DYSMORPHOLOGY CORE PHYSICAL EXAMINATION FORM

4. Date of Examination	1. Identification Number2. Examiner: [] Pedia: [] Exper			
5. Patient's Name	4. Date of Examination / /	•		
7. Birth Date	5. Patient's Name	6. Patient's Gender: [] Male		
1 Year old	7. Birth Date / / / 8. Number of completed	weeks of gestation (weeks)		
9. Was child born prior to 37 weeks of gestation? 13. Current Age: Years	If child is:			
Examined prior to EDC	<1 year old	≥1 year old		
Examined prior to EDC Examined after EDC	9. Was child born prior to 37 weeks of gestation?	13. Current Age: Years Mo	nths	
Examined prior to EDC 11. Gestational weeks at exam (g.weeks) (g.weeks) (g.weeks) (months) (weeks) (g.weeks) (g.weeks) (g.weeks) (g.weeks) (g.weeks) (g.weeks) (g.weeks) (g.weeks) (g.weeks) (g.weeks)	[] Yes [] No			
15.H% 16.Ht ≤ 10th percentile 24 25 20 20 25 25 25 25 25	Examined prior to EDC Examined after EDC	(months) (wee	:ks)	
15.Ht%	↑ ↓ ↓ ↓ 11. Gestational weeks at exam 12. Adjusted Age			
14. Height		enths) (weeks)		
17. Weight	Growth:	16 Hz < 10th	≯ ▼7	₽N.T
	14.Height cm			
20. Occipito-Frontal Circumference cm 21.0FC% 22.0FC ≤ 10th percentile (3 yes 3 No 23. Inner Canthal Distance cm 24.ICD% 25.ICD ≤ 25th percentile (5 -2SD preterm) 3yes 3 No 24.ICD% 28.PFL ≤ 10th percentile (5 -2SD preterm) 3yes 3 No 29. Maxillary arc cm 30.Hypoplastic Midface 32. Railroad track configuration ears 33. Strabismus 32. Railroad track configuration ears 33. Strabismus 34. If yes, unilateral bilateral 37. Epicanthal folds 38. If yes, unilateral bilateral 39. Anteverted nares	·	19. Wt ≤ 10 percentile	□ Y es	
23.Iner Canthal Distance _ cm	20 Occipito-Frontal Circumference cm 21 OFC%	22 OFC < 10 th percentile	Ves	مالاف
26.Palpebral Fissure Length (Left) cm 29. Maxillary arc cm 31. Mandibular arc cm 31. Mandibular arc cm 31. Mandibular arc cm 32. Railroad track configuration ears 33. Strabismus cm 33. Strabismus cm 34. If yes, unilateral bilateral since 35. Ptosis 36. If yes, unilateral bilateral since 39. Anteverted nares 41. Philtrum cm 41. Philtrum cm 41. Philtrum cm 42. Long Philtrum cm 45. Vermilion Boarder: Lipometer Code 1	23 Inner Canthal Distance cm 24 ICD%	25 ICD < 25 th percentile (< -2SD preterm)		
29. Maxillary arccm 30. Hypoplastic Midface 32. Railroad track configuration ears 32. Railroad track configuration ears 33. Strabismus 34. If yes, unilateral bilateral 35. Ptosis 36. If yes, unilateral bilateral 37. Epicanthal folds 38. If yes, unilateral bilateral 39. Anteverted nares 39. Anteverted nares 39. Anteverted nares 39. Anteverted nares 41. Philtrum 42. Long Philtrum 44. Smooth Philtrum 45. On the smooth Philtrum 45.		28 PFL < 10 th percentile (< -2SD preterm)		
31. Mandibular are cm				
33. Strabismus 34. If yes, unilateralbilateral		32.Railroad track configuration ears		
34. If yes, unilateralbilateral	·			
35. Ptosis 36. If yes, unilateral				
37. Epicanthal folds 38. If yes, unilateral bilateral				
38. If yes, unilateral bilateral \$\frac{1}{2}\$ \frac{1}{2}\$ \f		36. If yes, unilateralbilateral		
39. Anteverted nares 40. Philtrum: Length cm			Yesث	Ncڤ
40.Philtrum: Lengthcm		38. If yes, unilateral bilateral		
43. Lipometer Code و الله الله الله الله الله الله الله ال		39. Anteverted nares		
45. Vermilion Boarder: Lipometer Code 1 2 3 4 5 46. Thin Vermilion Border 47. Clinodactyly 5 th fingers 48. If yes, unilateral bilateral 49. Campodactyly 50. If yes, unilateral bilateral 51. Difficulty pronation/supination elbows 52. Contractures in other joints 53. If yes, specify 4Hips 4 Hips 4 Knees 6 Other 4 Hands: 54. Hockey stick crease 55. If yes, unilateral bilateral 56. Other altered palmar creases 57. If yes, unilateral bilateral bilateral 57. If yes, unilateral bilateral 57. If yes, unilateral bilateral bilateral bilateral 57. If yes, unilateral bilateral bilater				Ncڤ
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52. Contractures in other joints 53. If yes, specify Hips Knees Other Hands: 54. Hockey stick crease 55. If yes, unilateral bilateral 56. Other altered palmar creases 37es No Yes No Yes No The structures in other joints Figure 300 Strees No 57. If yes, unilateral bilateral 57. If yes, unilateral bilateral		•	, aVac	(and
53. If yes, specify نظ Hips نظ Knees د Knees نظ Other Hands: 54. Hockey stick crease نظ Yes نظ No 55. If yes, unilateral bilateral bilateral iNo 57. If yes, unilateral bilateral bilateral bilateral in the second of the sec		2 1		
No ك ك Yes ك No ك ك Yes ك No ك ك ك ك ك ك ك ك ك ك ك ك ك ك ك ك ك		ž.	- 103	<u></u>
Other Other S4. Hockey stick crease S5. If yes, unilateral bilateral bilateral S6. Other altered palmar creases S7. If yes, unilateral bilateral bilateral bilateral				
Hands:54. Hockey stick creaseن YesNo55. If yes, unilateral bilateralbilateralNo56. Other altered palmar creasesYesNo57. If yes, unilateral bilateral				
55. If yes, unilateral bilateral bilateral S6. Other altered palmar creases iNo iNo iNo iNo iNo iNo iNo iNo in incompared bilateral bilateral bilateral bilateral in incompared in	Hands:		Yes	No_
56. Other altered palmar creases		•		
57. If yes, unilateral bilateral			Yesڦ	Noڦ
·				
		58. If yes, specify ن Single cr	ease	

