

# Kids Get Care

“Red Flags” Tool  
Developmental and Social/Emotional  
Surveillance for  
Children Birth to Five Years

*Brought to you by...*



**Public Health**

Seattle & King County

KIDS GET CARE PROGRAM

**King County Health Action Plan**

Collaborative Partnerships Improving Community Health

This checklist is intended as a “Red Flags” approach to developmental surveillance. It is not a standardized screening tool and is not meant to replace sound clinical judgement. It is, however, intended to help guide clinical decision-making on when to go to the next step of a standardized tool or referral for assessment.

This checklist is based on the developmental flow sheet created by the Infant Child Health Assessment Program, Medical and Health Research Association of New York City, Inc. with their permission. It was compiled by Katherine TeKolste, MD and Jill Sells, MD as consultants to the **Kids Get Care Program**.

Kids Get Care is a program to ensure children, regardless of insurance status, receive early integrated preventive physical, oral, developmental and mental health services through attachment to a health care home; a usual source of care in the community. Kids Get Care is part of the **King County Health Action Plan**, a collaborative community entity that focuses on system change and improvement of worsening health trends affecting vulnerable populations in King County, Washington.

If you would like more information about Kids Get Care, please see our website at [www.metrokc.gov/health/kgc](http://www.metrokc.gov/health/kgc) or contact Lisa Podell, Kids Get Care Program Manager at [lisa.podell@metrokc.gov](mailto:lisa.podell@metrokc.gov) or at (206) 296-2780.

For development or other health training requests contact:  
Cherie LaMaine, Kids Get Care Development Trainer at [cherie.lamaine@metrokc.gov](mailto:cherie.lamaine@metrokc.gov) or at (206) 296-4755

For more information about the King County Health Action Plan, please see our website at [www.metrokc.gov/health/kchap](http://www.metrokc.gov/health/kchap) or contact Susan Johnson, Director at [susan.johnson@metrokc.gov](mailto:susan.johnson@metrokc.gov) or at (206) 296-4669.

**Development** – Always ask for and follow up on parent concerns about development or behavior. At least 90% of infants should achieve the underlined developmental milestones by this age, with 75% passing the non-underlined milestones. **FURTHER DEVELOPMENTAL ASSESSMENT NEEDED IF YOU HAVE ANY ONE OF THE FOLLOWING:**

1. A 'NO' on any single underlined milestone, or
2. 'NO' on any two milestones, underlined or not

**Social/Emotional--** Topics for observation or discussion. Concerns may need further evaluation.

## 2 Weeks: Developmental Milestones

Y N

- Parent has no concern  
 Regards (looks at) face  
 Lifts head while in prone position



- Equal movements of arms and legs  
 Mother responds to infant cues

## Social and Emotional Issues

- Maternal-infant interaction (responsiveness)
- Infant temperament (easy, difficult, colicky...)

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## 2 Months: Developmental Milestones

Y N

Parent has no concern

Vocalizes

Smiles responsively

Follows to midline



Responds to sounds

## Social and Emotional Issues

- Maternal-infant interaction (responsiveness)
- Infant temperament (easy, difficult, colicky...)
- Parental style

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**Social/Emotional**-- Topics for observation or discussion. Concerns may need further evaluation.

## 4 Months: Developmental Milestones

Y N

Parent has no concern

Holds head up to 90 degrees



Laughs

Follows past midline

Grasps rattle

No persistent fist clenching

Quiets to familiar voice

## Social and Emotional Issues

- Able to be comforted
- Infant calm and alert at times (briefly)
- Shows interest in people and surroundings
- Child temperament

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2. 'NO' on any two milestones, underlined or not,
3. Presence of any item in the **BOLDED** box (possible autism spectrum disorder)

**Social/Emotional--** Topics for observation or discussion. Concerns may need further evaluation.

## 6 Months: Developmental Milestones

Y N

Parent has no concern

No head lag when pulled to sit



Bears some weight on legs when held upright

Rolls over

Imitates speech sounds

Turns toward voice

Transfer object from hand to hand

Cuddles

## Social and Emotional Issues

- Shows positive behavior and attitude toward caregivers
- Shows full range of emotions
- Initiates interaction by smiling or vocalizing

**Avoids Eye Contact**

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**Social/Emotional**-- Topics for observation or discussion. Concerns may need further evaluation.

