

NUTRITION QUESTIONNAIRE FOR INFANTS

1. How would you describe feeding time with your baby?
(Check all that apply.)
 - Always pleasant
 - Usually pleasant
 - Sometimes pleasant
 - Never pleasant

2. How do you know when your baby is hungry or has had enough to eat?

3. What type of milk do you feed your baby and how often?
(Check all that apply.)
 - Iron-fortified infant formula
 - Evaporated milk
 - Whole milk
 - Reduced-fat (2%) milk
 - Low-fat (1%) milk
 - Fat-free (skim) milk
 - Goat's milk
 - Soymilk

4. What types of things can your baby do?
(Check all that apply.)
 - Open mouth for breast or bottle
 - Drink liquids
 - Follow objects and sounds with eyes
 - Put hand in mouth
 - Sit with support
 - Bring objects to mouth and bite them
 - Hold bottle without support
 - Drink from a cup that is held

5. Does your baby eat solid foods? If yes, which ones?

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6. Does your baby drink juice? If yes, how much?

7. Does your baby take a bottle to bed at night or carry a bottle around during the day?

8. Do you add honey to your baby's bottle or dip your baby's pacifier in honey?

9. What is the source of the water your baby drinks? Sources include public, well, commercially bottled, and home system-processed water.

10. Do you have a working stove, oven, and refrigerator where you live?

11. Were there any days last month when your family didn't have enough food to eat or enough money to buy food?

12. What concerns or questions do you have about feeding your baby or how your baby is growing? Do you have any concerns or questions about your baby's weight?



10 Month Questionnaire

9 months 0 days
through 10 months 30 days

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

Important Points to Remember:



- Try each activity with your baby before marking a response.
- Make completing this questionnaire a game that is fun for you and your baby.
- Make sure your baby is rested and fed.
- Please return this questionnaire by _____.

Notes:

COMMUNICATION



	YES	SOMETIMES	NOT YET	
1. Does your baby make sounds like "da," "ga," "ka," and "ba"?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
2. If you copy the sounds your baby makes, does your baby repeat the same sounds back to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
3. Does your baby make two similar sounds like "ba-ba," "da-da," or "ga-ga"? (The sounds do not need to mean anything.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
4. If you ask your baby to, does he play at least one nursery game even if you don't show him the activity yourself (such as "bye-bye," "Peek-a-boo," "clap your hands," "So Big")?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
5. Does your baby follow one simple command, such as "Come here," "Give it to me," or "Put it back," without your using gestures?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
6. Does your baby say three words, such as "Mama," "Dada," and "Baba"? (A "word" is a sound or sounds your baby says consistently to mean someone or something.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
				COMMUNICATION TOTAL —

GROSS MOTOR

	YES	SOMETIMES	NOT YET	
1. If you hold both hands just to balance your baby, does she support her own weight while standing?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
				
2. When sitting on the floor, does your baby sit up straight for several minutes without using his hands for support?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
				






GROSS MOTOR *(continued)*

YES SOMETIMES NOT YET

- | | | | | | |
|--|---|-----------------------|-----------------------|-----------------------|---|
| <p>3. When you stand your baby next to furniture or the crib rail, does she hold on without leaning her chest against the furniture for support?</p> |  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <hr style="width: 20px; border: 0.5px solid black;"/> |
| <p>4. While holding onto furniture, does your baby bend down and pick up a toy from the floor and then return to a standing position?</p> |  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <hr style="width: 20px; border: 0.5px solid black;"/> |
| <p>5. While holding onto furniture, does your baby lower himself with control (without falling or flopping down)?</p> | | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <hr style="width: 20px; border: 0.5px solid black;"/> |
| <p>6. Does your baby walk beside furniture while holding on with only one hand?</p> | | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <hr style="width: 20px; border: 0.5px solid black;"/> |
| <p>GROSS MOTOR TOTAL</p> | | | | | <hr style="width: 20px; border: 0.5px solid black;"/> |

FINE MOTOR

YES SOMETIMES NOT YET

- | | | | | | |
|--|---|-----------------------|-----------------------|-----------------------|---|
| <p>1. Does your baby pick up a small toy with only one hand?</p> |  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <hr style="width: 20px; border: 0.5px solid black;"/> |
| <p>2. Does your baby <i>successfully</i> pick up a crumb or Cheerio by using her thumb and all of her fingers in a raking motion? <i>(If she already picks up a crumb or Cheerio, mark "yes" for this item.)</i></p> |  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <hr style="width: 20px; border: 0.5px solid black;"/> |
| <p>3. Does your baby pick up a small toy with the <i>tips</i> of his thumb and fingers? <i>(You should see a space between the toy and his palm.)</i></p> |  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <hr style="width: 20px; border: 0.5px solid black;"/> |
| <p>4. After one or two tries, does your baby pick up a piece of string with her first finger and thumb? <i>(The string may be attached to a toy.)</i></p> |  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <hr style="width: 20px; border: 0.5px solid black;"/> |
| <p>5. Does your baby pick up a crumb or Cheerio with the <i>tips</i> of his thumb and a finger? He may rest his arm or hand on the table while doing it.</p> |  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <hr style="width: 20px; border: 0.5px solid black;"/> * |
| <p>6. Does your baby put a small toy down, without dropping it, and then take her hand off the toy?</p> | | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <hr style="width: 20px; border: 0.5px solid black;"/> |
| <p>FINE MOTOR TOTAL</p> | | | | | <hr style="width: 20px; border: 0.5px solid black;"/> |

