

# Health Information Update (4 Years Old)

## INTAKE

- How many ounces of milk does your child drink/day? \_\_\_\_\_ Ounces What kind? \_\_\_\_\_
- How many meals per day does your child eat? \_\_\_\_\_ How many snacks per day? \_\_\_\_\_
- How many servings/**DAY** does your child have of: \_\_\_\_\_ Fruits \_\_\_\_\_ Veggies \_\_\_\_\_ Whole Grains
- How many servings/**DAY** does your child have of: \_\_\_\_\_ Cheese/yogurt
- How many servings/**WEEK** does your child have of: \_\_\_\_\_ Meat \_\_\_\_\_ Beans \_\_\_\_\_ Nuts \_\_\_\_\_ Eggs \_\_\_\_\_ Fish
- How many ounces/**DAY** does your child have of: \_\_\_\_\_ Juice \_\_\_\_\_ Pop
- How often does your child eat sweets?  15 or more x/wk  8-14x/wk  <8x/wk

## OUTPUT

- How many stools does your child have per week? \_\_\_\_\_ What is the consistency? \_\_\_\_\_
- Does your child hold his/her stool?  Yes  No Do you see any blood in the stool?  Yes  No
- Is your child toilet trained during the day?  Yes  No At night?  Yes  No

## SLEEP

- Where does your child sleep?  Parent's room  Own room  Room with sibling
- Do you have a bedtime routine?  Yes  No Do you read to your child before bed?  Yes  No
- Does your child fall asleep by him/herself?  Yes  No
- Is there a TV or computer in your child's room?  Yes  No
- Does your child watch the screen or play on a computer before or at bedtime?  Yes  No
- Bedtime \_\_\_\_\_ pm Wake time \_\_\_\_\_ am
- Does your child wake at night?  Yes  No
- What do you usually do when your child wakes up during the night? \_\_\_\_\_
- Does your child nap?  Yes  No How long is the nap? \_\_\_\_\_

## SAFETY

- Does your child ride in a 5-point harness car seat?  Yes  No Wear a helmet?  Yes  No

## CHILDCARE/SCHOOL

- Who is with your child most of the time?  Mom  Dad  Babysitter  Family member
- Does your child attend daycare, preschool, etc.? \_\_\_\_\_
- How often?  Part time  Full time


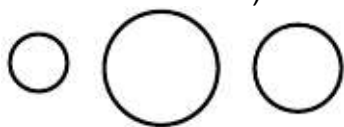
## BEHAVIOR/DEVELOPMENT

- Describe your child's temperament (happy, calm, etc.) \_\_\_\_\_
- How do you discipline your child when needed? \_\_\_\_\_

## OTHER

- How many hours of screen time does your child watch/day? \_\_\_\_\_
- How many times per day does your child brush his/her teeth? \_\_\_\_\_ Floss teeth? \_\_\_\_\_
- When was your child's last visit to the dentist? \_\_\_\_\_ Any cavities?  Yes  No
- What is your water source?  City  Community well  Personal well  Bottled water
- Do you drink the tap water?  Yes  No
- List any medications or vitamins/supplements your child takes: \_\_\_\_\_
- Do you need any medication refills? \_\_\_\_\_
- Concerns? \_\_\_\_\_

