## Background
Shallow sacral dimples are a normal variant in 4.3% infants and OSD (Occult Spinal Dysraphisms) is unlikely in blind-ending dimples and pits within the natal cleft\(^1\). Routine ultrasound of the spine is not indicated.

### Which Sacral Dimples or Pits can be Safely Ignored and Parents Reassured?
- Simple sacral dimples or pits (solitary dimple, < 5mm in diameter, situated in the midline, and < 25 mm from anus)\(^2,3\).

### Which Sacral Dimples or Pits Should we Worry About?
- Complex sacral dimples or pits: Sacral dimples associated with other cutaneous findings (hypertrichosis, haemangioma, caudal appendage, deviated gluteal fold, discharging sinus, etc) > 5mm in diameter, situated above the natal cleft or > 25mm from anus.\(^2,3\)
- Abnormal antenatal US scan of spinal column\(^4\).
- In association with other OSD associated congenital abnormalities like CEARMS (Cloacal Exstrophy, Ano-Rectal Malformation Spectrum), genitourinary abnormalities, or VACTERL (Vertebral, Anorectal, Cardiovascular, Tracheo-oesophageal fistula, Renal and Limb anomalies).
- Associated suspicious signs or symptoms:
  - Neurological (weakness, spasticity or loss of sensation - difficult to demonstrate in neonates).
  - Urological.
  - Orthopaedic (scoliosis, pes cavus, talipes, congenital dislocation of hips).
Figure 1: Suggested protocol for ultrasound spine in a neonate with sacral dimple or pit

Suggested protocol for ultrasound spine in a neonate with sacral dimple or pit
• Classify the cutaneous lesion as a simple sacral dimple or pit using the criteria (isolated, < 5 mm diameter, < 25 mm from anus, base easily seen, in the midline, within the natal cleft)
• Through general and systemic examination (neurological in particular)
• Review of antenatal scans to look for associated abnormalities, especially vertebral and genitourinary

- Simple sacral dimple AND
- Normal examination AND
- Normal scans
  1. No need for further investigations
  2. Reassure parents

- Complex sacral dimple OR
- Sacral dimple with abnormal examination /antenatal scan
  1. Ward consultant or senior registrar review
  2. Arrange spinal ultrasound
  3. Parental counselling
References and related external legislation, policies, and guidelines