

Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot

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2709 Mondovi Road
Eau Claire, WI 54701 USA
800.830.1416
+1.715.830.2040
www.realityworks.com

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About the Author



Krista Wenz has been a licensed paramedic for 34 years. She holds a bachelor's degree in fire safety Management and worked for 23 years as a firefighter-paramedic in a large, metropolitan fire department in California.

Krista has extensive knowledge in emergency medicine, including experience as an adjunct instructor at community and private colleges teaching EMT and paramedic students. She has additional experience working as a mental health technician in a psychiatric ward and emergency crises; drill instructor and field training officer for multiple agencies; CPR, First-Aid, PALS, BLS, and ALS instructor; and EMS captain for a rural fire department.

Now retired from the fire service, Krista works as an EMS educator to pass on her knowledge and expertise to those interested in entering the healthcare field.

Introduction

The Tetralogy of Fallot Heart Defect Model is an instructional aid created to help increase awareness and understanding of babies born with this common heart defect. This five-piece congenital heart model describes the four defects associated with Tetralogy of Fallot.

This curriculum introduces the Tetralogy of Fallot Heart Defect Model and presents documented information about the causes and risk factors of this defect, signs and symptoms associated with it, and its common diagnosis and treatment. The curriculum also provides activities and discussions designed to educate participants and communities about the challenges and opportunities for individuals with this congenital heart condition.

Curriculum Structure

The *Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Curriculum* consists of the following lessons. Approximate lesson times are included.

Lesson	Title	Approximate Time
Two	Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot	60 minutes
	Total	1 hour

Lesson Structure

Each lesson begins with a Lesson Overview, Lesson Objectives, and a Lesson at a Glance table which lists the lesson activities, materials required, suggested preparation steps, and approximate class time.

Lesson Sections

The actual lesson follows the overview, which will contain some of the sections described below. Most lessons are designed to be completed within 45-60 minutes.

FOCUS

Every lesson begins with a FOCUS activity intended to capture participants' attention. This may be in the form of a small or large class discussion, a game, a review of previous lesson information, or a demonstration. During this activity, participants are introduced to the topic of the lesson.

LEARN

The LEARN activity in each lesson varies in its presentation mode. It may be a slide presentation, group activity, or demonstration.

REVIEW

The majority of lessons end with a REVIEW activity intended to briefly review the lesson's key messages or main points.

Lesson Two – Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot

Lesson Overview

In this lesson, participants will learn the causes, risk factors, diagnosis, treatment, and statistics associated with a common congenital heart defect, Tetralogy of Fallot. Participants will be introduced to the RealCare™ Tetralogy of Fallot Heart Defect Model and see the four common heart defects associated with this condition.

Lesson Objectives

After completing this lesson, participants will:

- Gain awareness of the causes and risk factors surrounding Tetralogy of Fallot
- Document their initial knowledge about this congenital heart defect before the start of the lesson
- Understand the diagnosis and treatment of Tetralogy of Fallot
- List key national and international statistics surrounding this congenital heart defect
- Identify short- and long-term effects on infants born with Tetralogy of Fallot

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• <i>Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Pre-Test</i> • <i>Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Pre-Test – Answer Key</i>	1. Print/photocopy <i>Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Pre-Test</i> (one per participant)	5-10 minutes
LEARN	• <i>Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot slide presentation</i> • <i>Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Fact Sheet</i> • <i>Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Fact Sheet – Answer Key</i> • <i>Tetralogy of Fallot Heart Defect Model</i>	1. Prepare the <i>Understanding Congenital Heart Defects in Infants - Tetralogy of Fallot</i> slide presentation for viewing 2. Print/photocopy <i>Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Fact Sheet</i> (one per participant)	35-45 minutes
REVIEW	• <i>Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Post-test</i> • <i>Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Post-Test – Answer Key</i>	1. Print/photocopy <i>Understanding Congenital Heart Defects in Infants—Tetralogy of Fallot Post-Test</i> (one per participant)	5-10 minutes

Lesson Two – Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot

FOCUS: Pre-Test

5-10 minutes

This activity measures participants' knowledge about a common congenital heart defect before the start of the lesson. Information from the pre-test can be compared with information from the post-test at the end of the lesson, to measure improvement in participant knowledge.

