

Child's Name _____

Filled out by: _____

Date of Birth _____

Relationship to child _____

Today's date _____

Modified Checklist for Autism in Toddlers (M-CHAT)

Please fill out the following about how your child **usually** is. Please try to answer every question. If the behavior is rare (e.g., you've seen it once or twice), please answer as if the child does not do it.

1.	Does your child enjoy being swung, bounced on your knee, etc.?	Yes	No
2.	Does your child take an interest in other children?	Yes	No
3.	Does your child like climbing on things, such as up stairs?	Yes	No
4.	Does your child enjoy playing peek-a-boo/hide-and-seek?	Yes	No
5.	Does your child ever pretend, for example, to talk on the phone or take care of dolls, or pretend other things?	Yes	No
6.	Does your child ever use his/her index finger to point, to ask for something?	Yes	No
7.	Does your child ever use his/her index finger to point, to indicate interest in something?	Yes	No
8.	Can your child play properly with small toys (e.g. cars or bricks) without just mouthing, fiddling, or dropping them?	Yes	No
9.	Does your child ever bring objects over to you (parent) to show you something?	Yes	No
10.	Does your child look you in the eye for more than a second or two?	Yes	No
11.	Does your child ever seem oversensitive to noise? (e.g., plugging ears)	Yes	No
12.	Does your child smile in response to your face or your smile?	Yes	No
13.	Does your child imitate you? (e.g., you make a face-will your child imitate it?)	Yes	No
14.	Does your child respond to his/her name when you call?	Yes	No
15.	If you point at a toy across the room, does your child look at it?	Yes	No
16.	Does your child walk?	Yes	No
17.	Does your child look at things you are looking at?	Yes	No
18.	Does your child make unusual finger movements near his/her face?	Yes	No
19.	Does your child try to attract your attention to his/her own activity?	Yes	No
20.	Have you ever wondered if your child is deaf?	Yes	No
21.	Does your child understand what people say?	Yes	No
21.	Does your child sometimes stare at nothing or wander with no purpose?	Yes	No
23.	Does your child look at your face to check your reaction when faced with something unfamiliar?	Yes	No

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<http://www.dbpediatrics.org/media/mchat>



Ages & Stages Questionnaires®

18 Month Questionnaire

17 months 0 days to 18 months 30 days (inclusive)

Child's name: _____

Child's date of birth: _____ Boy Girl

If child was born 3 or more weeks prematurely, please indicate the number of weeks premature: _____

Date ASQ-3 completed by parent/caregiver: _____

Date of review with health professional: _____

Child's home address: _____

Town: _____ Postcode: _____

Person completing the questionnaire: _____

Relationship to child: _____

Home tel: _____ Mobile no: _____

Email address: _____

All children develop at different rates and in different ways. Please do not worry if your child is not doing all or any of the activities mentioned in the questionnaire. It is not a test. The activities are simply one way of understanding how your child is progressing.

Possible answers:

Yes = your child does this activity (or has done it and has now progressed, e.g., crawling, but is now walking)

Sometimes = your child is just beginning to do this activity (but does not do it regularly)

Not Yet = your child has not yet started doing this

Please leave **blank** any activities your child has not been able to try with you.



18 Month Questionnaire

17 months 0 days
to 18 months 30 days (inclusive)

On the following pages are questions about activities children may do. Your child may have already done some of the activities described here, and there may be some your child has not begun doing yet. For each item, please fill in the circle that indicates whether your child is doing the activity regularly (yes), sometimes, or not yet.

Important Points to Remember:

- Try each activity with your child before marking a response.
- Make completing this questionnaire a game that is fun for you and your child.
- Make sure your child is not tired or hungry.
- Please bring this questionnaire with you to your child's health and development review.

Notes:

At this age, many toddlers may not be cooperative when asked to do things. You may need to try the following activities with your child more than one time. If possible, try the activities when your child is cooperative. If your child can do the activity but refuses, mark "yes" for the item.