Ages and Stages - 48 Month	Yes	Sometimes	Not Yet
<b>Communication</b>			
1. Does your child name at least three items from a common category? For example, if you say to your child, "Tell me some things that you can eat", does your child answer with something like "cookies, eggs, and cereal"? Or if you say, "Tell me the names of some animals", does your child answer with something like "cow, dog, and elephant"?			
2. Does your child answer the following questions? (Mark "sometimes" if your child answers only one question.) "What do you do when you are hungry?" (Acceptable answers include "get food", "eat", "ask for something to eat", and "have a snack".) What do you do when you are tired?" (Acceptable answers include "take a nap", "rest", "go to sleep", "go to bed", "lie down", and "sit down".)			
3. Does your child tell you at least two things about common objects? For example, if you say to your child, "Tell me about your ball", does she say something like, "It's round. I throw it. It's big."			
4. Does your child use endings of words, such as "-s", "-ed", and "-ing"? For example, does your child say things like, "I see two cats", "I am playing", or "I kicked the ball"?			
5. Without your giving help by pointing or repeating, does your child follow three directions that are unrelated to one another? Give all three directions before your child starts. For example, you may ask your child, "Clap your hands, walk to the door, and sit down," or "Give me the pen, open the book, and stand up."			
6. Does your child use all of the words in a sentence (for example, "a", "the", "am", "is", and "are") to make complete sentences, such as "I am going to the park," or "Is there a toy to play with?" or "Are you coming, too?"			
<b>Gross Motor</b>			
1. Does your child catch a large ball with both hands? (You should stand about 5 feet away and give your child two or three tries before you mark the answer.)			
2. Does your child climb the rungs of a ladder of a playground slide and slide down without help?			
3. While standing, does your child throw a ball overhand in the direction of a person standing at least 6 feet away? To throw overhand, your child must raise his arm to shoulder height and throw the ball forward. (Dropping the ball or throwing the ball underhand should be scored as "not yet".)			
4. Does your child hop up and down on either the right or left foot at least one time without losing her balance or falling?			
5. Does your child jump forward a distance of 20 inches from a standing position, starting with his feet together?			
6. Without holding onto anything, does your child stand on one foot for at least 5 seconds without losing her balance and putting her foot down? (You may give your child two or three tries before you mark the answer.)			
<b>Fine Motor</b>			
1. Does your child put together a five- to seven-piece interlocking puzzle? (If one is not available, take a full-page picture from a magazine or catalog and cut it into six pieces. Does your child put it back together correctly?)			

<p>2. Using child-safe scissors, does your child cut a paper in half on a more or less straight line, making the blades go up and down? (Carefully watch your child's use of scissors for safety reasons.)</p>			
<p>3. using the shapes below to look at, does your child copy at least three shapes onto a large piece of paper using a pencil, crayon, or pen, without tracing? 9Your child's drawings should look similar to the design of the shapes below, but they may be different in size.)</p> <p style="text-align: center;">  </p>			
<p>4. Does your child unbutton one or more buttons? (Your child may use his own clothing or a doll's clothing.)</p>			
<p>5. Does your child draw pictures of people that have at least three of the following features: head, eyes, nose, mouth, neck, hair, trunk, arms, hands, legs, or feet?</p>			
<p>6. Does your child color mostly within the lines in a coloring book or within the lines of a 2-inch circle that you draw? (Your child should not go more than 1/4 inch outside the lines on most of the picture.)</p>			
<b>Problem Solving</b>			
<p>1. When you say, "Say five eight three", does your child repeat just the three numbers in the same order? Do not repeat the numbers. If necessary, try another series of numbers and say, "Say six nine two". (Your child must repeat just one series of three numbers for you to answer "yes" to this question.)</p>			
<p>2. When asked, "Which circle is the smallest? Does your child point to the smallest circle? (Ask this question without providing help by point, gesturing, or looking at the smallest circle.)</p> <p style="text-align: center;">  </p>			
<p>3. Without your giving help by pointing, does your child follow three different directions using the words "under", "between", and "middle"? For example, ask your child to put the shoe "under the couch." Then ask her to put the ball "between the chairs" and the book "in the middle of the table."</p>			
<p>4. When shown objects and asked, "What color is this?" does your child name five different colors, like red, blue, yellow, orange, black, white, or pink? (Mark "yes" only if your child answers the question correctly using five colors.)</p>			
<p>5. Does your child dress up and "play-act", pretending to be someone or something else? For example, your child may dress up in different clothes and pretend to be a mommy, daddy, brother, or sister, or an imaginary animal or figure.</p>			
<p>6. If you place five objects in front of your child, can he count them by saying, "one, two, three, four, five" in order? (Ask this question without providing help by pointing, gesturing, or naming.)</p>			
<b>Personal-Social</b>			
<p>1. Does your child serve herself, taking food from one container to another using utensils? For example, does your child use a large spoon to scoop applesauce from a jar into a bowl?</p>			

2. Does your child tell you at least four of the following? First name, age, city she lives in, last name, boy or girl, telephone number.			
3. Does your child wash his hands using soap and water and dry off with a towel without help?			
4. Does your child tell you the names of two or more playmates, not including brothers and sisters? (Ask this question without providing help by suggesting names of playmates or friends.)			
5. Does your child brush her teeth by putting toothpaste on the toothbrush and brushing all of her teeth without help? (You may still need to check and rebrush your child's teeth.)			
6. Does your child dress or undress himself without help (except for snaps, buttons, and zippers)?			