

**NAME:**

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**AGE:**

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**DATE:**

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Check off the boxes that coordinate with areas you struggle with or have experienced. This should not be used to diagnose, but to recognize if underlying retained primitive reflexes are contributing to symptoms of anxiety, sensory processing challenges, or other traumatic events that have occurred over your lifetime. If 7+ boxes are checked throughout the entire checklist, retained primitive reflexes may be contributing to challenges.

## INFANCY

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- Family history of similar difficulties?
- Conceived as a result of IVF?
- Medical problems during your mother's pregnancy? (High BP, Hyperemesis gravidarum, infection, severe emotional distress, etc.)
- Use of alcohol, smoking, drugs or drugs during your mother's pregnancy?
- Bad viral infection during first 13 weeks?
- Severe emotional stress during weeks 25 and 27 of your mother's pregnancy?
- Excessive ultrasounds during your mother's pregnancy?
- Were you born preterm or late?
- Birth interventions used during delivery? (Induced, prolonged labor, fast labor, forceps, ventouse, Caesarean section)
- Low birth weight?
- Feeding difficulties in the first 13 weeks of life? (Suck, swallow, breathe, etc.)
- Were you breastfed? If yes, how long?
- Were you considered a very active baby or very still baby? Requiring more assistance to sleep or wake than normal?

## TODDLER / SCHOOL AGE

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- Did you have an incorrect crawl? Bum scoot or army crawl, rather than crawling on all fours?
- Did you walk after the age of 16 months?
- Did you suck your thumb beyond the age of 5 years?
- Did you have adverse reactions to childhood vaccines?
- Did you wet the bed beyond the age of 5 years old?
- Did you have challenge learning to read or write in the first 2 years of school?
- Did you struggle to learn to tell time from an analog clock?
- Did you have challenges learning to ride a two wheeled bike?
- Did you have challenges catching a ball?
- Did you struggle with completing tasks like somersaults, skipping, climbing, etc?
- Did you struggle to sit still in class and focus? Feeling like you had 'ants in your pants'?
- Did you take a long time copying from the board? Or make numerous mistakes when copying from the board?
- Do you have a history of repeated ear, nose or throat infections?

## ADULTHOOD

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- Do you over-react to unexpected, loud noises?
- Do you have significant anxiety or panic attacks?
- Do you have vision challenges? More specifically ocular motor challenges?
- Do you struggle with feeling dizzy or nauseous?
- Do you have poor balance?
- Do you struggle with left / right awareness?
- Do you have challenges with activities that require coordination?
- Do you struggle with migraines often?
- Are your eyes sensitive to bright lights?
- Do you struggle in loud environments more than other people?
- Do you make silly mistakes when writing or copying something?
- Do you have consistent problems with allergies or eczema?

Sources:

pubmed.ncbi.nlm.nih.gov/2928066/  
era.ed.ac.uk/handle/1842/28040  
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Neuromotor Immaturity in Children and Adults - Sally Goddard