*If Fine Motor Item 5 is marked "yes" or "sometimes," mark Fine Motor item 2 "yes."

PROBLEM SOLVING

1. Does your baby pass a toy back and forth from one hand to the other?



YES	SOMETIMES	NOT YET	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___

2. Does your baby pick up two small toys, one in each hand, and hold onto them for about 1 minute?



<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
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3. When holding a toy in his hand, does your baby bang it against another toy on the table?



<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
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4. While holding a small toy in each hand, does your baby clap the toys together (like "Pat-a-cake")?

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
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5. Does your baby poke at or try to get a crumb or Cheerio that is inside a clear bottle (such as a plastic soda-pop bottle or baby bottle)?

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
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6. After watching you hide a small toy under a piece of paper or cloth, does your baby find it? (Be sure the toy is completely hidden.)

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
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PROBLEM SOLVING TOTAL ___

PERSONAL-SOCIAL

1. While your baby is on her back, does she put her foot in her mouth?



YES	SOMETIMES	NOT YET	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___

2. Does your baby drink water, juice, or formula from a cup while you hold it?

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
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3. Does your baby feed himself a cracker or a cookie?

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
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4. When you hold out your hand and ask for her toy, does your baby offer it to you even if she doesn't let go of it? (If she already lets go of the toy into your hand, mark "yes" for this item.)

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
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5. When you dress your baby, does he push his arm through a sleeve once his arm is started in the hole of the sleeve?

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
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6. When you hold out your hand and ask for her toy, does your baby let go of it into your hand?

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	___
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PERSONAL-SOCIAL TOTAL ___

OVERALL

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

1. Does your baby use both hands and both legs equally well? If no, explain: YES NO

2. When you help your baby stand, are his feet flat on the surface most of the time? If no, explain: YES NO

3. Do you have concerns that your baby is too quiet or does not make sounds like other babies? If yes, explain: YES NO

4. Does either parent have a family history of childhood deafness or hearing impairment? If yes, explain: YES NO

5. Do you have concerns about your baby's vision? If yes, explain: YES NO

6. Has your baby had any medical problems in the last several months? If yes, explain: YES NO

OVERALL *(continued)*

7. Do you have any concerns about your baby's behavior? If yes, explain:

YES

NO

8. Does anything about your baby worry you? If yes, explain:

YES

NO



10 Month ASQ-3 Information Summary

9 months 0 days through
10 months 30 days

Baby's name: _____ Date ASQ completed: _____

Baby's ID #: _____ Date of birth: _____

Administering program/provider: _____ Was age adjusted for prematurity when selecting questionnaire? Yes No

1. **SCORE AND TRANSFER TOTALS TO CHART BELOW:** See ASQ-3 User's Guide for details, including how to adjust scores if item responses are missing. Score each item (YES = 10, SOMETIMES = 5, NOT YET = 0). Add item scores, and record each area total. In the chart below, transfer the total scores, and fill in the circles corresponding with the total scores.

Area	Cutoff	Total Score	0	5	10	15	20	25	30	35	40	45	50	55	60
Communication	22.87		●	●	●	●	●	○	○	○	○	○	○	○	○
Gross Motor	30.07		●	●	●	●	●	●	○	○	○	○	○	○	○
Fine Motor	37.97		●	●	●	●	●	●	●	○	○	○	○	○	○
Problem Solving	32.51		●	●	●	●	●	●	○	○	○	○	○	○	○
Personal-Social	27.25		●	●	●	●	●	○	○	○	○	○	○	○	○

2. **TRANSFER OVERALL RESPONSES:** Bolded uppercase responses require follow-up. See ASQ-3 User's Guide, Chapter 6.

