If you have questions? Please call 518-486-6048 for assistance.

Be sure to file a copy of DOH 1514 and DOH 4068 in the newborn's medical record.

Has the box information been accurately transferred from DOH 4068 to DOH 1514?

Are the boxes completely accurate? (e.g. if selected testing was performed on the mother, is box "E" checked?)

Is one box (and only one box) from A through G checked?

Verify the accuracy and completeness of the information included on DOH Form 4068:

Check the Correct Boxes. Follow these simple steps to insure accurate completion of the DOH 1514 Form:

1. Pre-natal and in-hospital HIV test results of the mother and newborn

2. Confirm with pre-natal pediatric HIV prevention and care program requirements. Be sure that the manner of notification accurately reflects the

Purpose: This form accompanies the newborn's healthseeker specimen that is sent to the NYSDOH to measure your facility's

Important Note: The information that you enter on this form is used by the NYSDOH to measure your facility's

Other disorders that are tested for include Phenylketonuria – PKU; Prune-Belly Syndrome – PBC; Maple Syrup Disease – MS

THE DOH 4068.

NEOBNORN HIV TESTING HISTORY. THIS INFORMATION SHOULD BE TRANSFERRED DIRECTLY FROM

ALONG WITH DEMOGRAPHIC INFORMATION. THE DOH 1514 FORM COLLECTS THE MATERNAL AND