Materials:

- *Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Pre-Test*
- *Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Pre-Test – Answer Key*

Facilitation Steps:

1. Distribute the *Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Pre-Test* to participants and give them 5-10 minutes to complete it.

Name: _____

Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Pre-Test

Directions: The following questions will ask you about your knowledge of a congenital heart defect called Tetralogy of Fallot. Circle the best answer(s) or write your response in the space provided.

1. Tetralogy means a combination of _____ related problems.
 - a. three
 - b. two
 - c. five
 - d. four
2. Tetralogy of Fallot are defects in which parts of the body?
 - a. The blood vessels and heart
 - b. The lungs and heart
 - c. The blood vessels and lungs
 - d. The lungs and heart
3. Approximately 1 in every 3,000 infants is born with Tetralogy of Fallot around the world each year.
 - a. True
 - b. False
4. What percentage of newborns have a congenital heart defect?
 - a. 15%
 - b. 1%
 - c. 6%
 - d. 25%
5. Which of the following is a common physical characteristic of an infant with Tetralogy of Fallot?
 - a. Round, circular eyes
 - b. Extra fingers or toes
 - c. Missing part of the brain
 - d. An abnormal, rounded shape of the nailbed
6. Which of the following is a risk factor of an infant being born with Tetralogy of Fallot?
 - a. Bacterial illness during pregnancy

Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Curriculum

- b. Mother older than age 30
 - c. The presence of Down Syndrome in the baby
 - d. The mother consuming an organic diet during pregnancy
7. Which of the following is used to diagnose an infant with Tetralogy of Fallot while in the womb?
- a. Fetal electroencephalography
 - b. MRI
 - c. CAT scan
 - d. Fetal echocardiogram
8. What percentage of infants born with a congenital heart defect has Tetralogy of Fallot?
- a. 10%
 - b. 2%
 - c. 20%
 - d. .01%
9. If not detected in utero, Tetralogy of Fallot can be detected weeks or months after birth.
- a. True
 - b. False
10. Sometimes, Tetralogy of Fallot is never diagnosed.
- a. True
 - b. False
11. What type of doctor treats and monitors patients with Tetralogy of Fallot?
- a. Pulmonologist
 - b. General practitioner
 - c. Cardiologist
 - d. Pediatrician
12. What are abnormal heart rhythms called?
- a. Supraventricular events
 - b. Arrhythmias
 - c. Cardiac tamponade
 - d. Cardiac failure

Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Pre-Test – Answer Key

1. Tetralogy means a combination of _____ related problems.
 - a. three
 - b. five
 - c. two
 - d. four**
2. Tetralogy of Fallot are defects in which parts of the body?
 - a. The blood vessels and heart**
 - b. The lungs and heart
 - c. The blood vessels and lungs
 - d. The lungs and heart
3. Approximately 1 in every 3,000 infants is born with Tetralogy of Fallot around the world each year.
 - a. True**
 - b. False
4. What percentage of newborns have a congenital heart defect?
 - a. 15%
 - b. 1%**
 - c. 6%
 - d. 25%
5. Which of the following is a common physical characteristic of an infant with Tetralogy of Fallot?
 - a. Round, circular eyes
 - b. Extra fingers or toes
 - c. Missing part of the brain
 - d. An abnormal, rounded shape of the nailbed**
6. Which of the following is a risk factor of an infant being born with Tetralogy of Fallot?
 - a. Bacterial illness during pregnancy
 - b. Mother older than age 30
 - c. The presence of Down syndrome in the baby**
 - d. The mother consuming an organic diet during pregnancy

