

## HEI Congenital Abnormalities Assessment

### Assessment of Congenital abnormalities

a. Any congenital abnormality? Yes No **If No, stop here. If yes, categorize abnormality below**

b. Central Nervous System (CNS): Hydrocephalus Spina bifida

Other (specify):

c. Eye, Ear, Face, Neck: Cleft lip and palate very small jaw (microngathia)

Other (specify):

d. Heart defects: murmur *If murmur present, categorize as:*

Cyanosis present OR No cyanosis defects

Other or Specify based on Echo if available:

e. Gastro-intestinal system: Umbilical Hernia Anorectal malformation

Major Abdominal wall defect (*eg intestines outside such as gastroschisis or omphalcele*)

Other:

f. Genitalia: Ambiguous genitalia Hypospadias Inguinal Hernia

Other:

g. Renal and urinary system: Hypospadias Epispadias Bladder extrophy

Other:

h. Limb defects: Talipes equinovarus (*club foot*) Polydactyly (*extra fingers/toes*)

Syndactyly (*fused fingers/toes*) Other:

i. Chromosomal anomaly: Down Syndrome Other:

j. Other Organ Systems: Yes No **If Yes (specify):**

k. Multi-organ anomalies: Yes No **If Yes (specify):**