COMMUNICATION

	YES	SOMETIMES	NOT YET	
1. When your child wants something, does she tell you by <i>pointing</i> to it?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
2. When you ask your child to, does he go into another room to find a familiar toy or object? (<i>You might ask, "Where is your ball?" or say, "Bring me your coat," or "Go and get your blanket."</i>)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
3. Does your child say eight or more words in addition to "Mama" and "Dada"?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
4. Does your child imitate a two-word sentence? For example, when you say a two-word phrase, such as "Mama eat," "Dada play," "Go home," or "What's this?" does your child say both words back to you? (<i>Mark "yes" even if her words are difficult to understand.</i>)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
5. Without showing him, does your child <i>point</i> to the correct picture when you say, "Show me the cat," or ask, "Where is the dog?" (<i>He needs to identify only one picture correctly.</i>)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
6. Does your child say two or three words that represent different ideas together, such as "See dog," "Mummy come home," or "Cat gone"? (<i>Don't count word combinations that express one idea, such as "bye-bye," "all gone" "all right," and "What's that?"</i>) Please give an example of your child's word combinations:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___

COMMUNICATION TOTAL _____

GROSS MOTOR

	YES	SOMETIMES	NOT YET	
1. Does your child bend over or squat to pick up an object from the floor and then stand up again without any support?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
2. Does your child move around by walking, rather than by crawling on her hands and knees?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
3. Does your child walk well and seldom fall over?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
4. Does your child climb on an object such as a chair to reach something he wants (for example, to reach a toy on a table or worktop or to "help" you in the kitchen)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
5. Does your child walk down stairs if you hold onto one of her hands? She may also hold onto the handrail or wall. (<i>You can look for this in a shop, in a playground, or at home.</i>)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
6. When you show your child how to kick a large ball, does he try to kick the ball either by moving his leg forward or by walking into it? (<i>If your child already kicks a ball, mark "yes" for this item.</i>)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___



GROSS MOTOR TOTAL _____


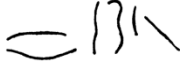
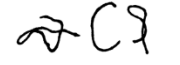
FINE MOTOR

	YES	SOMETIMES	NOT YET	
1. Does your child throw a small ball with a forward arm motion? (<i>If he simply drops the ball, mark "not yet" for this item.</i>)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
2. Does your child stack a small block or toy on top of another one? (<i>You could also use cotton reels, small boxes, or toys that are about 1 inch in size.</i>)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
3. Does your child make a mark on the paper with the tip of a crayon (or pencil or pen) when trying to draw?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
4. Does your child stack three small blocks or toys on top of each other by himself?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
5. Does your child turn the pages of a book by himself? (<i>He may turn more than one page at a time.</i>)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
6. Does your child get a spoon into her mouth right side up so that the food usually doesn't spill?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___



FINE MOTOR TOTAL _____

PROBLEM SOLVING

- | | YES | SOMETIMES | NOT YET | |
|--|-----------------------|-----------------------|-----------------------|--|
| 1. Does your child drop several small toys, one after another, into a container like a bowl or a box? (<i>You may show him how to do it.</i>) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | ___ |
| 2. After you have shown your child how, does she try to use a small toy that is slightly out of reach by using a spoon, stick, or similar tool?  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | ___ |
| 3. After a raisin is dropped into a clear plastic bottle, does your child turn the bottle over to tip it out? (<i>You may show him how.</i>)
(<i>You can use a small water bottle or baby bottle.</i>) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | ___ |
| 4. Without showing her how, does your child scribble back and forth when you give her a crayon (or pencil or pen)? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | ___ |
| 5. After watching you draw a line from the top of the paper to the bottom with a crayon (or pencil or pen), does your child copy you by drawing a single line on the paper in <i>any direction</i> ? (<i>Mark "not yet" if your child scribbles back and forth.</i>) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | ___ |
| | | | | <div style="text-align: center;"> 
 Count as "yes" </div> <hr style="width: 100%;"/> <div style="text-align: center;"> 
 Count as "not yet" </div> |
| 6. After a raisin is dropped into a clear plastic bottle, does your child turn the bottle upside down to tip out the raisin? (<i>Do not show him how.</i>)
(<i>You can use a small water bottle or baby bottle.</i>) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | ___ * |

PROBLEM SOLVING TOTAL _____

* If Problem Solving Item 6 is marked "yes" or "sometimes," mark Problem Solving Item 3 "yes."

