

DOWN SYNDROME MEDICAL MANAGEMENT GUIDELINES

Suggested schedule of health checks taken from Guidelines

	Growth	Heart	Thyroid	Sight	Hearing
Birth–6 wks	Length/weight/head circumference - Plot on Down Syndrome Specific Growth Charts*	Clinical examination ECG + Chest X-ray Birth and 6 wks or Clinical examination + ECG + Echocardiogram Birth and 6 wks	Routine Guthrie test	Eye Examination, exclude cataract and glaucoma	Neonatal screening Where available
6-10 months	Growth assessment as above at each routine visit*			Visual behaviour exclude squint	Full audiological review (Otoscopy, Impedance, Hearing thresholds)
12 months	Growth assessment as above at each routine visit*	Dental Advice	Full Thyroid function tests or TSH (Guthrie) yearly when available	Visual behaviour exclude squint	
18-24 months	Growth (height/weight) as above*	Dental Advice & examination of teeth	Full Thyroid function tests or TSH (Guthrie) yearly when available	Ophthalmological examination including Orthoptic screening, refraction and fundal examination	Full audiological review as above
3 – 3 ½ years	Growth (height/weight) assessment as above*	Dental Advice & examination of teeth	Full Thyroid function tests or TSH (Guthrie) yearly when available		Full audiological review as above
4 – 4 ½ years	Growth (height/weight) assessment as above*	Dental Advice & examination of teeth	Full Thyroid function tests or TSH (Guthrie) yearly when available	Ophthalmological examination as above	Full audiological review as above

* Encourage a healthy lifestyle (healthy eating and regular exercise) at all times.

From Age 5 to 19 years

Paediatric Medical Review Annually

Cardiology

Echo in early adult life to rule out mitral valve prolapse

Hearing

2 yearly audiological review as above

Vision

2 yearly ophthalmological examination including refraction and fundal examination

Thyroid

2 yearly from 5 years (venous) **or** annual fingerprick TSH, when appropriate structures, personnel and funding are in place

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