

**Congenital Hypothyroidism (CH) Three-year Follow-up Project
Region 4 Genetics Collaborative
Logic Model**

Assumptions

Quick diagnosis and treatment is essential to prevent permanent cognitive and physical delays

Recommended standard of care is to follow-up CH cases until at least age three in order to prevent delays

Some children have transient CH and no longer need treatment after age three

Transient CH should be determined by a TSH challenge prior to discontinuing treatment

Based on Michigan data, treatment is being discontinued for children prior to age three without TSH challenge

Data from other states are needed in order to confirm Michigan findings

Education of parents and primary care providers is needed to decrease the number of children no longer in treatment without being re-evaluated by TSH challenge

Strategies

Reconvene the Region 4 CH Workgroup

Recruit an endocrinologist and a state follow-up representative to co-chair the group

Collect and analyze data from additional Region 4 states

Prepare CH follow-up guidelines to be used by state follow-up programs

Create educational materials for families and primary care providers about the importance of continuing treatment until a child is re-evaluated by TSH challenge

Disseminate findings of state data

Disseminate educational materials to families and primary care providers

Outcomes

Increase the number of state follow-up programs instituting three-year follow-up guidelines for children who are diagnosed with CH

Increase the knowledge of families and primary care providers about the importance of continuing treatment until a child is re-evaluated by TSH challenge

Increase the number of children not confirmed to have permanent CH who are re-evaluated by TSH challenge at age three

Decrease the number of children whose treatment is discontinued without TSH challenge