## 9 MONTHS: Developmental Milestones

Y N

[[ ]] Parent has no concern

[[ ]] Sits without support

[[ ]] Stands holding on

[[ ]] Cruises (see glossary)

[[ ]] Imitates speech sounds

[[ ]] Thumb finger grasp



[[ ]] Says 'dada' or 'mama' non-specifically

[[ ]] Plays peek-a-boo

[[ ]] Responds to name

## Social and Emotional Issues

- Back and forth smiles, laughter, and other expressions with adult
- Is often afraid of strangers
- Intentional two-person communication
  - e.g. points for wants
  - e.g. reaches up to be picked up
- Expresses several emotions – mad, happy, sad, etc.

**Avoids Eye Contact**

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**Social/Emotional**-- Topics for observation or discussion. Concerns may need further evaluation.

## 12 MONTHS: Developmental Milestones

Y N

- Parent has no concern
- Stands alone 2 seconds
- Walks with help
- Says *Dada* and *Mama* specifically
- Responds to 'no'
- Precise pincer grasp (see glossary)
- Indicates wants by pointing or gestures
- Responds to pat-a-cake/bye-bye
- Bangs two blocks together

### Social and Emotional Issues

- Intentional two-person communication, increasing to several communications in a row
  - e.g. points for wants, takes item, vocalizes, gestures with item, etc.
- Expresses a range of emotions-mad, happy, sad, warmth, etc.

- **No babbling, pointing or other gesture**
- **Avoids eye contact**
- **Concerned child can't hear/tunes out**



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**Social/Emotional--** Topics for observation or discussion. Concerns may need further evaluation.

## 15 MONTHS: Developmental Milestones

Y N

Parent has no concern

Walks alone

Stoops to pick up toy on floor

Says 1 word other than *Mama* or *Dada*

Follows one step command without gesture

Jargons (see glossary)

### **Social and Emotional Issues:**

- Child points or otherwise brings interests to attention of another person
- Child enjoys communications with others – smiles, talking and gestures back and forth between caregiver and child

- **Persistent rocking, hand-flapping, or head-banging**
- **Avoids eye contact**
- **No single words by 16 months**
- **ANY loss of language or social skills**

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**Social/Emotional--** Topics for observation or discussion. Concerns may need further evaluation.

## 18 MONTHS: Developmental Milestones

Y N

Parent has no concern

Walks backward

Points to two body parts ('*Show me your nose, eyes, hair, etc.*')

Drinks from a cup

Imitates household chores such as sweeping

Uses 20 words

Understands the meaning of '*Get up*' or '*Sit down*'

Stacks two blocks

Scribbles

- **No single words**
- **Avoids eye contact**
- **Persistent rocking, hand flapping, head banging, or toe walking**
- **ANY loss of language or social skills**

## Social and Emotional Issues

- Shows negative feelings (child acts stubborn sometimes, trying to be independent)
- Communicates needs with gestures **and words** (e.g. Tugs, takes by hand, or otherwise directs parent *while asking* for item)
- Shows full range of emotion

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**Social/Emotional**-- Topics for observation or discussion. Concerns may need further evaluation.

