

## 3.2 Minor Anomalies for Exclusion

*For EUROCAT use from 2005*

Cases with only minor anomalies and unspecified anomalies for exclusion should not be transmitted to EUROCAT. Minor anomalies should be described in text, coded and transmitted to EUROCAT when they are in association with major anomalies. Where a case with one or more minor anomalies only is transmitted to EUROCAT, it will be excluded by computer if the minor anomalies have specific codes which allow recognition. Some minor anomalies do not however have specific codes and cases with such isolated anomalies must always be recognised and excluded at local level on the basis of the text description.

“Minor” anomalies are excluded, when isolated, because they have lesser medical, functional or cosmetic consequences (although they may be indicators of other problems) and experience shows that their definition and diagnosis and reporting varies considerably. At the present time, it is not useful to collect data at a European level on these anomalies. We also exclude anomalies which are not always truly congenital in origin, sometimes associated with immaturity at birth. In addition, we exclude poorly specified conditions and recommend that for any such cases more specific information be sought from medical records.

For allocation of cases to EUROCAT subgroups, only major malformations will be considered (codes for minor anomalies will be excluded). If a registry use major ICD10 codes to describe a minor anomaly or a syndrome feature, the prevalence will be higher than the true prevalence in the registry area and data will be less comparable to other regions. Use of major ICD10 codes for minor anomalies will also have a negative impact on the classification of cases by the multiple flowchart and the surveillance of multiple congenital anomalies.

Please note that the list is not exhaustive and not all syndrome features are mentioned

	<b>Specified ICD10-BPA – if present</b>
<b>Head</b>	
Aberrant scalp hair patterning	
Bony occipital spur	
Brachycephaly	
Compression facies	Q671
Depressions in skull	Q6740
Dolichocephaly	Q672
Dysmorphic face	Q189
Facial asymmetry	Q670
Flat occiput	
Frontal bossing / wide forehead	
Plagiocephaly – head asymmetry	Q673
Macrocephalus	Q753
Metopic ridge	
Metopic suture synostosis	
Other congenital deformities of skull, face and jaw	Q674
Third fontanel	

<b>Eyes</b>	
Blue sclera	Q135
Congenital ectropion	Q101
Congenital entropion	Q102
Crocodile tears	Q0782
Downward slanting palpebral fissures	
Dystopia canthorum	
Epicanthic folds	
Epicanthus inversus	
Exophthalmos	
Hypertelorism	Q752
Hypotelorism	
Other congenital malformations of eyelid	Q103
Short palpebral fissures	
Stenosis or stricture of lacrimal duct	Q105
Synophrys	Q1880
Upward slanting palpebral fissures	
<b>Ears</b>	
Absent tragus	
Accessory auricle, preauricular appendage, tag or lobule	Q170
Asymmetric size	Q173
Auricular pit	
Bat ear, prominent ear	Q175
Double lobule	Q170
Lack of helical fold	Q173
Low set ears	Q174
Macrotia	Q171
Microtia	Q172
Narrow external auditory meatus	
Posterior angulation	Q173
Preauricular sinus or cyst	Q181
Primitive shape	Q173
Protuberant ears	Q173
Unspecified and minor malformation of ear	Q179
<b>Nose</b>	
Anomalies of philtrum	
Broad nasal root, anomaly of nasal root	
Deviation of nasal septum	Q6741
Dysmorphic nose	Q189
Notched alar	
Small nares	
<b>Oral regions</b>	
Aberrant frenula	
Alveolar crest	
Borderline small mandible/ minor micrognathia	
Disturbances in tooth eruption	
Enamel hypoplasia	

Glossoptosis	
High arched palate	Q3850
Macrocheilia	Q186
Macroglossia	Q382
Macrostomia	Q184
Malformed teeth	
Microcheilia	Q187
Microstomia	Q185
Neonatal teeth	
Ranula	
Retrognathia	Q674
Thin lips	
Tongue tie or cyst of tongue	Q381
<b>Neck</b>	
Congenital malformation of face and neck, unspecified	Q189
Mild webbed neck	
Other branchial cleft malformations	Q182
Preauricular sinus or cyst	Q181
Sinus, fistula or cyst of branchial cleft	Q180
Torticollis	Q680
<b>Hands</b>	
Accessory carpal bones	Q7400
Arachnodactyly	
Clinodactyly (5 <sup>th</sup> finger)	Q6810
Duplication of thumbnail	
Enlarged or hypertrophic nails	Q845
Overlapping fingers	
Short fingers (4. 5. th finger)	
Single/abnormal palmar crease	Q8280
Small fingers	
Unusual dermatoglyphics	
<b>Feet -Limb</b>	
Clicking hip, subluxation or unstable hip	Q653-Q656
Clubfoot of postural origin - other cong deformities of feet	Q668
Congenital deformity of feet, unspecified	Q669
Congenital pes planus	Q665
Enlarged or hypertrophic nails	Q845
Gap between toes (1st-2nd)	
Hallux varus – other congenital varus deformities of feet	Q663
Metatarsus varus – other congenital valgus deformities of feet	Q666
Metatarsus varus or metatarsus adductus	Q662
Overlapping toes	
Pes cavus	Q667
Prominent calcaneus	
Recessed toes (4th, 5th)	
Short great toe	
Syndactyly (2nd-3rd toes)	

