# Massachusetts

## Birth Defects Surveillance System

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| MA    | STATUTE: Chapter 111, Section 67E 105 CMR 300 | **Chapter 111: Section 67E. Children born with congenital anomaly, birth defect, birth injury or mental retardation; reports.**  
**Section 67E. (a)** Within 30 days after the diagnosis in the commonwealth of a congenital anomaly, birth defect or birth injury which may lead to an incapacity or disability, the physician making the diagnosis shall report the anomaly, defect or injury to the department on a form to be furnished by the department. The commissioner shall require the submission of such information on reported cases up to the age of 3 years as he considers necessary and appropriate for the prevention and early detection of such anomalies, defects and injuries. …  
**Section 67E. (c)** Nothing in this section shall compel any individual to submit to medical or department examination, testing or | **Section 67E. (a)...** Authorized officials or agents of the department may abstract and record information that is required for reporting from the medical records of children under the age of 3 years and their parents. …  
**Section 67E. (b)** The contents of such reports, records and information shall be solely for the use of the department and such reports, records and information shall not be open to | **Section 67E.** | NO | NO |
supervision.

(d) The department shall make rules and regulations to implement this section.

(e) Within 30 days after the date of birth of any child with mental retardation, or within 30 days after any child has been diagnosed as having mental retardation, the physician making the diagnosis shall report, with the approval of the parents, the mental retardation to the department of developmental services for the purpose of having the department inform such parents of existing information and support services. The contents of this report shall be solely for the use as described in this subsection and shall not be open to public inspection or constitute a public record.

105 CMR 300.000 REPORTABLE DISEASES, SURVEILLANCE AND ISOLATION AND QUARANTINE REQUIREMENTS. …300.020: Definitions....Disease. An abnormal condition or functional impairment resulting from infection, metabolic abnormalities, physical or physiological injury or other cause, marked by public inspection or constitute a public record. The commissioner may make such reports, records or information contained therein available to a researcher performing medical and scientific studies for the purpose of the reduction of morbidity and mortality in the commonwealth, so long as the commissioner and a duly constituted institutional review board first approves that study.

The protocol shall specify how such records shall be reviewed, how information from them shall be abstracted and reported, the exact information to be recorded, and how the information will be used, maintained and kept confidential. The department shall collect no more information than it considers necessary and appropriate in order to conduct epidemiological surveys and to develop appropriate preventative treatment and control measures.
subjective complaints, associated with a specific history, and clinical signs and symptoms, and/or laboratory or radiographic findings…**Illness.** An abnormal condition or functional impairment resulting from infection, metabolic abnormalities, physical or physiological injury or other cause, marketed by subjective complaints and clinical signs.

105 CMR 300.191: **Access to Medical Records and Other Information. (A)** The Department and local boards of health are authorized to obtain, upon request, from health care providers and other persons subject to the provisions of 105 CMR 300.000 et seq., medical records and other information that the Department or the local board of health deems necessary to carry out its responsibilities to investigate, monitor, prevent and control diseases dangerous to the public health…