# Indications for Referral for Genetic Services:

## Infancy and Childhood

- One or more major congenital malformations *(cleft lip/palate, omphalocele, neural tube defect, etc.)*
- Multiple minor anomalies forming a potentially recognizable syndrome or unknown pattern of malformations.
- Unexplained hypotonia, especially in the neonatal period
- Suspected metabolic disorder
- Mental retardation, developmental delay, autism or loss in milestones without obvious etiology
- Cardiomyopathy of unknown etiology
- Abnormal newborn screening results
- Significant hearing or vision impairment of unknown etiology
- Unusual dermatologic conditions *(e.g pigmentary dysplasia, ichthyosis, bullous disorders, unusual birthmarks, multiple hemangiomas, unusual scarring, skin tumors)*
- Tumor or malignancy with a suspected genetic predisposition *(e.g. retinoblastoma, Wilms tumor, optic glioma, adrenal carcinoma)*
- Family history of a known or suspected genetic disorder, birth defect, or chromosomal abnormality
- Abnormalities in growth *(e.g. short or tall stature inconsistent with family height, asymmetry, macrosomia, disproportionate)*
- Ambiguous genitalia or other significant genital abnormalities
- Known or suspected genetic/inherited disorder or chromosomal abnormality or family history of such *(e.g. muscular dystrophy, hemophilia, Down syndrome)*
- Newborns with prenatally suspected fetal abnormalities or growth retardation
- Stillborn or deceased infants with known or suspected external or internal abnormalities *(e.g. hydrops, fetal growth retardation, malformations, dwarfism, renal dysgenesis/agenesis, histologic findings suggestive of metabolic disease)*

March of Dimes
Saving babies, together
Funded by a 2004 Community Grant from the March of Dimes.