

Differential Diagnosis of _____ :

CNS	Psych	Eyes	Ears	Nose
Throat	Pulmonary	Cardiovascular	GI	GU
Musculo-Skeletal		<u>Metabolic</u>	<u>Allergic/</u> <u>Autoimmune</u>	<u>Toxins/</u> <u>Trauma</u>
<u>Congenital</u>	<u>Heme</u>	<u>Endo</u>	<u>Drugs</u>	

When to think, "Metabolic": Recurrent vomiting, poor feeding, failure to thrive, lethargy, developmental regression, unexplained bouts of dehydration and acidosis, afebrile seizures, unusual body odor or urine odor, young family member with unexplained death, hypoglycemia especially without ketosis, and organomegaly.

When to think, "Genetic" ("Congenital"): Any major dysmorphism, multiple minor dysmorphisms, or involvement of 2 or more organ systems. Remember: Development is a system (mental retardation, developmental delay, autism). Growth is a system (failure to thrive, short stature (esp. in girls), overgrowth, asymmetric growth).

Certain behavioral conditions are common (LD, ADD, and behavior problems). These can also be secondary to "genetic" conditions. When faced with a child with one of these behavioral conditions, when should you think "genetic"? Think "genetic" if you have an atypical clinical course. For example, if the child's ADD or behavior problem is very severe consider other possibilities. If the child does not respond to good therapy (a good family who are doing everything right yet there is no improvement in the behavior, think "genetic". Additionally, if you have any of these behavioral conditions plus any dysmorphisms, think "genetic".