Heart: 59. Heart murmur 60. Heart defect 61. If yes, specify 61. If yes, specify 62. Neurological status: 63. If yes, specify if child is 64. Other comments: 65. Abnormalities Compatible with FAS: 1. □ Growth deficient: Weight and/or height ≤ 10 th percentile. (For premature children adjusted for prematurely up to 12 months of age) 2. □ Microcephaly: head circumference ≤ 10 th percentile. (For premature children adjusted for prematurely up to 12 months of age) 3. □ Structural abnormality: At least two of the following KEY FACIAL FEATURES: - Palpebral fissure length ≤ 10 th percentile - Smooth philtrum (score 4 or 5 at the Lipometer scale) - Thin Vermilion Border (score 4 or 5 at the Lipometer scale) 4. □ None 66. Does child have FAS? 1. □ Yes (defined below) • Box 3 and 1 in question 65 are checked OR • Box 3 and 2 in question 65 are checked OR • Box 3 and 2 in question 65 is checked OR • Box 1 only in question 65 is checked OR • Box 2 only in question 65 is checked OR • Box 4 only in question 65 is checked OR • Box 4 only in question 65 is checked OR • Box 4 only in question 65 is checked OR • Box 4 only in question 65 is checked OR • Box 4 only in question 65 is checked OR • Box 4 only in question 65 is checked OR • Box 4 only in question 65 is checked OR
Neurological status 62. Neurological problems Gives G
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(For premature children adjusted for prematurely up to 12 months of age) 2. 3. 3. 3. 3. 3. 4. 5. 5. 6. 6. 6. 6. 7. 7. 7. 8. 8. 8. 8. 9. 8. 8. 9. 9
(For premature children adjusted for prematurely up to 12 months of age) 3.
- Palpebral fissure length ≤ 10 th percentile - Smooth philtrum (score 4 or 5 at the Lipometer scale) - Thin Vermilion Border (score 4 or 5 at the Lipometer scale) 4. ♣ None 66. Does child have FAS? 1. ♣ Yes (defined below) ■ Box 3 and 1 in question 65 are checked OR ■ Box 3 and 2 in question 65 are checked OR ■ Box 3 and 2 and 1 in question 65 are checked 2. ♣ No (defined below) ■ Box 1 only in question 65 is checked OR ■ Box 2 only in question 65 is checked OR
 66. Does child have FAS? 1. Yes (defined below) Box 3 and 1 in question 65 are checked OR Box 3 and 2 in question 65 are checked OR Box 3 and 2 and 1 in question 65 are checked 2. No (defined below) Box 1 only in question 65 is checked OR Box 2 only in question 65 is checked OR
1. 4 Yes (defined below) • Box 3 and 1 in question 65 are checked OR • Box 3 and 2 in question 65 are checked OR • Box 3 and 2 and 1 in question 65 are checked 2. 4 No (defined below) • Box 1 only in question 65 is checked OR • Box 2 only in question 65 is checked OR
7 1
• Box 4 only in question 65 is checked
 Deferred (defined below) At least one key facial feature (which are listed in question 65, category 3) OR Microcephaly (question 65, box 2) AND growth deficiency (question 65, box 1) OR Microcephaly (question 65, box 2) AND at least one of the following additional features: railroad track configuration ears ptosis heart murmur decreased pronation/supination at elbows camptodactyly other joint contractures hockey stick crease other palmar crease abnormalities Growth deficiency (question 65, box 1) AND at least one of the additional features listed above
67. Photographs taken: عُ Yes الله No

68. Other diagnoses: 1.	3.