## 24 MONTHS: Developmental Milestones

Y N

Parent has no concern

Kicks ball forward

Removes article of clothing (not hat)

Combines two words

Uses own name to refer to self

Vocabulary of more than 50 words

Strangers understand half of child's speech

Understands a two step verbal command without gestures ("*Pick up the toy; put it away.*")

Points to 6 named body parts

Stacks four blocks

## Social and Emotional Issues

- Shows pretend play patterns - e.g. tea party, feeding and diapering doll
- Interested in activities of other kids the same general age
- Imitates adult actions – e.g. wiping tabletop, phone use
- Shows affection
- Expresses independence in word and action (for example, says "No" and has temper tantrums)

- **No 2 word spontaneous (not echolalic) phrases [see glossary]**
- **Persistent rocking, hand flapping, head banging, or toe walking**
- **ANY loss of language or social skills**

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## 36 MONTHS: Developmental Milestones

Y N

- Parent has no concern
- Washes and dries hands
- Imitates vertical line (see glossary)
- Says what to do when *tired, cold, hungry* (1 of 3)
- Names 4 pictures (cat, dog, bird, horse, man)
- Identifies two pictures  
(*'Which flies? meows? barks? gallops? talks?'*)
- Throws ball overhand
- Pedals tricycle
- Asks 'What?'
- Asks 'Why?'

## Social and Emotional Issues

- Talks about events
- Talks about feelings and interests
- Enjoys play with other children same general age
- Has favorite friends
- Enjoys pretend play with roles for self or for dolls or other action figures

- **Persistent echolalia (repeating what was just said)**
- **Inappropriate play with toys/ no pretend play**
- **ANY loss of language or social skills**

**Development** – Always ask for and follow up on parent concerns about development or behavior. At least 90% of infants should achieve the underlined developmental milestones by this age, with 75% passing the non-underlined milestones. FURTHER DEVELOPMENTAL ASSESSMENT NEEDED IF YOU HAVE ANY ONE OF THE FOLLOWING:

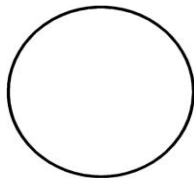
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**Social/Emotional**-- Topics for observation or discussion. Concerns may need further evaluation.

## 48 MONTHS: Developmental Milestones

Y N

- Parent has no concern
- Dresses with supervision
- Plays games with other children (such as tag)
- Says what to do when *tired, cold, hungry (2 of 3)*
- Says first and last name when asked
- Walks up and down stairs alternating feet
- Balances on each foot for 2 seconds
- Copies a circle



## Social and Emotional Issues

- Understands and is sensitive to feelings of others
- Fewer fights or arguments with friends
- Beginning to understand the difference between reality and pretend
- Pretend play has become more detailed and imaginative

- **Inappropriate play with toys/no pretend play**
- **ANY loss of language or social skills**

**Development** – Always ask for and follow up on parent concerns about development or behavior. At least 90% of infants should achieve the underlined developmental milestones by this age, with 75% passing the non-underlined milestones. FURTHER DEVELOPMENTAL ASSESSMENT NEEDED IF YOU HAVE ANY ONE OF THE FOLLOWING:

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**Social/Emotional**-- Topics for observation or discussion. Concerns may need further evaluation.

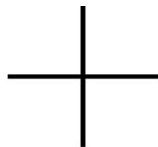
## 60 MONTHS: Developmental Milestones

Y N

Parent has no concern

Dresses without supervision

Copies a cross



Draws a person – 3 parts

Puts object 'on', 'under', 'in front of', and 'behind' when asked

Skips

Able to walk on tiptoe

Catches a bounced ball

Names 4 colors

## Social and Emotional Issues

- Understands feelings of others
- Enjoys play time with other children
- Little supervision required when playing with other children
- Growing independence (more able to do things without help)
- Follows simple rules
- Shows concern and care toward others

- **Avoids eye contact**
- **ANY loss of language or social skills**

## **Referral Resources - King County Services**

### **CHAP: 1-800-756-5437**

Families or professionals can call CHAP to get free information on low cost or free resources for **medical, dental or mental health concerns**. They have interpreters available on the phone to answer resource questions. If you have a concern that a child may be behind in development in King County, you can call CHAP and they will connect the child to a developmental screening or evaluation regardless of their ability to pay.