PERSONAL-SOCIAL

- | | YES | SOMETIMES | NOT YET | |
|--|-----------------------|-----------------------|-----------------------|-----|
| 1. While looking at herself in the mirror, does your child offer a toy to her own image? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | ___ |
| 2. Does your child play with a doll or soft toy by hugging it? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | ___ |
| 3. Does your child get your attention or try to show you something by pulling on your hand or clothes? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | ___ |
| 4. Does your child come to you when he needs help, such as with winding up a toy or unscrewing a lid from a jar? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | ___ |
| 5. Does your child drink from a cup or glass, putting it down again with little spilling? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | ___ |
| 6. Does your child copy the activities you do, such as wipe up a spill, sweep, shave, or comb hair? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | ___ |

PERSONAL-SOCIAL TOTAL _____

OVERALL

Parents and providers may use the space below for additional comments.

1. Do you think your child hears well? If no, explain:

YES

NO

2. Do you think your child talks like other toddlers his age? If no, explain:

YES

NO

3. Can you understand most of what your child says? If no, explain:

YES

NO

4. Do you think your child walks, runs, and climbs like other toddlers her age? If no, explain:

YES

NO

5. Does either parent have a family history of childhood deafness or hearing problems? If yes, explain:

YES

NO

6. Do you have concerns about your child's eyesight? If yes, explain:

YES

NO

OVERALL *(continued)*

7. Has your child had any medical or health-related problems in the last few months? YES NO
If yes, explain:

8. Do you have any concerns about your child's behaviour? If yes, explain: YES NO

9. Does anything about your child worry you? If yes, explain: YES NO

Ht:

Date:

Wt:

Head:

18 MONTH VISIT

You are in full blown toddler mode now! Your toddler is running and walking, going up stairs with help, talking tons (but may only have 10-20 words), scribbles great, and is trying to get clothing on/off. It's VERY busy right now at your house!

Development

1. Do not expect your child to share; praise her when she does.
2. Tantrums are coming or are in full-force. This sort of behavior is very normal but should receive little to no reaction/attention/conversation from you. The more you ignore such outlandish behavior, the faster it will dissipate.
3. Hitting/biting/pushing are also common behaviors that seemingly come out of nowhere. This sort of behavior deserves a consistent response from everyone, usually taking the form of a stern "No Biting! Biting hurts!" Follow this with plopping your toddler on the ground and walking away. Any witnesses to the event should shower love and attention on the parent/child that was bit/hit/pushed. These behaviors will pass with consistent responses.

Injury Prevention

1. Use rear-facing car seats **EVERY TIME**.
2. Supervise all play in the street and driveway. Children this age do not understand the dangers of these areas.
3. Never leave your child unattended in the car. You should develop good habits to not forget your child in the car: leave the diaper bag in the front seat but leave your purse/wallet/keys/cellphone in the back, use a safety mirror so you get used to seeing your child, put a stuffed animal in the car seat that goes in the front seat when your child is in the car seat.
4. Never leave your child unsupervised near tubs, pools, or any water.
5. Please read the handout on Poisonings, as your toddler will get into everything!
6. Take the following steps to limit mosquito exposure here in muggy Chattanooga
 - Avoid evenings outside, which is tough to do
 - Wear light colored clothing with long sleeves
 - Use repellent. I've found that low DEET products work best especially if applied on the OUTSIDE of clothing
 - Eliminate any standing water around your home: low points in the yard, planters, plastic toys, even a bottle cap is enough to breed 1000's of mosquitos
 - Treat bites with topical and/or oral diphenhydramine (Benadryl)
 - Keep nails trimmed to limit scratching

Nutrition

1. Food likes and dislikes change at this age. Avoid mealtime struggles. Again, remember to not worry about what your child eats (or doesn't eat). Children at this age do not eat much, especially at dinnertime. Do not turn meals into a battle. They will win.