- | | | | | | | |
|--|-----|------------|--|--|------------|----|
| 1. Uses both hands and both legs equally well?
Comments: | Yes | NO | 5. Concerns about vision?
Comments: | YES | No | |
| 2. Feet are flat on the surface most of the time?
Comments: | Yes | NO | 6. Any medical problems?
Comments: | YES | No | |
| 3. Concerns about not making sounds?
Comments: | | YES | No | 7. Concerns about behavior?
Comments: | YES | No |
| 4. Family history of hearing impairment?
Comments: | | YES | No | 8. Other concerns?
Comments: | YES | No |

3. **ASQ SCORE INTERPRETATION AND RECOMMENDATION FOR FOLLOW-UP:** You must consider total area scores, overall responses, and other considerations, such as opportunities to practice skills, to determine appropriate follow-up.

If the baby's total score is in the area, it is above the cutoff, and the baby's development appears to be on schedule.
 If the baby's total score is in the area, it is close to the cutoff. Provide learning activities and monitor.
 If the baby's total score is in the area, it is below the cutoff. Further assessment with a professional may be needed.

4. **FOLLOW-UP ACTION TAKEN:** Check all that apply.

- _____ Provide activities and rescreen in _____ months.
- _____ Share results with primary health care provider.
- _____ Refer for (circle all that apply) hearing, vision, and/or behavioral screening.
- _____ Refer to primary health care provider or other community agency (specify reason): _____
- _____ Refer to early intervention/early childhood special education.
- _____ No further action taken at this time
- _____ Other (specify): _____

5. **OPTIONAL:** Transfer item responses (Y = YES, S = SOMETIMES, N = NOT YET, X = response missing).

	1	2	3	4	5	6
Communication						
Gross Motor						
Fine Motor						
Problem Solving						
Personal-Social						

Activities for Infants 8-12 Months Old



<p>Let your baby feed himself. This gives your baby practice picking up small objects (cereal, cooked peas) and also gives him experience with textures in his hands and mouth. Soon your baby will be able to finger feed an entire meal.</p>	<p>Your baby will be interested in banging objects to make noise. Give your baby blocks to bang, rattles to shake, or wooden spoons to bang on containers. Show your baby how to bang objects together.</p>	<p>A good pastime is putting objects in and out of containers. Give your baby plastic containers with large beads or blocks. Your baby may enjoy putting socks in and out of the sock drawer or small cartons (Jell-O, tuna or soup cans) on and off shelves.</p>	<p>Mirrors are exciting at this age. Let your baby pat and poke at herself in the mirror. Smile and make faces together in the mirror.</p>	<p>Your baby will begin using his index fingers to poke. Let your baby poke at a play telephone or busy box. Your baby will want to poke at faces. Name the body parts as your baby touches your face.</p>
<p>Put toys on a sofa or sturdy table so that your baby can practice standing while playing with the toys.</p>	<p>Find a big box that your baby can crawl in and out of. Stay close by and talk to your baby about what she is doing. "You went in! Now you are out!"</p>	<p>Read baby books or colorful magazines by pointing and telling your baby what is in the picture. Let your baby pat pictures in the book.</p>	<p>Play hide-and-seek games with objects. Let your baby see you hide an object under a blanket, diaper, or pillow. If your baby doesn't uncover the object, just cover part of it. Help your baby find the object.</p>	<p>Play ball games. Roll a ball to your baby. Help your baby, or have a partner help him roll the ball back to you. Your baby may even throw the ball, so beach balls or Nerf balls are great for this game.</p>
<p>Turn on a radio or stereo. Hold your baby in a standing position and let your baby bounce and dance. If your baby can stand with a little support, hold her hands and dance like partners.</p>	<p>Play imitation games like Peek-a-boo and So Big. Show pleasure at your baby's imitations of movements and sounds. Babies enjoy playing the same games over and over.</p>	<p>Let your baby play with plastic measuring cups, cups with handles, sieves and strainers, sponges, and balls that float in the bathtub. Bath time is a great learning time.</p>	<p>Play Pat-a-Cake with your baby. Clap his hands together or take turns. Wait and see if your baby signals you to start the game again. Try the game using blocks or spoons to clap and bang with.</p>	<p>Your baby will play more with different sounds like "la-la" and "da-da." Copy the sounds your baby makes. Add a new one and see if your baby tries it, too. Enjoy your baby's early attempts at talking.</p>
<p>Make a simple puzzle for your baby by putting blocks or Ping-Pong balls inside a muffin pan or egg carton.</p>	<p>You can make a simple toy by cutting a round hole in the plastic lid of a coffee can. Give your baby wooden clothes pins or Ping-Pong balls to drop inside.</p>	<p>Say "hi" and wave when entering a room with your baby. Encourage your baby to imitate. Help your baby wave to greet others. Waving "hi" and "bye" are early gestures.</p>	<p>Let your baby make choices. Offer two toys or foods and see which one your baby picks. Encourage your baby to reach or point to the chosen object. Babies have definite likes and dislikes!</p>	<p>New places and people are good experiences for your baby, but these can be frightening. Let your baby watch and listen and move at her own speed. Go slowly. Your baby will tell you when she is ready for more.</p>