### **Children with Special Health Care Needs: 206-296-4610**

Children with Special Health Care Needs is a program offered through Public Health – Seattle & King County which provides linkages and coordination of services for all children birth to 18 with special needs, including chronic physical, developmental, behavioral or emotional conditions. The program also provides limited direct medical services, equipment and supplies to those families that meet financial and other program eligibility requirements. Public Health Nurses perform home visits and telephone consultation to families to assess a child's needs, refer a child to services and work with agencies to help provide services for a child.

## **Referral Resources - Statewide**

**Healthy Mothers, Healthy Babies:**                   **1-800-322-2588**                   [www.hmhbwa.org](http://www.hmhbwa.org)

Healthy Mothers, Healthy Babies Coalition of Washington State (HMHB) helps families in Washington to access information they need, from pre-pregnancy planning through childhood. Our 1-800 operators are available Monday - Thursday 8am to 5:30pm, and Friday 8am to 5pm.

**ASK**                   **1-800 322-2588 statewide referral number**  
**1-800-833-6388 TTY**

If you have a child with special needs you may have special questions. ASK has information on state-wide medical evaluations, referrals, health care coverage, parenting support, child care referrals and recreational opportunities for any age child with special health care needs. ASK is the state wide contact for children birth to three to get a free family resource coordinator who will help the child get a developmental evaluation, regardless of their ability to pay.

**Center for Children with Special Needs:** [www.cshcn.org/countyguides/king.doc](http://www.cshcn.org/countyguides/king.doc)

The Center for Children with Special Needs has a very helpful web site with links to resources for families and professional dealing with children with needs.



## **Developmental Surveillance Red Flags Glossary**

### **2 weeks:**

**Regards face** – Infant looks at or focuses on the face of person holding or otherwise interacting with the infant

**Lifts head while in prone** – While lying on tummy, infant is able to raise head up from the surface.

**Equal movements of the extremities** – infant is able to use arms and legs and is not favoring any extremity/extremities

### **2 months:**

**Vocalizes** – Infant is making sounds, such as small throaty sounds, ah, oh, ee, eh, oo, and uh, or coos, grunts, gurgles, squeals, etc.

**Smiles responsively** – When smiled at by caregiver or another adult, the infant returns the smile.

**Follows to midline** – When infant is looking at something attracting his/her attention, the eyes will follow it at least half way from one side to the other. Generally, infants focus best on items about 8 inches from their face. Infants like red, yellow or faces to follow.

### **4 months:**

**Holds head up to 90 degrees.** – When lying on stomach, the infant is able to raise head up to nearly vertical position. (See illustration)

**No persistent fist clenching** – In early infancy, most babies will hold their hands ‘fisted’ or with the fingers and thumb curled in on the palm of the hand. As an infant gets older, his/her hands open up with the fingers and thumbs uncurled more and more often. (This leads in to the ability to grasp items such as a rattle). By 4 months of age, an infant’s hands should not be in the ‘fisted’ position very often.

*Glossary Continued....*

**6 months:**

**No head lag when pulled to sit** – With the infant lying on his/her back, so they don't slip on the surface, pull him up to sitting position gently with his arms and hands. The infant should be able to use his/her neck muscles to hold his/her head pretty much in line with the trunk. The head should NOT be hanging backwards. Often infants with poor head control will flop their head forward with their chin to their chest once they are upright in the sitting position.

**Bears some weight on legs when held in standing position** - With the infant held in a standing position, allow his/her feet to rest on the surface of the table/floor. Slowly attempt to loosen your hand support to allow the infant to support his/her own weight. The baby should support her weight for several seconds or push with her feet and legs against the surface.

**Rolls over** – The infant rolls completely and intentionally from back to stomach or from stomach to back. (Accidentally doesn't count)

**Transfer object from hand to hand** – Infant passes a block or rattle or other object from one hand to the other hand. This should happen without using his/her chest, mouth, or table top.

