

Child's Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Today's Date: \_\_\_\_\_

**The Nipissing District Developmental Screen is a checklist designed to help monitor your child's development.**

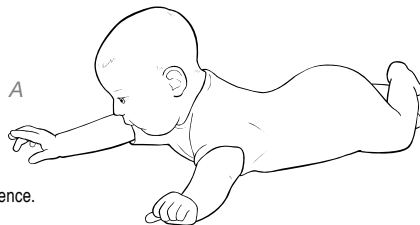
Y N BY **ONE MONTH** OF AGE, DOES YOUR BABY:

- 1 Look at you?
- 2 Startle to loud or sudden noise?
- 3 Calm down when comforted?
- 4 Suck well on the nipple?



BY **TWO MONTHS** OF AGE, DOES YOUR BABY:

- 1 Follow movement with eyes?
- 2 Study your face?
- 3 Startle or wake to loud noises?
- 4 Stop crying when comforted by you?
- 5 Enjoy being touched and cuddled?
- 6 Recognize and calm down to a familiar gentle voice?
- 7 Have different cries? (*tired, hungry*)\*
- 8 Have a variety of sounds? (*coos, gurgles*)\*
- 9 Suck well on the nipple?
- 10 Feed every 2-4 hours during the day?
- 11 Lift head when on tummy? \*\* A
- 12 Hold head up when held at your shoulder? B
- 13 Move arms and legs?



\* Examples provided are only suggestions. You may use similar examples from your family experience.

\*\* Item may not be common to all cultures.

**Instructions for the Nipissing District Developmental Screen®**

The **ndds** is a developmental screening tool designed to be completed by a parent or caregiver. It provides a snapshot of your child's development to discuss with your health care or child care professional. The areas of development covered by the **ndds** include vision, hearing, emotional, fine motor, gross motor, social, self-help, communication, and learning and thinking. The screens coincide with key developmental stages up to age six.

**1. Choose the screen that matches your child's age**

The ages are noted on each screen. If your child falls between two ages, use the earlier age (for example: if your child is 4½ years old use the 4 year old screen). Health care professionals may want to correct for prematurity based on their current clinical practice.

**2. Answer the questions to the best of your ability**

If you are not sure, try the question with your child before checking yes or no. Any examples provided are only suggestions. You may use similar examples from your family experience. The language and communication items can be asked in the child's first language. Items marked with \*\* may not be common to all cultures.

**3. Follow-up with your health care and/or child care professional**

If you answer "no" to any question or have any concerns about your child's development, follow-up with your health care and/or child care professional.

**Activities for your child**

While the skills in each screen are expected to be mastered by most children by the age shown, the activities may be a bit more challenging. You can practice with your child to prepare him/her for the next developmental stage. To help you, each activity has a symbol that represents the main area of development.

If you have questions or concerns about using any activity for your child, contact a health care or child care professional.

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Users should bear in mind the following when using the Screen Forms: (i) The needs of each infant/child are unique. Each infant/child will develop differently and as such, any perceived limitations in development must be reviewed by a health care and/or child care professional to be properly assessed; (ii) While every effort has been made to make the Screen Forms as culturally, economically and geographically neutral as possible, it must be understood by users that they may still reflect some cultural, economic or geographic prejudices. As such, these prejudices may affect a specific infant's/child's results in a Screen Form without actually reflecting a developmental limitation. Again, users should contact a health care and/or child care professional to review the needs of an individual infant/child; (iii) The Screen Forms cannot contain every possible indicator of developmental limitations or goals to be met. As such, the Screen Forms are not designed for and should not be used to diagnose or treat perceived developmental limitations or other health needs. NDDS® makes no representation or warranties, express or implied. This includes, but is not limited to, any implied warranty or merchantability of fitness for a particular use or purpose, and specifically disclaims any such warranties and representations. NDDS® expressly disclaims any liability for loss, injury or damages incurred or occasioned as a consequence, directly or indirectly, of the use of the Screen Form.

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The following **activities for your baby** will help you play your part in your baby's development.

Get to know me. Touch me as you feed, dress, and bathe me. Try to learn how I like to be handled: firmly or lightly, quickly or slowly. Massage my arms, legs, back, tummy, and face. This is a good time to get to know one another.

You're my first friend, and my interactions with you help me with my relationships in the future.

I am most interested in your voice and face. I want you to hold me close so I can study your face.

To help me relax, hold me close to you and cuddle me as we rock in a rocking chair. Talk or sing to me, touch me, talk in a soft low voice, or play lullaby music. Loud noises scare me.

As you feed me, hold me close and look at me. Smile, tell me how wonderful I am, and let me gaze into your eyes.

I'm too little to go for a long time without eating. I may need to eat sometime during the night.

I want my head supported as you hold me against your shoulder and you talk to me. I may try to lift my head for a few seconds to see my new world. There is so much to see.

When I am awake and being watched, I need tummy time. I need to sleep on my back on a firm, flat surface.

Relate to me by talking, singing, or cooing as you change my diaper, give me a bath, feed, or dress me. I want you to be involved with me.

Talk, sing lullabies, say rhymes, or make up songs so I can listen to the sound of your voice. Change your voice; I may like a high pitch or low pitch.

Respond to my crying. It's my way of communicating if I'm hungry, tired, warm, need a diaper change, or am in discomfort. Hold me close; you won't spoil me.

Mirrors, mobiles, and dangling things are big favourites of mine.

*I like movement, but please don't shake me; it's not safe. My head is too heavy for my neck. Since I am so young, always support my head.*

*Please don't let anyone smoke around me.*

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