

AVON PEDIATRICS – 317-272-7887

Dr. Kerry Hensley, M.D.

Developmental Questionnaire

Patient Name: _____ Date of Birth: _____

18 Months Checkup

- _____ 1. Does your child run?
- _____ 2. Can your child walk up stairs one at a time if his/her hand is held?
- _____ 3. Does your child eat with a spoon (not necessarily neatly)?
- _____ 4. If your child is trying to retrieve a small object inside a cup or bottle, will he/she turn the container upside down to dump the object out?
- _____ 5. Is your child actively exploring the house: opening drawers, tipping over wastebaskets, etc.?
- _____ 6. Does your child use objects for their intended purpose: combs hair with brush or comb, etc.?
- _____ 7. Does your child point to at least three body parts upon request?
- _____ 8. Does your child identify pictures in books by pointing as they are named?
- _____ 9. Does your child follow one-step directions accurately: "Give dolly a drink", "bring the ball to daddy"?
- _____ 10. Does your child answer "yes" or "no" either verbally or by shaking his/her head?
- _____ 11. Does your child use both consonants and vowels when he/she speaks (ba for Ball, ma for mom, etc.)?
- _____ 12. Does your child say at least 6 words with appropriate meaning?
- _____ 13. Does your child say the name of the object in response to "What is This?" or at least vocalize as he/she is answering?
- _____ 14. Does your child imitate simple words that you say ("Good!", "All Gone", "night-night")?

Date completed: _____ Completed by: _____ Relationship to patient: _____

2 Year Checkup

- _____ 1. Does your child walk up and down a few steps by him/herself?
- _____ 2. Does your child throw a ball overhand fairly accurately?
- _____ 3. Can your child open doors by turning the doorknob?
- _____ 4. Does your child do any of the following: simple puzzles, stack 2 or 3 blocks, scribble with a pencil (without making definite shape)?
- _____ 5. Does your child help you to undress him/herself by naming postural changes (lifting his/her arms or shoulders to help remove shirt, etc.)?
- _____ 6. Does your child imitate simple household task (sweeping, picking up the phone and putting it under his/her ear)?
- _____ 7. Does your child seem to hear and understand most of what is said to him/her (does not frequently ask for statements to be repeated)?
- _____ 8. Does your child follow two-step directions consistently: "pick up the ball and bring it to me"?
- _____ 9. Does your child understand prepositions "in", "on", "up", etc.?
- _____ 10. Is your child able to locate body parts on a doll and pictures in a book on request?
- _____ 11. Does your child recognize new words daily, and at an increasing rate? Does he/she recognize almost all common objects and know what they are used for?
- _____ 12. Does your child have a vocabulary of at least 50-60 words? Does he/she say all of these words, even though he/she may not pronounce them correctly?
- _____ 13. Is your child beginning to combine two or more words into phrases "go store", "more milk"?
- _____ 14. Is your child's language at least 50% understandable (others can understand at least half of what your child says)?
- _____ 15. Does your child sometimes begin a conversation (doesn't wait for someone else to start the talking)?

Date completed: _____ Completed by: _____ Relationship to Patient: _____