## DOWN SYNDROME MEDICAL MANAGEMENT GUIDELINES

*Suggested schedule of health checks taken from Guidelines*

<table>
<thead>
<tr>
<th>Age</th>
<th>Growth</th>
<th>Heart</th>
<th>Thyroid</th>
<th>Sight</th>
<th>Hearing</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Birth - 6 wks</strong></td>
<td>Length / Weight / Head circumference Plot on 2011 revised Down syndrome specific charts. (Use NICAM charts for preterm babies)</td>
<td>Clinical Examination ECG and Echocardiogram 0-6 weeks</td>
<td>Routine Guthrie test</td>
<td>Eye Examination; Check for congenital cataract, congenital glaucoma + any other eye abnormality</td>
<td>National Neonatal Hearing screening</td>
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<tr>
<td><strong>6-10 months</strong></td>
<td>Growth assessment - As above at each routine visit*</td>
<td>Dental Advice, Infective endocarditis advice/information if necessary</td>
<td>Full Thyroid function tests or TSH (finger prick)** yearly where available</td>
<td>Visual behaviour, check for squint</td>
<td>Full audiological review (Otoscopy, Impedance, Hearing thresholds)</td>
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<tr>
<td><strong>12 months</strong></td>
<td>Growth assessment - As above at each routine visit*</td>
<td>Dental Advice and Examination of teeth Infective endocarditis advice/information if necessary</td>
<td>Full Thyroid function tests or TSH (finger prick)** yearly when available</td>
<td>Visual behaviour, check for squint</td>
<td>Full audiological review as above</td>
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<tr>
<td><strong>18-24 months</strong></td>
<td>Growth assessment - As above* Chart those ≥2years of age on BMI conversion charts if concerns about overweight.</td>
<td>Dental Advice and Examination of teeth Infective endocarditis advice/information if necessary</td>
<td>Full Thyroid function tests or TSH (finger prick)** yearly when available</td>
<td>Ophthalmological examination including Orthoptic screening, refraction and fundal examination and focusing ability</td>
<td>Full audiological review as above</td>
</tr>
<tr>
<td><strong>3 – 3 ½ years</strong></td>
<td>Growth (Height/Weight) assessment and advice*. Chart on BMI conversion charts if concerns about overweight.</td>
<td>Dental Advice and Examination of teeth Infective endocarditis advice/information if necessary</td>
<td>Full Thyroid function tests or TSH (finger prick)** yearly when available</td>
<td></td>
<td>Full audiological review as above</td>
</tr>
<tr>
<td><strong>4 – 4 ½ years</strong></td>
<td>Growth (Height/Weight) assessment and advice as above*</td>
<td>Dental Advice and Examination of teeth Infective endocarditis advice/information if necessary</td>
<td>Full Thyroid function tests or TSH (finger prick)** yearly when available</td>
<td>Ophthalmological examination as above</td>
<td>Full audiological review as above</td>
</tr>
</tbody>
</table>

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

**TSH(finger prick)- capillary whole blood thyroid stimulating hormone (TSH) sample –using one circle on National Newborn Screening Programme card)

## From age 5years to 19 years

### Paediatric Medical Review Annually

- **Cardiology**: Echo in early adult life to rule out mitral valve prolapse.
  - Infective endocarditis information to be given later in life for those with cardiac history.

- **Hearing**: 2 yearly audiological review as above

- **Vision**: 2 yearly Ophthalmological examination including refraction and fundal examination and focusing ability

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

A comprehensive history and careful clinical examination should be undertaken to detect other emergent health issues such as, respiratory and rheumatological complications

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