

Management Guidelines – 9 to 13 years

<u>WHO</u>	<u>WHAT</u>
GP	<ul style="list-style-type: none"> • Listen to parents' concerns about their child • Listen to child's concerns if they are able to express them • Manage referrals to other specialists as appropriate • Consider whether there is any evidence of seizure activity which warrants further investigation • Refer family to AusDoCC for support
Paediatrician/ Developmental Paediatrician	<ul style="list-style-type: none"> • Monitor development and refer for further developmental assessments as necessary • Consider whether other diagnoses are appropriate such as autism, ADHD • Refer child for appropriate therapeutic interventions • Consider whether there is any evidence of seizure activity which warrants further investigation • Refer family to AusDoCC for support
Paediatric Neurologist	<ul style="list-style-type: none"> • Manage neurological issues such as epilepsy • Refer family to AusDoCC for support
Geneticist	<ul style="list-style-type: none"> • Consider whether there is an underlying genetic cause for the child's ACC • Consider whether there are any familial links which justify review of other family members • Undertake microarray, targeted gene testing and WES • Refer family to AusDoCC for support
Other specialists Endocrinologist, Urologist	<ul style="list-style-type: none"> • Manage related symptoms such as growth issues, incontinence
Ophthalmologist	<ul style="list-style-type: none"> • Is there evidence of any vision issues such as cortical visual impairment, nystagmus, strabismus etc
Occupational Therapist	<ul style="list-style-type: none"> • Provide therapeutic input to address fine motor skill difficulties, life skills such as toileting, feeding and dressing and sensory symptoms • Consider other related symptoms such as sensory processing disorder • Consider whether child would benefit from equipment such as bath seat, toilet frames and steps, specialised beds, any aids to assist with sensory needs • Refer family to AusDoCC for support

Speech Therapist	<ul style="list-style-type: none"> • Diagnose and treat speech delays and difficulties • Consider whether child would benefit from alternative assistive communication aids • Refer family to AusDoCC for support
Physiotherapist	<ul style="list-style-type: none"> • Provide therapeutic input to address gross motor function including symptoms of high or low muscle tone • Consider whether child would benefit from assistive equipment such as seating support, standing frame, walker, orthotics, wheelchair or other mobility aids • Refer family to AusDoCC for support
Orthotist	<ul style="list-style-type: none"> • Prescribe and manage any orthotic supports needed to assist walking and other motor function
Behavioural Psychologist	<ul style="list-style-type: none"> • Provide strategies for child and family in the management of behavioural problems or anxiety

Educational Management Guidelines – 9 to 13 years

<u>WHO</u>	<u>WHAT</u>
School Principal	<ul style="list-style-type: none"> • Assistance required for learning and behavioural matters in school
Local Area School Counsellor	<ul style="list-style-type: none"> • Coordinate the funding required • IQ testing • Assist the teachers in lesson planning for the child

Compiled by AusDoCC members consisting of adults with a DCC, parents, partners and friends. Reviewed by AusDoCC advisors including practitioners, researchers, clinicians, educators and allied health professionals.

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