All types of SCID are very rare disorders that occur in approximately 1 or fewer births in 100,000 in the United States. SCID may be more common in people with Navajo, Apache, or Turkish ancestry. SCID is now diagnosed mainly through from newborn screening in most states. The screen is performed using the dried blood spot from newborn screening (or Guthrie) cards measuring levels T-cell receptor excision circles (or TREC). Although each state has a slightly different methods and thresholds, a low TREC test means the infant has low numbers of lymphocytes in the blood at the time of the test. The result must then be confirmed with additional testing. A complete blood count (CBC) coupled with lymphocyte subset testing may show low levels of B, T, and/or NK cells. Additional tests can show that one or more of these cell types aren't functioning properly. Genetic and biochemical (protein expression) tests are available for some forms of SCID. A combination of these tests may be required to make an accurate diagnosis needed to plan treatment.