**Avoids eye contact** – Infant seems uneasy and often looks away when someone looks at them or focuses his/her eyes on the infant's eyes.

**9 months:**

**Cruises** – The baby walks sideways while holding on to furniture or other support.

**Thumb-finger grasp** – Child picks up a small object (such as a raisin or Cheerio) by bringing together any part of the thumb and one or several fingers. This is different from 'raking' the small object – where the child picks up by a raking motion with the entire hand, usually curling the fingers over the object and raking it in to the palm to pick it up.

*Glossary Continued...*

**Says 'dada' or 'mama' non-specifically** – Child uses the words 'dada' and 'mama', but not necessarily to refer to their own parent. Some children will use 'mama' as a general distress signal, for example.

**12 months:**

**Says 'dada' and 'mama' specifically** – Child uses the words 'dada' and 'mama' to refer to their own parent. Other words commonly used in a family or culture to refer to mother and father would also count.

**Responds to 'No'** - The child responds to a 'No' command (made without a loud voice) by stopping the behavior even if only for a second.

**Precise pincer grasp** – Child uses the pad of the thumb and the pad of any fingertip to accurately pick up a small object.

**15 Months:**

**Jargons** – The child sounds like he/she is carrying on a conversation, although you may not understand any of it. She makes sounds like she is talking in sentences or carrying on a conversation even though she might not use real words.

**18 months:**

**Points to two body parts** – Points on a doll or on him/herself to 2 named body parts (do not count 'belly button'). For example, 'Point to the doll's nose – eyes – ears – mouth – hands – feet – tummy – hair.'

## *Glossary Continued...*

**Uses 20 words** – According to the parent, the child uses 20 words other than ‘Mama’ and ‘Dada’ on his or her own without coaching. The words can be in several languages and be used regularly by the child and understood by the parent as having meaning such as “nana” for banana. They should not be words that the child simply repeats after the parent says them.

**Scribbles** – Give the child a blank piece of paper and a safe writing tool (such as a crayon). Without showing the child how to use them watch what the child does. He/she should make marks on the paper on purpose, not accidentally or stabbing. The parent may help the child learn how to hold the crayon or safe writing tool.

### **24 months:**

**Combines two words** – Child on his own uses two-word sentences, such as ‘Want juice,’ ‘See Mommy,’ ‘Daddy go,’ etc. Generally you are looking for a subject-verb or a verb-object combination. For example, ‘no-no’ and ‘bye-bye’ don’t count.

**Strangers understand half of child’s speech** – A person who does not know the child, such as someone you meet at the store, finds that at least half of the child’s speech makes sense to the listener. (Words you can recognize if you speak the same language).

**Understands two step verbal command (for example ‘Pick up the toy. Put it away.’) without gestures** – When asked, child is able to understand and do two different actions in a row. Other examples, ‘Get the ball. Then close the door.’ This should be done without giving any hints to the child by body language, such as pointing.

**Points to 6 named body parts** - Points on a doll or on him/herself to 6 named body parts (do not count ‘belly button’). For example, ‘Point to the doll’s nose – eyes – ears – mouth – hands – feet – tummy – hair.’

**Echolalic phrases**- An echolalic phrase is a non-spontaneous phrase repeating what was just heard. The child automatically repeats back the series of words he/she just heard instead of speaking his/her own words.

## *Glossary Continued...*

### **36 months:**

**Imitates vertical line** – When an adult draws a vertical line and asks the child to draw the same type of line, the child imitates the line. This can be done with any writing implement – crayon, pencil, pen, or marker. Give up to three tries.

**Says what to do when tired, cold, hungry (1 of 3)**- Ask the child, “What do you do when you are tired (cold, hungry)?” Count any reasonable answer and count this item if the child can respond to at least one of the three questions. Examples of reasonable answers: *Tired* – sleep, go to bed, rest, *Cold* – get a blanket, put on my jacket, go inside, *Hungry* – eat, get a snack, etc.