Next Visit

We don't see you for 6 months at the 2 Year Visit! Call us if you need anything before then.

We will check her lead level again with a finger poke. If your baby had low iron or anemia previously, be sure to remind us to recheck that at the next visit.

Lots will happen between now and then. If it hasn't happened already, your toddler will have a language explosion where everyday seems like a new word enters his vocabulary. He'll come running in next time asking for stickers!

Protect Your Child From Poison



Children can get very sick if they come in contact with medicines, household products, pesticides, chemicals, or cosmetics. This can happen at any age and can cause serious reactions. However, most children who come in contact with these things are not permanently hurt if they are treated right away.

The following is information from the American Academy of Pediatrics on how to prevent and treat poisonings in and around your home.

Prevention

Most poisonings occur when parents are not paying close attention. While you are busy doing other things, your child may be exploring closets or under bathroom sinks, where dangerous household items are often stored. Children are at risk for poisoning because they like to put things into their mouths and taste them. Remember to always keep a close eye on your child. Watch your child even more closely when you are away from home—especially at a grandparent's home, where medicines are often left out and within a child's reach.

The best way to keep your child safe from poisoning is to lock up dangerous household items out of your child's reach, including

- Medicines (especially those that contain iron)
- Cleaning products like dishwasher and laundry detergents, bleach, ammonia, and furniture polish
- Antifreeze, paint thinners, and windshield washer fluid
- Gasoline, kerosene, lamp oil
- Pesticides
- Alcohol

Always store medicines and household products in their original containers. Children can get confused if you put them in containers that were once used for food, especially empty drink bottles, cans, or cups. Also, many dangerous items look like food or drinks. For example, your child may mistake powdered dish soap for sugar or lemon liquid cleaner for lemonade.

Poison Help

- 1-800-222-1222 is a nationwide toll-free number that directs your call to your local poison center.
- Call 1-800-222-1222 if you have a poison emergency. This number will connect you right away to your nearest poison center. A poison expert in your area is available 24 hours a day, 7 days a week. Also call if you have a question about a poison or poison prevention. You can find prevention information at <http://poisonhelp.hrsa.gov>.
- Be prepared. Post the Poison Help number by every phone in your home and program the number in your cell phone. Be sure that caregivers and babysitters know this number.

How to make your home poison-safe

In the kitchen

- Store medicines, cleaners, lye, furniture polish, dishwasher soap, and other dangerous products in locked cabinets, out of sight and reach of children.
- If you must store items under the sink, use safety latches that lock every time you close the cabinet.

In the bathroom

- Keep all medicines in containers with safety caps. But remember, these caps are child resistant, not childproof, so store them in a locked cabinet.
- Get rid of leftover or expired medicines.
 - Take medicines to your police department if they have a drug collection program.
 - Check if your community has a household hazardous waste disposal program that takes medicines.
 - Mix medicines with coffee grounds or kitty litter, seal tightly in a plastic bag or container, and discard where children cannot get them. Remember to remove labels with personal information from prescription medicines.
 - Only flush medicines down the toilet or pour down the drain if the patient information materials say it's OK to do so.
- Store everyday items like toothpaste, soap, and shampoo in a different cabinet from dangerous products.
- Take medicine where children cannot watch you; they may try to copy you.
- Call medicine by its correct name. You don't want to confuse your child by calling it candy.
- Check the label every time you give medicine. This will help you to be sure you are giving the right medicine in the right amount to the right person. Mistakes are more common in the middle of the night, so always turn on a light when using any medicine.

