

WELL CHILD QUESTIONNAIRE

(Patients age 1-5)

DO YOU HAVE ANY CONCERNS ABOUT YOUR CHILD TODAY?

PLEASE DESCRIBE THE CHILD'S HOME ENVIRONMENT (who they live with and where they live)

WHO IS CHILD WITH DURING DAY? _____ AT NIGHT? _____

IS THERE A LEARNING DISABILITY OR CONCERN FOR ONE _____

MEDICATIONS & DOSE

UPDATE TO MEDICAL / SURGICAL HISTORY IN LAST YEAR

FAMILY HISTORY

	YES	NO	(who/what)
Heart Problems	YES	NO	_____
Asthma or breathing problems	YES	NO	_____
Cancer	YES	NO	_____
Genetic disease	YES	NO	_____
Seizures	YES	NO	_____
Diabetes	YES	NO	_____

NUTRITION & EXERCISE (briefly describe diet and activity level)

GROWTH AND DEVELOPMENT

Dental check-up in last year?	YES	NO	Eye exam in last year?	YES	NO
How many hours of sleep nightly?	_____		How many hours of screen time daily?	_____	
Do they snore?	YES	NO	Do they exercise regularly for >30 min?	YES	NO
Does your child have sleep problems?	YES	NO	Bedwetting?	YES	NO
Does your child know how to swim?	YES	NO	Constipation or Bowel Issues?	YES	NO
Behavioral Concerns?	YES	NO	Urinary issues?	YES	NO

PLEASE ANSWER QUESTIONS CORRESPONDING TO YOUR CHILDS AGE

12 Months	Walks 2-5 steps	YES	NO
12 Months	Fine pincer grip (fingertips)	YES	NO
12 Months	Responds to own name	YES	NO
12 Months	Imitates gestures and sounds	YES	NO
12 Months	Points to wanted objects	YES	NO
12 Months	Throws objects	YES	NO
15 Months	Walks across room	YES	NO
15 Months	Uses spoon	YES	NO
15 Months	Stacks blocks	YES	NO
15 Months	5 words beyond mama/dada	YES	NO
15 Months	Looks for hidden object when see's it being moved	YES	NO
15 Months	Brings toys/interesting items to parent	YES	NO
18 Months	Runs	YES	NO
18 Months	Carries toys while walking	YES	NO
18 Months	Points to objects and/or 3 body parts when asked	YES	NO
18 Months	Imitates housework	YES	NO
18 Months	Parallel play (plays with own toys next to others)	YES	NO
18 Months	10-25 words	YES	NO
24 Months	Jumps on two feet	YES	NO
24 Months	Uses fork	YES	NO
24 Months	2 word phrases	YES	NO
24 Months	Searches for hidden objects after multiple attempts to hide	YES	NO
24 Months	Test limits / tantrums	YES	NO
24 Months	Follows 2 step commands	YES	NO
3 Years	Pedals tricycle	YES	NO
3 Years	Uses stairs with alternating feet	YES	NO
3 Years	Toilet Trained	YES	NO
3 Years	3-4 word phrases	YES	NO
3 Years	Identifies shapes	YES	NO
3 Years	Roll play	YES	NO
4 Years	Hops on one foot	YES	NO
4 Years	Cuts with scissors	YES	NO
4 Years	Tells a story	YES	NO
4 Years	Counts to 5	YES	NO
4 Years	Elaborate fantasy play	YES	NO
4 Years	Talks in sentences	YES	NO
5 Years	Balance on foot for 10 seconds	YES	NO
5 Years	Draws person and can identify body parts	YES	NO
5 Years	Uses past and future tense	YES	NO
5 Years	Counts to 10	YES	NO
5 Years	ABC's	YES	NO
5 Years	Makes or plays games with rules	YES	NO

Wellness or Physicals are intended to address only preventive care. Most commercial & federal insurance providers **WILL NOT COVER** evaluation of new medical conditions. As such, new concerns/problems may be assessed an additional charge.

M-CHAT-R GRADING (24 and 36 months)

2, 5, 12 YES is (+) All other NO is (+)	0-2 = normal 3-7 = repeat 3 months 8+ = refer developmental peds
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