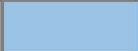




AAP Guidelines for Health Supervision for Children With Down Syndrome	Prenatal	Bth-1 mo	1 mo-1 y	1-5 y	5-13 y	13-21 y
Counseling regarding prenatal screening test & imaging results						
Plan for delivery						
Referral to geneticist						
Parent-to-parent contact, support groups, current books and pamphlets						
Physical exam for evidence of trisomy 21						
Chromosomal analysis to confirm dx						
Discuss risk of recurrence of Down syndrome						
Echocardiogram						
Radiographic swallowing assessment if marked hypotonia, slow feeding, choking with feeds, recurrent or persistent respiratory sx, FTT						
Eye exam for cataracts						
Newborn hearing screen and follow-up						
Hx and PE assessment for duodenal or anorectal atresia						
Reassure parents delayed and irregular dental eruption, hypodontia are common						
If constipation, evaluate for limited diet or fluids, hypotonia, hypothyroidism, GI malformation, Hirschsprung						
CBC to R/O transient myeloproliferative disorder, polycythemia						
Hb annually; CRP & ferritin or CHr if possible risk iron deficiency or Hb <11 g.						
Hemoglobin						
TSH (may be part of newborn screening)						
Discuss risk of respiratory infection						
If cardiac surgery or hypotonic: evaluate apnea, bradycardia, or oxygen desaturation in car seat before discharge						
Discuss complementary & alternative therapies						
Discuss cervical spine positioning, especially for anesthesia or surgical or radiologic procedures						
Review signs and symptoms of myopathy						
If myopathic signs or symptoms: obtain neutral position spine films and, if normal, obtain flexion & extension films & refer to pediatric neurosurgeon or orthopedic surgeon with expertise in evaluating and treating atlanto-axial instability						
Instruct to contact physician for change in gait, change in use of arms or hands, change in bowel or bladder function, neck pain, head tilt, torticollis, or new-onset weakness						
Advise risk of some contact sports, trampolines						
Audiology evaluation at 6 mo						
If normal hearing established, behavioral audiogram and tympanometry until bilateral ear specific testing possible. Refer child with abnormal hearing to ot						
If normal ear-specific hearing established, behavioral audiogram						
Assess for obstructive sleep apnea Sx						
Sleep study by age 4 years						
Ophthalmology referral to assess for strabismus, cataracts, and nystagmus						
Refer to pediatric ophthalmologist or ophthalmologist with experience with Down syndrome						
If congenital heart disease, monitor for signs & Sx of Congestive heart failure						
Assess the emotional status of parents and intrafamilial relationships						
Check for Sx of celiac disease; if Sx present, obtain tissue transglutaminase IgA & quantitative IgA						
Early intervention: physical, occupational, and speech therapy						
At 30 months, discuss transition to preschool and development of IEP						
Discuss behavioral and social progress						
Discuss self-help skills, ADHD, OCD, wandering off, transition to middle school						
If chronic cardiac or pulmonary disease, 23-valent pneumococcal vaccine at age >2 y						
Reassure regarding delayed and irregular dental eruption						
Establish optimal dietary and physical exercise patterns						
Discuss dermatologic issues with parents						
Discuss physical and psychosocial changes though puberty, need for gynecologic care in the pubescent female						
Facilitate transition: guardianship, financial planning, behavioral problems, school placement, vocational training, independence with hygiene and self-care, group homes, work settings						
Discuss sexual development and behaviors, contraception, sexually transmitted diseases, recurrence risk for offspring						

Maint. indicates maintenance; dx, diagnosis; sx, symptoms; FTT, failure to thrive; Hx, history; PE, physician examination; GI, gastrointestinal; CBC, complete blood count; R/O, rule out; Hb, hemoglobin; ot, occupational therapy; CHr, reticulocyte hemoglobin; IgA, immunoglobulin A; IEP, Individualized Education Plan; ADHD, attention-deficit/hyperactivity disorder; OCD, obsessive compulsive disorder.

	Do once at this age
	Do if not done previously
	Repeat at indicated intervals