In the garage and basement

- Keep paints, varnishes, thinners, pesticides, and fertilizers in a locked cabinet.
- Read labels on all household products before you buy them. Try to find the safest ones for the job. Buy only what you need to use right away.
- Open the garage door before starting your car to prevent carbon monoxide poisoning.
- Be sure that coal, wood, or kerosene stoves and appliances are in good working order. If you smell gas, turn off the stove or gas burner, leave the house, and call the gas company.

In the entire house

- Install smoke alarms and carbon monoxide detectors. Contact your local fire department for information on how many you need and where to install them.

Treatment

Swallowed poison

If you find your child with an open or empty container of a dangerous nonfood item, your child may have been poisoned. Stay calm and act quickly.

First, get the item away from your child. If there is still some in your child's mouth, make him spit it out or remove it with your fingers. Keep this material along with anything else that might help determine what your child swallowed.

Do not make your child vomit because it may cause more damage.

If your child is unconscious, not breathing, or having convulsions or seizures, call 911 or your local emergency number right away.

If your child does not have these symptoms, call the Poison Help number, 1-800-222-1222. You may be asked for the following information:

- Your name and phone number
- Your child's name, age, and weight
- Any medical conditions your child has
- Any medicine your child is taking
- The name of the item your child swallowed (Read it off the container and spell it.)
- The time your child swallowed the item (or when you found your child), and the amount you think was swallowed

If the poison is very dangerous, or if your child is very young, you may be told to take him to the nearest hospital. If your child is not in danger, the Poison Help staff will tell you what to do to help your child at home.

Poison on the skin

If your child spills a dangerous chemical on her body, remove her clothes and rinse the skin with room-temperature water for at least 15 minutes, even if your child resists. Then call Poison Help at 1-800-222-1222. Do not use ointments or grease.

Poison in the eye

Flush your child's eye by holding the eyelid open and pouring a steady stream of room-temperature water into the inner corner. It is easier if another adult holds your child while you rinse the eye. If another adult is not around, wrap your child tightly in a towel and clamp him under one arm. Then you will have one hand free to hold the eyelid open and the other to pour in the water.

Important information about syrup of ipecac

Syrup of ipecac is a drug that was used in the past to make children vomit (or throw up) after they had swallowed a poison. Although this may seem to make sense, this is not a good poison treatment. You should not make a child vomit in any way, including giving him syrup of ipecac, making him gag, or giving him salt water. If you have syrup of ipecac in your home, throw it out (see "In the bathroom" second bullet point).

Continue flushing the eye for 15 minutes. Then call the Poison Help number, 1-800-222-1222. Do not use an eyecup, eyedrops, or ointment unless Poison Help staff tells you to.

Poisonous fumes

In the home, poisonous fumes can come from

- A car running in a closed garage
- Leaky gas vents
- Wood, coal, or kerosene stoves that are not working right
- Space heaters, ovens, stoves, or water heaters that use gas

If your child is exposed to fumes or gases, have her breathe fresh air right away. If she is breathing, call the Poison Help number, 1-800-222-1222, and ask about what to do next. If she has stopped breathing, start cardiopulmonary resuscitation (CPR) and do not stop until she breathes on her own or someone else can take over. If you can, have someone call 911 right away. If you are alone, wait until your child is breathing, or after 1 minute of CPR, then call 911.

Remember

You can help make your home poison-safe by doing the following:

- Keep all medicines and household products locked up and out of your child's reach.
- Use safety latches on drawers and cabinets where you keep objects that may be dangerous to your child.
- Be prepared for a poisoning emergency. Post the Poison Help number by every phone in your home and program the number in your cell phone. 1-800-222-1222 will connect you right away to your nearest poison center. (Be sure that your babysitter knows this number.)

Listing of resources does not imply an endorsement by the American Academy of Pediatrics (AAP). The AAP is not responsible for the content of external resources. Information was current at the time of publication.

The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

From your doctor

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™

The American Academy of Pediatrics is an organization of 60,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents, and young adults.

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Web site — www.HealthyChildren.org

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