

Children's Therapy Center

Pediatric Occupational Therapy

Helping children achieve their fullest potential.

7881 Egleberry Street, Gilroy, CA 95020 • 408-842-1121

OCCUPATIONAL THERAPY BEHAVIORAL CHECKLIST

Patient Name: _____

Following are several questions regarding your child's responses to certain situations that he/she is exposed to on a regular basis. The behaviors or responses that these situations evoke give important information, and are helpful in the screening/evaluation process.

Please indicate which of the following characteristics are exhibited by your child.

Does your child:

- Seem weaker than others his/her age; tire easily
- