## Minnesota

### Birth Defects Surveillance System

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<td>MN</td>
<td>STATUTE: M.S. 144.2216 &lt;br&gt;NO RULE FOUND</td>
<td>144.2216 BIRTH DEFECTS RECORDS AND REPORTS REQUIRED. &lt;br&gt;<strong>Subdivision 1. Hospitals and similar institutions.</strong> With the informed consent of a parent or guardian, as provided in subdivision 4, a hospital, medical clinic, medical laboratory, or other institution for the hospitalization, clinical or laboratory diagnosis, or care of human beings shall provide the commissioner of health with access to information on each birth defect case in the manner and at the times that the commissioner designates. &lt;br&gt;<strong>Subd. 2. Other information repositories.</strong> With the informed consent of a parent or guardian, as provided in subdivision 4, other</td>
<td>144.2216. Subd. 3. Reporting without liability. Furnishing information in good faith in compliance with this section does not subject the person, hospital, medical clinic, medical laboratory, data repository, or other institution furnishing the information to any action for damages or relief.</td>
<td>144.053 RESEARCH STUDIES CONFIDENTIAL. &lt;br&gt;<strong>Subdivision 1. Status of data collected by commissioner.</strong> All information, records of interviews, written reports, statements, notes, memoranda, or other data procured by the state commissioner of health, in connection with studies conducted by the state commissioner of health, or carried</td>
<td>NO</td>
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repositories of information on the diagnosis or care of infants may provide the commissioner with access to information on each case of birth defects in the manner and at the times that the commissioner designates.

**Subd. 4. Opt out.** A parent or legal guardian must be informed by the commissioner at the time of the initial data collection that they may request removal at any time of personal identifying information concerning a child from the birth defects information system using a written form prescribed by the commissioner. The commissioner shall advise parents or legal guardians of infants:

1. that the information on birth defects may be retained by the Department of Health;
2. the benefit of retaining birth defects records;
3. that they may elect to have implementation. In the planning state, MEDSS will consolidate and/or link 52 files, datasets, and systems, including those related to infectious disease surveillance, birth defects, trauma/injury and lead screening. Currently, hospital infection control providers (ICPs) contribute a large amount of the state surveillance data and MEDSS will support automatic data transfer and improve efficiency in data collection for the ICPs. Responses to a request for proposal (RFP) are underway and the new system will be piloted during 2009. – *Minnesota: A Prescription for Better Health Care and Population Health, Minnesota e-Health, http://www.astho.org/pubs/ASTHO-Minnesota-2.pdf*

on by the said commissioner jointly with other persons, agencies or organizations, or procured by such other persons, agencies or organizations, for the purpose of reducing the morbidity or mortality from any cause or condition of health shall be confidential and shall be used solely for the purposes of medical or scientific research.
the birth defects information collected once, within one year of birth, but to require that all personally identifying information be destroyed immediately upon the commissioner receiving the information. If the parents of an infant object in writing to the maintaining of birth defects information, the objection or election shall be recorded on a form that is signed by a parent or legal guardian and submitted to the commissioner of health; and (4) that if the parent or legal guardian chooses to opt-out, the commissioner will not be able to inform the parent or legal guardian of a child of information related to the prevention, treatment, or cause of a particular birth defect. [emphasis added]