7. Which of the following is used to diagnose an infant with Tetralogy of Fallot while in the womb?
- a. Fetal electroencephalography
 - b. MRI
 - c. CAT scan
 - d. **Fetal echocardiogram**
8. What percentage of infants born with a congenital heart defect has Tetralogy of Fallot?
- a. **10%**
 - b. 2%
 - c. 20%
 - d. .01%
9. If not detected in utero, Tetralogy of Fallot can be detected weeks or months after birth.
- a. **True**
 - b. False
10. Sometimes, Tetralogy of Fallot is never diagnosed.
- a. True
 - b. **False**
11. What is the name of the doctor used to treat and monitor patients with Tetralogy of Fallot?
- a. Pulmonologist
 - b. General practitioner
 - c. **Cardiologist**
 - d. Pediatrician
12. What are abnormal heart rhythms called?
- a. Supraventricular events
 - b. **Arrhythmias**
 - c. Cardiac tamponade
 - d. Cardiac failure

Lesson Two – Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot

LEARN: Understanding Congenital Heart Defects in Infants—Tetralogy of Fallot Slide Presentation

35-45 minutes

Purpose:

In this discussion, the instructor defines the congenital heart defect Tetralogy of Fallot, the causes and risk factors, and diagnosis and treatment for this condition.

Materials:

- *Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot* slide presentation
- *Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Fact Sheet*
- *Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Fact Sheet – Answer Key*
- Tetralogy of Fallot Heart Defect Model

Facilitation Steps:

1. Hold the Tetralogy of Fallot Heart Defect Model in your hands and show it to the class. Have participants pass the model to each other and instruct them to carefully observe the heart's physical defects.
2. During slides six through nine, have participants pass the model around to inspect each defect that is described on the slides.
3. Distribute the *Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Fact Sheet*. Instruct participants to complete it while you share the *Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot* slide presentation. An answer key is provided for the instructor.

Slide 1: Introductory slide.

Slide 2: What Are Congenital Heart Defects?

Congenital is defined as "present at birth." Congenital heart defects (CHDs) affect the structure of an infant's heart and how it functions. CHDs affect the blood flow through the heart and to the rest of the body and range from mild to severe.

1 in 4 infants born with a heart defect has a critical CHD. Critical CHDs require surgery or other procedures in the first year of life.

Slide 3: Types of CHDs

- Atrioventricular Septal Defect
- Atrial Septal Defect
- Ebstein Anomaly
- Interrupted Aortic Arch
- Tricuspid Atresia
- Single Ventricle
- Pulmonary Atresia
- Hypoplastic Left Heart Syndrome
- Tetralogy of Fallot (pronounced teh-traa-luh-jee of fuh-low)

This lesson will focus on Tetralogy of Fallot.

Slide 4: What Is Tetralogy of Fallot?

"Tetralogy" means a combination of four related problems.

Tetralogy of Fallot (TOF) is a critical congenital heart defect made up of four defects of the blood vessels and heart.

Slide 5: Ventricular Septal Defect (VSD)

Ventricular septal defect happens when there is a hole in the septum (wall) that separates the two

lower heart chambers, called ventricles. The septum acts as a barrier that prevents blood from both sides of the heart from mixing.

When an infant has a VSD, the high-oxygen blood from the left ventricle and the low-oxygen blood from the right ventricle mix, causing too much or too little blood flow into the lungs.

Slide 6: Pulmonary Stenosis

Pulmonary stenosis is a thickening or narrowing of the valve that connects the right ventricle to the pulmonary artery, the blood vessel that carries low-oxygen blood from the heart to the lungs.

Due to the narrowing of the pulmonary valve, the heart must work harder to pump blood to the lungs. In some cases, the pulmonary valve is completely blocked, called **pulmonary atresia**.

Slide 7: Overriding Aorta

In a healthy heart, the artery that carries high-oxygen blood to the body (aorta) is above the left ventricle.

An overriding aorta means the aorta is out of place and rides above the right and left ventricles, allowing some blood that is low in oxygen to flow into the aorta and out to the rest of the body.

Usually, the pulmonary artery takes low-oxygen blood to the lungs, where it picks up oxygen.

