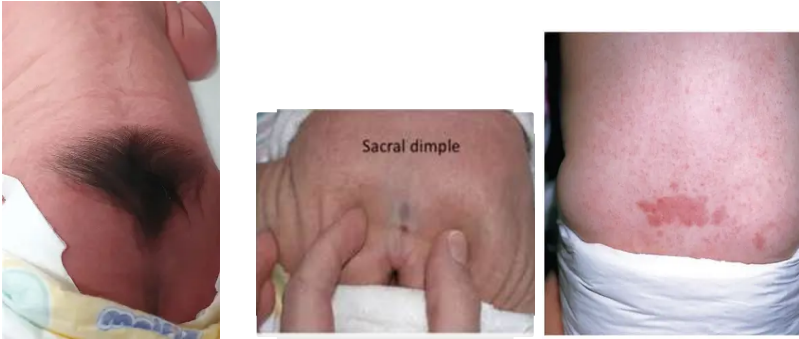


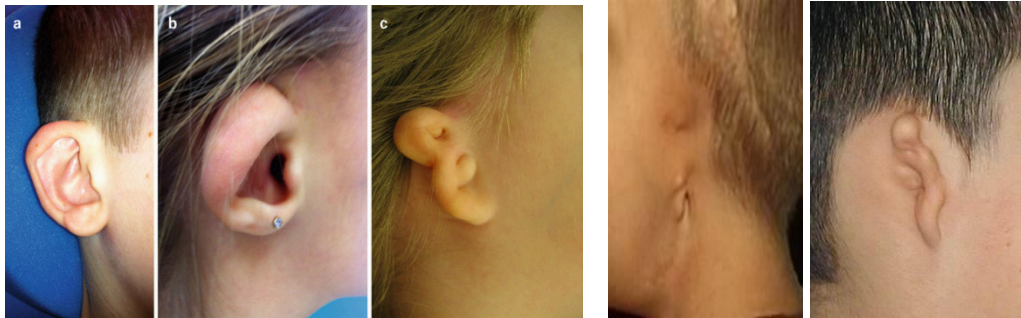
Pictorial guideline for congenital anomaly detection

● Part 1 – Nervous system

Anencephaly		
Encephalocele/ Encephalomyelocele		
Frontal encephalocele		
Nasofrontal encephalocele		
Hydrocephalus		

Myelocele / Myelomeningocele (At different sites)	
Suspicious markers of Spina bifida occulta	 Tuft of hair Skin Discoloration

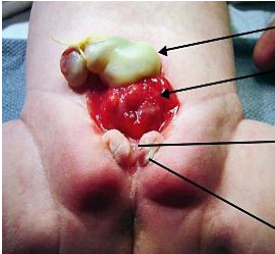
Part 2: Ear, Eye and Face

Microtia (normal to grade 4)		
cataract		
Micrognathia		

Part 3 – Mouth and neck

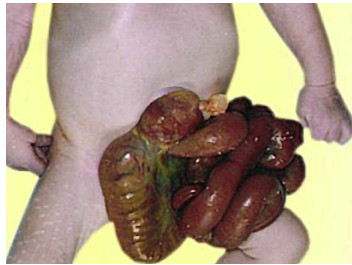
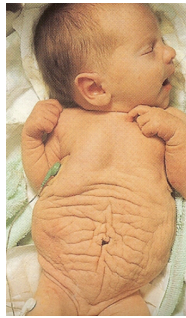
Cleft Lip (Unilateral / Bilateral)		
Cleft Palate		
Cleft lip with cleft palate (Unilateral / Bilateral)		
Tongue tie		
Cystic hygroma		

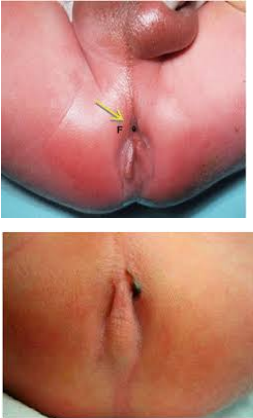
Part 4 – Urogenital and Anorectal malformations

Hypospadias		
Epispadia-Exstrophy complex		
Cloacal Extrophy		
Disorder of sexual differentiation		
Undescended Testis (Flat scrotum and no testis felt)		

Inguinal Hernia		
Hydrocele		

Part 5 – abdominal wall defect and Anorectal malformations

Exomphalos/omphalocele		
Gastroschisis		
Prune belly syndrome		
Umbilical hernia		

Anorectal malformation without fistula		
Anorectal malformation with perineal fistula (anteriorly mislocated anus)		
Anorectal malformation with rectovestibular fistula		
Tumors (Sacroccocygeal teratoma)		

Part 6 – musculoskeletal

Clubfoot		
Syndactyly		
Polydactyly		
Amelia		
Limb Reduction		

Part 7 – chromosomal anomalies and Others

Down syndrome		Flat facial profile, upward slanting eyes, small nose, small ears, single palmar/plantar crease, hypotonia (low muscle tone)
Edward syndrome		Small, abnormally shaped head (microcephaly) Prominent occiput (back of the head) Low-set, malformed ears Small jaw (micrognathia) Clenched hands with overlapping fingers Rocker-bottom feet (convex soles) Short sternum
Conjoint Twin		
Parasitic Twin		

Part 8 – Deeper Evaluation

1. Cardiac auscultation for murmur or gallop
2. Saturation measurement (If desaturated further evaluation)
3. Mouth full of saliva with drooling as sign of esophageal atresia with or without tracheoesophageal fistula
4. Abdominal distension with vomiting
5. Failure to pass meconium on the first 24 hours or until discharge (If discharged early)