

CRF – Congenital Anomaly Review		
No	Question	Response Options
001	Enter date that MATRIX-007 Congenital Anomaly Review was completed:	<p>— — / — — / — — — —</p> <p>D D / M M / Y Y Y Y</p>
002	What type of congenital anomaly:	<p>Select all that apply:</p> <p>1 = Cleft lip and/or palate</p> <p>2 = Neural tube defects</p> <p>3 = Hydrocephalus</p> <p>4 = Cardiovascular</p> <p>5 = Polydactyly</p> <p>6 = Musculoskeletal including clubfoot</p> <p>7 = Umbilical hernia</p> <p>8 = Esophageal, gastrointestinal, anorectal</p> <p>9 = Genitourinary</p> <p>10 = Trisomies</p> <p>11 = Natal tooth</p> <p>12 = Other specify in 003</p>
003	Specify other:	Respond only if [002 = 12]
004	Name of congenital anomaly	
005	What is the ICD-10 code	
006	Is this congenital anomaly major or minor	<p>0 = Minor</p> <p>1 = Major</p> <p>2 = Unknown</p>
007	How certain is this diagnosis?	<p>0 = Definite</p> <p>1 = Probable</p>

		2 = Possible 3 = Uncertain
008	CRF Notes from MATRIX-007 CA review.	