

## New Digital Foot Scan System Speeds ID Of Newborns

A new digital identification system for newborns is providing an extra layer of infant security and safety, thanks to new technology that allows for almost instantaneous registering of infant footprints, according to the manufacturer, CertaScan Technologies, Fairfield, CT. The technology reportedly is able to pick up the ridges in baby footprints to make permanent digital ID records. As the company sums up its product, it has “created a system consisting of equipment, software, and services (including installation, training, and maintenance) that will allow hospitals to uniquely identify babies in cases where identification is urgently needed, as in abductions, baby switches (when bracelets have fallen off), and abandoned newborns.”

The system is inkless and cuts nurse time requirements by over 70 percent from current methods, according to the company. The resulting digital record is placed in the newborn’s electronic record, with another copy being presented to the family as an attractive keepsake. There are other optional additions to the footprint record, including digital photos and/or a copy of the mother’s fingerprint. The equipment is being made available with no upfront costs to participating hospitals, the company says. It charges a per-scan fee that is commensurate with costs spent on current ink and inkless processes--but with better results. The resolution of the CertaScan footprint meets the FBI’s standard for fingerprint ID. Hospitals and law enforcement officers are also provided by CertaScan with 24/7 access to footprint forensic specialists to confirm baby identities.

### ‘Improves ID In Infant Abductions, Baby Switches’

David Yarnell, Chairman & CEO of CertaScan, says, “the most pressing need for developing this product is to deal as quickly as possible with infant abductions, inside or outside the hospital.” “For legal reasons,” he continues, “hospitals are not permitted to return a found child to its family without precise identification. Infants lose weight in the first few hours after birth and ID bracelets fall off. Hospitals don’t like to talk about this problem, but it exists.” With this new system, “you can go into a registry and ID children immediately if a child is found.” Another application is in precisely identifying identical twins.

Yarnell claims that current inking methods don’t give much detail or give a permanent digital record. Infant foot scans remain an important part of the record, since footprints, like fingerprints, don’t change as we grow older. “What changes as we age is the distance between the ridges, but the pattern of

ridges remains the same,” explains Yarnell who says he’s very pleased with the hospital response to the system. “Infant safety is an important part of patient satisfaction. The more precautions that are taken, the more comfortable hospital patients feel.” Hospital security personnel, he adds, “are usually one of the major players around the table when deciding what systems to implement.”



**Making a digital record of an infant’s footprint. Footprints, like fingerprints, do not change as a person grows older. What changes is the distance between the ridges, but the pattern of ridges stays the same.**

### Rabun of NCMEC: ‘There has been a longstanding need for electronic digital capture of infant ID’

John Rabun, Director of Infant Abduction Response the National Center for Missing and Exploited Children (NCMEC) says there has been a longstanding need for digital confirmation of infant ID. “For 50 years, we have pushed for electronic digital capture of infant ID,” he says. “We’ve been able to do it on the criminal side, where a policeman can take an instant fingerprint scan of a suspected perpetrator and get instant digital confirmation, so why can’t we do it on the other side, to identify children?” In fact, before Desert Storm, he explains, “there was a company that developed algorithms to do baby footprints, but the Board of Directors decided to use their technology to ID Al Qaeda operatives instead of directing the technology to infant identification.” While he understands why such choices are made, he regrets that it took so many additional years to develop the system for infant ID purposes.

He cites some of the legal problems when dealing with abducted or switched babies, and points out that switched babies are more common than abductions. While many of the attributes of a person likely to take a child from the hospital are known, it is legally complicated to try to retrieve a child from a suspect. “In law enforcement terms,” Rabun explains, with-

out positive identification, the most “an alleged perpetrator can be suspected of is being ‘in receipt of stolen property’ if she has a child and she doesn’t have proof she was registered in the hospital or has given birth recently. But, in legal terms, how do you prove she has the same baby that was reported stolen? Without positive ID (like an existing bracelet), we have been relying on DNA.”



According to CertaScan, in addition to the digital record being placed in the newborn’s electronic record, a copy is presented to the family.

The problem with DNA testing is time, says Rabun. “Essentially, we are bringing a baby who has been retrieved to a charge nurse and saying, ‘as soon as you have proof positive of ID, then you can hand the infant back to the mother.’ But a lot depends on what contract the hospital has as to how long their DNA turnaround time can take,” Rabun says. “If you have a mother waiting for the return of her missing child, even six hours is a long time to wait for confirmation--and it can take much longer.”

The scenario changes radically with digital footprint ID. Comparing current methods to the new process, Rabun says, “It is tough to get consistency with ink and it takes much longer. With the foot scanning system, the nurse can get a scan in split seconds.”

**FOR FURTHER INFORMATION, CONTACT:**

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**Watch Out For:**

**Information Given To Baby Photographers**

Six Toronto area hospitals compromised their patients’ personal health data by routinely handing that information over to baby photographers who paid for access to maternity wards. As far back as 2009, Mount Sinai, North York General, St. Joseph’s Health Centre, Humber River, Toronto East General and Rouge Valley Health System hospitals inappropriately gave up the information of tens of thousands of new mothers, according to Ontario’s privacy watchdog.

In some cases, the records included the patients’ name, age, length of hospital stay, attending physician, type of diet, reason for admission to hospital, type of delivery and baby’s birth date. “It wasn’t the proper process. We should have simply been providing the name and room number,” Elizabeth McCarthy, a spokesperson for North York General was reported as saying.

McCarthy estimated more than 5,000 patients at North York General alone may have been affected between March 2013 and February 2014.

The six hospitals independently reported the breaches after internal reviews triggered by news that two former employees at Rouge Valley had allegedly sold the personal information of 14,450 patients to private RESP companies. Unlike that incident, the privacy watchdog said, the patient records given to the photographers were not turned over to any third party.

“We have found no evidence to suggest that this information ever left hospital property or was used by the photographer for any other purpose,” said Trelle Huether, a spokesperson for the Office of the Information and Privacy Commissioner, in an email. The privacy breaches all involve Just Arrived Baby Photography Inc., a company contracted by the hospitals to provide photography services to new mothers.

Todd Jaspas, the general manager of Just Arrived, described the breach as a “communication breakdown.” “Our contract stated that we would be provided with a census list to visit the families. But I guess there wasn’t clarification as to what would be provided on that census list,” Jaspas said.

The six hospitals informed patients of the breach by posting a statement on their websites for 30 days.