# **CLINICAL ASSESSMENT AND MANAGEMENT** of Congenital Cytomegalovirus (cCMV) Flow Sheet

If Positive Saliva CMV PCR\*:

• Send Urine CMV PCR before 21 days of age (Qualitative PCR will suffice)

• Consider consulting Infectious Disease Specialist \*Saliva Loop-Mediated Isothermal Amplification (LAMP) is also an acceptable test

## If Positive Urine CMV PCR:

PERFORM ALL THE FOLLOWING TESTS AND REFERRALS BEFORE 30 DAYS OF AGE TO EVALUATE FURTHER FOR EVIDENCE/EXTENT OF CCMV DISEASE:

- CBC with differential
- Liver function panel with T/D bilirubin
- Head Ultrasound (HUS)
- Pediatric Ophthalmology for dilated retinal exam within 3 wks of life

Consider ID Consultation

Otolaryngology

 Pediatric Audiology for Diagnostic Auditory Brainstem (ABR) Evaluation (hearing test)

#### ASYMPTOMATIC if <u>all</u> of the following:

- Normal ophthalmology exam
- Normal ABR
- Normal HUS
- Normal platelet count
- No hepatosplenomegaly
- Normal liver function

#### Refer to Audiology for routine diagnostic audiological testing by 3 months of age.

Recommended Hearing Testing Intervals:

- Every 3 months until 12 months of age.
- Every 6 months until 3 years of age.
- Every year thereafter.

## Isolated Sensorineural Hearing Loss

COMPLETE THE FOLLOWING BEFORE 30 DAYS OF AGE.

Refer to Infectious Disease

### Long Term Monitoring:

- Routine vision screening
- Monitor speech, language, and other developmental milestones.
- Referral to DPH for enrollment in Babies Can't Wait

## SYMPTOMATIC if ≥ 1 of the following:

- Thrombocytopenia
- Hepatomegaly
- Splenomegaly
- Intrauterine Growth Restriction (IUGR) or Small for Gestational Age (SGA)
- Microcephaly
- Abnormal HUS
- Hepatitis
- Sensorineural Hearing Loss

#### For more information visit www.dph.georgia.gov/EHDI/ccmv

#### **References:**

Park AH. Outcomes from an Expand-ed Targeted Early Cytomegalovirus Testing Program. J Ped Infect Dis. (2020) 15(04): 189-194 DOI: 10.1055/s-0040-1709159.



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