**Names 4 pictures** – Show the child the pictures of the cat, dog, horse, bird and man. Point to one and ask, “What is this?” Child should know four of the five pictures.

**Identifies two pictures (Which flies? Meows? Barks? Gallops? Talks?)** – Using the same pictures as in the item above, the child is asked to identify the picture by the actions listed above. See if the child can point to or otherwise identify 2 pictures by the action described.

**Throws ball overhand** – Child is able to throw a ball using an overhand motion. You may show an overhand motion. A side arm or underhand throw does not count.

**Pedals tricycle** – Child is able to actually pedal the tricycle, big wheel or other pedal toy. Using the tricycle as a scooter by pushing with the feet on the ground instead of operating with the pedals does not count.

### **48 months:**

**Dresses with supervision** – Child can put on clothing items such as hat, shoes, socks, pants, underwear, pull-over shirt, dresses, and jacket on his/her own but may need help as to front versus back, correct foot, pulling pants over hips, and buttons/snaps/Velcro.

*Glossary Continued...*

**Says what to do when tired, cold, hungry (2 of 3)** – Child is able to answer at least two of the three questions (see instructions in 36-month section)

**Copies a circle** – The key issue here is that the child copies a circle, rather than drawing one after seeing someone else draw a circle. Show the child the picture of a circle. Ask her/him to make one like it. Give up to three chances. A child succeeds at this item if (s)he makes any form approaching a circle that is very nearly closed or closed. A continuous spiral does not count, it needs to be a single loop.

**60 months:**

**Dresses without supervision** – Child is able to dress on his or her own without help.

**Copies a cross** – As with the circle item (at 48 months above) the cross is drawn from the picture not from showing the child how to do it. The child is able to do this task if (s)he draws two lines that intersect (cross) somewhere near the midpoint of the lines, using only two lines. If the child draws one line and then draws the crossing line in two pieces (usually one on each side of the original line) it does not count.

**Draws a person – 3 parts** – When given paper and a pencil/crayon and asked to draw a picture of a person such as a boy, girl, Mommy, Daddy, etc., the child draws three or more body parts. Any body part that comes in twos (ears, eyes, arms, legs, hands, feet) must have both parts.

**Puts object 'on', 'under', 'in front of', and 'behind' when asked** – When given an object and asked to put it on (under) the table or in front of (behind) you, the child is able to do all four of these.

## **KIDS GET CARE also has an ORAL HEALTH RED FLAGS CHECKLIST available :**

### **QUESTIONS FOR A CHILD'S PARENT/CAREGIVER:**

YES	NO	Are there white spots and decay on your child's teeth?
YES	NO	Do you have any dental problems or concerns like cavities?
YES	NO	Do your other children have any dental problems or concerns like cavities?
YES	NO	Does your child like sugary snacks or drink lots of juice?
YES	NO	Does your baby (6 -18 months) fall asleep while nursing or with a bottle with juice or milk in it?

If the answer is **YES to 2 or more** of the above questions, the **parent should see their primary care provider** to discuss their concerns in more detail, for possible application of fluoride varnish to the affected child's teeth and a **referral to a pediatric dentist** if needed.

**To download the entire tool, including age-specific tips for parents and care-givers see:**  
[www.metrokc.gov/health/kgc/redflags-checklist.doc](http://www.metrokc.gov/health/kgc/redflags-checklist.doc)

## Why do ALL kids, 0-18 years old, need regular check-ups?



- To see how children are growing and developing
- To find problems early so that they can be treated right away
- To make sure kids have the shots (immunizations) they need to protect them from very serious diseases
- To check their hearing, vision and teeth
- To discuss risky behavior, like tobacco, alcohol, and drug use
- To talk about feelings, especially depression, and get help if they need it
- To talk about weight concerns, healthy eating, and exercise
- To get answers to ANY questions parents or guardians may have