Slide 8: Right Ventricular Hypertrophy

Right ventricular hypertrophy (pronounced hi-PER-truh-fee) is a thickening of the muscular wall of the right ventricle.

The thickened wall can block the flow of blood through the pulmonary valve, which allows blood from the heart to flow into the lungs.

Slide 9: Signs and symptoms of TOF

- Cyanosis (bluish skin)
- Poor weight gain
- Fainting
- Irritability
- Prolonged crying
- Shortness of breath
- Heart murmur
- Tiring easily during exercise or play

- An abnormal, rounded shape of the nail bed (clubbing)

****Instructor's note:** Ask participants why an infant with TOF will present these signs and symptoms. Correct answers are lack of oxygen in the blood and decreased blood flow to the lungs and body.

Slide 10: Causes and Risk Factors

The cause of Tetralogy of Fallot in infants is unknown. Some studies show this condition can be caused by:

- Genetic or chromosomal factors
- Environmental factors
- What the mother consumes during pregnancy

Risk factors of an infant having Tetralogy of Fallot include:

- Drinking during pregnancy
- Mother older than age 40
- Poor nutrition during pregnancy
- The presence of Down syndrome in the baby
- Viral illness during pregnancy

Slide 11: Statistics

Around **1 in 3,000** babies are born with TOF around the world each year.

- More common in males than females
- 1% of newborns have a congenital heart defect
- 10% of those newborns have TOF
- Detected weeks or months after birth if not detected in utero (in the womb)

Slide 12: Diagnosis

TOF may be diagnosed during pregnancy using a fetal echocardiogram.

If not diagnosed during pregnancy, it will be detected later in life when the child has signs and symptoms.

Slide 13: Treatment of TOF

TOF can be treated by surgery soon after

birth. The child will be regularly monitored by a heart doctor (cardiologist).

As adults, they might need more surgeries or medical care for other health issues that develop with age.

Slide 14: Possible Complications

If left untreated, TOF can cause:

- Blood clots
- Abnormal heart rhythms (arrhythmias)
- Heart failure
- Infection in the heart
- Death

Slide 15: Living with TOF

Here are some common issues to expect when living with TOF:

- The cardiologist may give the infant antibiotics to prevent infections before leaving the hospital. Children with TOF may also be more prone to infections and need antibiotics before other surgeries or dental exams.
- After surgeries, children will become tired easily and sleep more often. Over time, children will be able to become more active.
- Some children with TOF have issues with growing normally.
- Some children with TOF develop learning disabilities.
- Many children with TOF will need further surgeries throughout their lives and as an adult.

****Instructor's note:** This concludes the slide presentation. If time allows, you can go over the questions on the fact sheet and provide the answers to

participants. If not, go straight to the post-test.

Name: _____

Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Fact Sheet

Complete the following note page as the slide presentation is shared.

1. Critical CHDs require surgery in the first _____ of life.
2. Tetralogy is a combination of _____ heart defects.
3. What does VSD stand for?
4. When the pulmonary valve is completely blocked, it is called _____.
5. An _____ aorta is one of the defects associated with Tetralogy of Fallot.
6. Right ventricular _____ is a thickening of the muscular wall of the right ventricle.
7. The _____ valve allows blood to flow from the heart into the lungs.
8. An abnormal, rounded shape of the nail bed is known as _____.
9. What is the bluish tint to the skin called? _____
10. Genetic or _____ factors are possible causes of Tetralogy of Fallot.
11. Mothers older than _____ are at an increased risk of having an infant with Tetralogy of Fallot.
12. The presence of _____ in the baby is a risk factor of Tetralogy of Fallot.
13. Is Tetralogy of Fallot more common in males or females? _____
14. What is the name of the diagnostic tool used to detect Tetralogy of Fallot during pregnancy?
15. What is the treatment for Tetralogy of Fallot? _____
16. If left untreated, Tetralogy of Fallot can cause death. True or False? _____

Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Fact Sheet – Answer Key

1. Critical CHDs require surgery in the first **year** of life.
2. Tetralogy is a combination of **four** heart defects.
3. What does VSD stand for? **Ventricular Septal Defect**
4. When the pulmonary valve is completely blocked, it is called **pulmonary atresia**.
5. An **overriding** aorta is one of the defects associated with Tetralogy of Fallot.
6. Right ventricular **hypertrophy** is a thickening of the muscular wall of the right ventricle.
7. The **pulmonary** valve allows blood to flow from the heart into the lungs.
8. An abnormal, rounded shape of the nail bed is known as **clubbing**.
9. What is the bluish tint to the skin called? **Cyanosis**
10. Genetic or **chromosomal** factors are possible causes of Tetralogy of Fallot.
11. Mothers older than **40** are at an increased risk of having an infant with Tetralogy of Fallot.
12. The presence of **Down Syndrome** in the baby is a risk factor of Tetralogy of Fallot.
13. Is Tetralogy of Fallot more common in males or females? **Males**
14. What is the name of the diagnostic tool used to detect Tetralogy of Fallot during pregnancy?
Fetal echocardiogram
15. What is the treatment for Tetralogy of Fallot? **Surgery**
16. If left untreated, Tetralogy of Fallot can cause death. True or False? **True**

Lesson Two – Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot

REVIEW: Post-Test

5-10 minutes

Purpose:

This activity measures participants' knowledge about Tetralogy of Fallot upon completion of the lesson. Information from this post-test can be compared with information from the pre-test to measure the change in participants' knowledge about Tetralogy of Fallot.

Materials:

- *Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Post-Test*
- *Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Post-Test – Answer Key*

Facilitation Steps:

1. Give each participant a copy of the *Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Post-Test*. Allow participants 5-10 minutes to complete it.
2. If desired, use the *Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Post-Test – Answer Key* to review participants' responses.

Name: _____

Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Post-Test

Directions: The following questions will ask you about your knowledge of a congenital heart defect called Tetralogy of Fallot. Circle the best answer(s) or write your response in the space provided.

1. Tetralogy means a combination of _____ related problems.
 - a. three
 - b. two
 - c. five
 - d. four
2. Tetralogy of Fallot are defects in which parts of the body?
 - a. The blood vessels and heart
 - b. The lungs and heart
 - c. The blood vessels and lungs
 - d. The lungs and heart
3. Approximately 1 in every 3,000 infants is born with Tetralogy of Fallot around the world each year.
 - a. True
 - b. False
4. What percentage of newborns have a congenital heart defect?
 - a. 15%
 - b. 1%
 - c. 6%
 - d. 25%
5. Which of the following is a common physical characteristic of an infant with Tetralogy of Fallot?
 - a. Round, circular eyes
 - b. Extra fingers or toes
 - c. Missing part of the brain
 - d. An abnormal, rounded shape of the nailbed
6. Which of the following is a risk factor of an infant being born with Tetralogy of Fallot?
 - a. Bacterial illness during pregnancy
 - b. Mother older than age 30
 - c. The presence of Down Syndrome in the baby
 - d. The mother consuming an organic diet during pregnancy

7. Which of the following is used to diagnose an infant with Tetralogy of Fallot while in the womb?
 - a. Fetal electroencephalography
 - b. MRI
 - c. CAT scan
 - d. Fetal echocardiogram
8. What percentage of infants born with a congenital heart defect has Tetralogy of Fallot?
 - a. 10%
 - b. 2%
 - c. 20%
 - d. .01%
9. If not detected in utero, Tetralogy of Fallot can be detected weeks or months after birth.
 - a. True
 - b. False
10. Sometimes, Tetralogy of Fallot is never diagnosed.
 - a. True
 - b. False
11. What type of doctor treats and monitors patients with Tetralogy of Fallot?
 - a. Pulmonologist
 - b. General practitioner
 - c. Cardiologist
 - d. Pediatrician
12. What are abnormal heart rhythms called?
 - a. Supraventricular events
 - b. Arrhythmias
 - c. Cardiac tamponade
 - d. Cardiac failure

