sensorineural hearing loss. Additionally, cCMV can lead to developmental delay, vision loss, seizures, and death.

Currently, six states require targeted newborn screening for cCMV and an additional six states require education for the public and health professionals regarding cCMV. In addition, Ontario, Canada universal screens for cCMV using dried blood specimens. In Washington State, some healthcare facilities provide screening for cCMV in infants who do not pass the newborn hearing screening, including Seattle Children's Hospital and Valley Medical Center in Renton.

I have invited Dr. John Thompson and Michael Katsuyama from the Department of Health's Newborn Screening Program, Karin Neidt from the Department's Early Hearing Detection, Diagnosis, and Intervention (EHDDI) Program, as well as Samantha Pskowski, Policy Advisor to the Board, to present preliminary information on cCMV.

## Recommended Board Actions:

The Board may wish to consider one of the following motions:

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The Board directs staff to work with the Department of Health to convene a technical advisory committee to evaluate congenital cytomegalovirus using the Board's process and criteria to evaluate conditions for inclusion in WAC 246-650-020 and then make a recommendation to the Board.

*Or*

The Board determines that there is insufficient information available at this time to determine if congenital cytomegalovirus meets the criteria's qualifying assumption. The Board directs staff to update the information in two years and return to the Board for its reconsideration.

#### Staff

Samantha Pskowski

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