Tactile

Do you or your child:

between seasonal clothing

\checkmark	dislike being held or always wants cuddles and hugs
✓	have difficulty with grooming needs (getting hair washed, getting hair or nails cut)
\	dislike taking a shower
✓	react aggressively when touched unexpectedly
✓	dislike being touched, kissed, etc.
✓	dislike getting hands dirty and/or avoid messy play or
/	avoid going barefoot
✓	feel excessively ticklish
/	withdraw from situations
✓	avoid sitting close to other people
/	always sit too close to others
/	always seem to be touching something or someone
/	have the same reaction to a small (paper-cut) vs a large injury (broken bone)

prefer long sleeves and pants or shorts and short sleeves regardless of weather-or have difficulty transitioning



Vestibular

Do you or your child seem to have a high tolerance to movement by exhibiting any of the following:

seems like they are always "on the go"	
√ has difficulty sitting still	
moves when talking, reading, etc.	
has difficulty paying attention	
craves intense movement experiences such as jumping on bed and furniture	
takes excessive risks during play or life (i.e. "adrenaline junky")	
√ seems accident-prone	
√ does not get dizzy easily	
enjoys spinning for long periods of time	

Do you or your child seem to have a low tolerance to movement and/or Gravitational Insecurity by exhibiting the following:

\checkmark	become anxious when feet leave the ground
\checkmark	have a great fear of falling
\checkmark	fear of climbing or heights
\checkmark	avoiding playground equipment
\checkmark	dislike having head upside down or tilted backwards
\checkmark	avoids jumping activities
\checkmark	is very cautious when going up and down stairs
\checkmark	seems slow at new movements
\checkmark	avoids walking along uneven surfaces
\checkmark	becomes dizzy with fast head turns
_/	suffers from motion sickness



Proprioceptive

Do you or your child:

\checkmark	difficulty with body awareness
\checkmark	difficulty planning new movements
\checkmark	difficulty knowing where his body is in relation to others and objects
\checkmark	chew constantly on objects
\checkmark	stomps feet on the floor when walking
\checkmark	deliberately crashes into objects
\checkmark	holds pencils too lightly
\checkmark	presses down on hard paper when writing
/	has difficulty with bandwriting and drawing

/ has difficulty lifting objects

uses a lot of force when playing with toys and may break them



Visual

Do you or your child:

\checkmark	have difficulty staying within lines when coloring or writing
\checkmark	complain of double or blurred
\checkmark	has difficulty putting puzzles together
\checkmark	has difficulty copying from books
\checkmark	have hard time finding something in a drawer
\checkmark	has difficulty following a moving object
\checkmark	omits words when reading
\checkmark	seem "disorientated" or overwhelmed by large crowds or big spaces
\checkmark	have difficulty with fine motor tasks
_/	have difficulty understanding concepts such as right/ left, up/down

/ become uncomfortable by moving objects and people

reverse letters and numbers



Auditory

Do you or your child:

cover ears to protect from sound

\checkmark	become easily distracted with noise
\checkmark	have difficulty paying attention
\checkmark	seem to misunderstand what is said
✓	become upset in noisy places
\checkmark	seem difficult to understand when speaking
\checkmark	have difficulty looking and listening at the same time
\checkmark	speak in a loud voice
\checkmark	have a poor vocabulary
/	have difficulty with reading



Olfactory/Smell

Do you or your child:

$\sqrt{}$	react negatively to,	or dislikes	smells that	other	children	do not	notice
-----------	----------------------	-------------	-------------	-------	----------	--------	--------

refuses to eat	certain foods	because	of their	smell

- become nauseated by bathroom odors
- seem bothered/irritated by smell of perfume or cologne
- seem bothered by smells in supermarket

Oral Motor/Taste

Do you or your child:

- / gag easily with food textures
- / avoid certain tastes
- classify as a picky eater
- crave certain foods
- chew on or lick nonfood objects
- / mouth objects
- / has difficulty with sucking, chewing, and swallowing



Miscellaneous

Other areas that may be affected by or related to sensory processing dysfunctions:

\checkmark	low self-esteem
\checkmark	low self-confidence
\checkmark	seems anxious
\checkmark	has difficulty tolerating changes in routines
\checkmark	has strict routines
\checkmark	Has difficulty transitioning from one activity to another
\checkmark	has difficulty playing/working with others
\checkmark	gets upset easily
\checkmark	does not persist with tasks/ gives up easily
\checkmark	is stubborn or uncooperative
✓	has frequent temper tantrums
✓	has difficulty making friends
✓	does not express emotions
✓	needs adult guidance or constant reassurance to play
\checkmark	has difficulty with social interactions
1	jumps from one activity to another

