



Congenital Anomalies

SUPPORT YUKON (CASY)

Approximately 420 babies are born to Yukoners every year. The majority are born healthy; however, about 3-5% are born with a birth defect. Over half of birth defects have no known cause.

Why does CASY exist?

CASY collects information on birth defects to assist in understanding them and improving maternal and child public health programs. A subset of deidentified information is shared with the Canadian Congenital Anomalies Surveillance System to help understand birth defects Canada wide.

Who to report/refer to CASY?

All children with a diagnosis or strong suspicion of a congenital anomaly up to 5 years of age should be reported to CASY. When a termination of pregnancy is due to a congenital anomaly, the anomaly should be reported.

If and when a genetic counselling appointment is seen as helpful, parents can be referred to the CASY Coordinator, a certified genetic counsellor.

How to report/refer to CASY and why?

When a congenital anomaly is identified in a child or fetus, they can be reported and/or referred using the CASY Reporting/Referral form available at the coordinates below, on the following website (www.hss.gov.yk.ca/casy.php) or on PLEXIA. Confirmatory documentation such as a discharge summary or consultation reports, should accompany the reporting form. They can be sent by fax or mail to the contact information below. Unless documentation is apparent, do not assume a report has already been sent. The coordinator will contact you for further information if necessary.

Note: Reporting of birth defects is done indirectly (without consent) to the CASY Coordinator under the authority of the CMOH under the *Public Health and Safety Act* for the purposes of public health surveillance. CASY is governed under the *Health Information Privacy and Management Act (HIPMA)*.

When a referral is made, the CASY Coordinator, a genetic counsellor, will discuss the diagnosis, family history, methods to reduce the risk of congenital anomalies, support services, etc with the family.

Who should refer?

Physicians / Midwives / Nurses / Any health care provider.

Summary of anomalies to refer for

- Congenital anomalies that are confirmed postnatally up to age 5
- Congenital anomalies identified/strongly suspected in any terminated pregnancy or miscarriage
- Chromosome abnormalities
- Prenatally detected club foot, ventriculomegaly hydronephrosis ONLY if confirmed postnatally
- Metabolic disorders
- Confirmed FASD and autism (at any age)

Summary of what should NOT be reported

- Prenatal soft markers for aneuploidy (nuchal thickening, echogenic foci, echogenic bowel, choroid plexus cysts, pyelectasis)

CASY Coordinator

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**Yukon**



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