Talipes or pes calcaneovalgus	Q664
<b>Skin</b>	
Accessory nipples	Q833
Angioma	
Cafe-au-lait spot	
Depigmented spot	
Hemangioma if no treatment is required	
Heterochromia of hair	
Hypoplasia of toe nails	
Lymphangioma	
Mongoloid spot (whites)	Q8252
Nevus flammeus	Q8250
Persistent lanugo	
Pigmented naevus – congenital non-neoplastic naevus	Q825
Strawberry naevus	Q8251
Unusual placement of nipples/ wide spaced nipples	
<b>Skeletal</b>	
Abortive 12.th rib	
Absence of rib	Q7660
Accessory rib	Q7662
Cervical rib	Q765
Congenital bowing of femur	Q683
Congenital bowing of fibula and tibia	Q684
Congenital bowing of long bones of leg, unspecified	Q685
Congenital bowing of upper limb	
Congenital deformity of spine	Q675
Congenital lordosis, postural	Q7643
Cubitus valgus	
Depressed sternum	Q676
Fused rib, single	
Genu recurvatum	Q6821
Genua valgum	
Genua varum	
Prominent sternum	Q677
Sacral dimple	
Shieldlike chest, other congenital deformities of chest	Q678
Spina bifida occulta	Q760
Sternum bifidum	Q7671
<b>Brain</b>	
Anomalies of septum pellucidum	
Arachnoid cyst	
Choroid plexus cyst	
Periventricular leukomalacia	
Single congenital cerebral cyst	Q0461
<b>Cardiovascular</b>	
Absence or hypoplasia of umbilical artery, single umbilical artery	Q270
Functional or unspecified cardiac murmur	

Patent ductus arteriosus if GA < 37 weeks	Q250 if GA <37 weeks
Patent or persistent foramen ovale	Q2111
Peripheral pulmonary artery stenosis	Q256 if GA < 37 weeks
Persistent left superior vena cava	Q261
Persistent right aortic arch	Q2541
<b>Pulmonary</b>	
Accessory lobe of lung	Q331
Azygos lobe of lung	Q3310
Congenital laryngeal stridor	Q314
Hyperplasia of thymus	
Laryngomalacia	Q314, Q315
Pleural effusion	
Thymus involution	
Tracheomalacia	Q320
Vocal cord palsy	
<b>Gastro-intestinal</b>	
Abdominal cyst	
Anterior anus	
Congenital cholestasis	
Congenital mesenteric cyst	
Diastasis recti	
Functional gastro-intestinal disorders	Q4021, Q4320, Q4381, Q4382
Hiatus hernia	Q401
Inguinal hernia	
Meckel's diverticulum	Q430
Plica of anus	
Pyloric stenosis	Q400
Transient choledochal cyst	
Umbilical hernia	
<b>Renal</b>	
Hydronephrosis with a pelvis dilatation less than 10 mm	
Hyperplastic and giant kidney	Q633
Single renal cyst	Q610
Vesico-ureteral-renal reflux	Q627
<b>External genitals</b>	
Bifid scrotum	Q5521
Congenital malformation of vulva	Q527
Curvature of penis	
Cysts of vulva	
Deficient or hooded foreskin	
Developmental ovarian cyst	
Enlarged clitoris	
Fusion of labia	Q525
Hydrocele of testis	
Hymen imperforatum	Q523
Hypertrophia of hymen	
Hypoplasia of penis	

Phymosis	
Prominent labia minora	
Retractile testis	Q5520
Transient ovarian cyst	
Undescended testicle	Q53
Unspecified ectopic testis	
Vaginal skin tag	
<b>Other</b>	
Congenital malformation, unspecified	Q899
<b>Chromosomal</b>	
Balanced translocations or inversions in normal individuals	Q950, Q951

### **“Non-congenital” anomalies**

Pyloric stenosis – there is controversy about the congenital nature of the majority of cases.

Patent ductus arteriosus in babies <37 weeks

Hydrocephaly where a result of preterm birth rather than congenital: all cases among preterm births should be thoroughly checked before registration.

### **Poorly specified anomalies**

Functional or unspecified cardiac murmur

Laryngomalacia and tracheomalacia

Functional gastro-intestinal disorders

Undescended testicle. Registries may choose to record this locally if they can follow-up all babies to ascertain whether the testis descends normally.

Unspecified ectopic testis

Vesico-ureteral reflux. Registries should record and transmit to EUROCAT the underlying anomaly, if present.

Clicking hip

Clubfoot where there is no further specification of whether malformation or postural origin

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