G. Genetic Medical Evaluation

An estimated 60% of prelingual hearing loss is due to genetic causes and more than half of these cases are nonsyndromic. Appropriate genetic consultation serves to confirm diagnosis, identify additional medical risks and communicate genetic risks. The following should be included in the medical evaluation conducted by a Medical Specialist:

- History
  - Pregnancy
  - Family Pedigree

- Developmental
  - Physical Examination
    - General pediatric examination
    - Careful dysmorphologic examination
    - Neurologic/developmental evaluation

- Diagnostic Tests
  - Hearing tests on first-degree relatives (parents and siblings)
  - Ophthalmologic examination by six (6) months of age
  - TORCH titers or CMG IgG and IgM if less than six (6) months of age
  - All other laboratory tests depend upon clinical evaluation and history but may include the following:
    - Chromosomes if dysmorphic
    - EKG
    - Skeletal survey if there is short stature or disproportional growth
    - Evaluation of other systems: renal, cardiac, skin
    - CT or MRI of brain if neurologically abnormal
    - Specialized genetic studies, e.g., molecular, gene testing