

By: Representative Aldridge

To: Public Health and Human
Services

HOUSE BILL NO. 1052

1 AN ACT TO PROVIDE THAT NEWBORN CHILDREN IN HOSPITALS MUST
2 HAVE THEIR OXYGEN SATURATION LEVEL TESTED AT LEAST ONCE BEFORE
3 BEING DISCHARGED FROM THE HOSPITAL; TO PROVIDE THAT IF A CHILD'S
4 OXYGEN SATURATION LEVEL IS BELOW A CERTAIN PERCENTAGE, THE
5 SATURATION LEVEL MUST BE RETESTED TWO ADDITIONAL TIMES; TO PROVIDE
6 THAT IF THE SATURATION LEVEL STILL IS LOW AFTER THE ADDITIONAL
7 TESTS, OTHER TESTS MUST BE CONDUCTED TO DETERMINE THE CAUSE FOR
8 THE LOW SATURATION LEVEL; AND FOR RELATED PURPOSES.

9 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

10 **SECTION 1.** The physician attending any newborn child in a
11 hospital in this state, or the person attending any newborn child
12 in a hospital in this state if the child is not attended by a
13 physician, shall have the child's oxygen saturation level tested
14 with an oxygen saturation probe at least one (1) time before the
15 child is discharged from the hospital. If a child's oxygen
16 saturation level is below ninety-five percent (95%) when initially
17 tested, the physician or other person attending the child shall
18 have the child's oxygen saturation level retested one (1) week
19 after the initial test and two (2) weeks after the second test.
20 If the child's oxygen saturation level is below ninety-five
21 percent (95%) after the third test, the physician or other person
22 attending the child shall conduct such other tests as necessary to
23 determine the cause for the child's low oxygen saturation level.

24 **SECTION 2.** This act shall take effect and be in force from
25 and after July 1, 2005.