Understanding Congenital Heart Defects in Infants – Tetralogy of Fallot Post-Test – Answer Key

1. Tetralogy means a combination of _____ related problems.
 - a. three
 - b. five
 - c. two
 - d. **four**

2. Tetralogy of Fallot are defects in which parts of the body?
 - a. **The blood vessels and heart**
 - b. The lungs and heart
 - c. The blood vessels and lungs
 - d. The lungs and heart

3. Approximately 1 in every 3,000 infants is born with Tetralogy of Fallot around the world each year.
 - a. **True**
 - b. False

4. What percentage of newborns have a congenital heart defect?
 - a. 15%
 - b. **1%**
 - c. 6%
 - d. 25%

5. Which of the following is a common physical characteristic of an infant with Tetralogy of Fallot?
 - a. Round, circular eyes
 - b. Extra fingers or toes
 - c. Missing part of the brain
 - d. **An abnormal, rounded shape of the nailbed**

6. Which of the following is a risk factor of an infant being born with Tetralogy of Fallot?
 - a. Bacterial illness during pregnancy
 - b. Mother older than age 30
 - c. **The presence of Down Syndrome in the baby**
 - d. The mother consuming an organic diet during pregnancy

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 - b. 2%
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9. If not detected in utero, Tetralogy of Fallot can be detected weeks or months after birth.
- a. **True**
 - b. False
10. Sometimes, Tetralogy of Fallot is never diagnosed.
- b. True
 - b. False**
13. What type of doctor treats and monitors patients with Tetralogy of Fallot?
- a. Pulmonologist
 - b. General practitioner
 - c. Cardiologist**
 - d. Pediatrician
14. What are abnormal heart rhythms called?
- a. Supraventricular events
 - b. Arrhythmias**
 - c. Cardiac tamponade
 - d. Cardiac failure

Supplementary Activities

In addition to the activities and discussions presented in this curriculum, consider the following ideas to meet the needs of longer class periods or different groups of participants.

- Survey friends and family to discover what they know about Tetralogy of Fallot.
- Create a poster illustrating the common physical characteristics of one of the congenital heart defects associated with Tetralogy of Fallot.
- Develop a public service announcement persuading pregnant women to seek prenatal medical care as early as possible, especially if they are in a high-risk category.
- Develop an informative brochure targeted at the general public that presents information about congenital heart defects.
- Write a blog after interviewing someone born with a congenital heart defect or their parent.
- Invite a cardiologist or surgeon to talk about the importance of early interventions for children with congenital heart defects. Prepare a written or oral report about current topics and discussions in individuals with congenital heart defects. Such topics could include:
 - Adult life and relationships
 - Cognitive difficulties
 - Early intervention and treatment plan
 - Education and inclusion
 - Family/community relationship
 - Motor skills and physical education
 - Prenatal screening and testing
 - Delivery of diagnosis
 - Sleep patterns

Congenital Heart Defect – Tetralogy of Fallot

Organizations and Websites

The following organizations provide helpful information about Tetralogy of Fallot. These websites are not managed, monitored, or endorsed by Realityworks, Inc. Realityworks makes no representation for the information presented on these sites or their compliance with applicable laws or regulations.

<https://kidshealth.org/en/parents/tetralogy-of-fallot.html>

<https://www.mayoclinic.org/diseases-conditions/tetralogy-of-fallot/symptoms-causes/syc-20353477>

<https://www.cdc.gov/ncbddd/heartdefects/tetralogyoffallot.html>

<https://rarediseases.org/rare-diseases/tetralogy-of-fallot/>

<https://www.urmc.rochester.edu/encyclopedia/content.aspx?contenttypeid=90&contentid=p01822>

<https://www.ucsfhealth.org/conditions/tetralogy-of-fallot/support>

<https://www.hopkinsmedicine.org/health/conditions-and-diseases/continuing-tetralogy-of-fallot-treatment-into-adulthood>

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The following were used throughout this curriculum:

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