

The Honourable Adriana LaGrange
Minister of Health
Government of Alberta
228 Legislature Building, 10800 - 97 Avenue NW
Edmonton, Alberta T5K 2B6

Dear Minister LaGrange,

I am writing to express my strong support for the expansion of the Alberta Newborn Screening Program, specifically to include screening for congenital Cytomegalovirus (CMV). As a [specialty] practicing in [City, Province], I have witnessed the significant impact early detection and intervention can have on the health and well-being of newborns.

CMV is a common viral infection that can lead to severe health complications, particularly when contracted during pregnancy or at birth. Infants with congenital CMV can experience hearing loss, developmental delays, vision impairment, and other lifelong challenges. Early diagnosis and timely intervention are critical in providing affected children with the best possible outcomes and ensuring they receive appropriate medical care and support.

The addition of CMV screening to the Alberta Newborn Screening Program will enable healthcare providers to identify affected infants promptly and direct them to appropriate medical resources. It will also allow for the implementation of preventive measures and early interventions to minimize the long-term effects of CMV infection.

As a medical professional, I firmly believe that investing in preventive healthcare measures, such as expanding the newborn screening program, is essential in promoting the overall health and well-being of our population. The cost-effectiveness and positive impact of early detection in congenital CMV cases cannot be understated.

I urge the Alberta government to prioritize the expansion of the Alberta Newborn Screening Program to include CMV screening. By doing so, we can take a significant step forward in protecting the health of our youngest citizens and providing them with the best start in life. Thank you for considering my input and for your dedication to enhancing the health and wellness of Alberta's children.

Sincerely,

[Doctor's Name]

[Doctor's Title/Position]

[Medical Clinic/Hospital Name]

[Address]

[City, Province] [Postal Code]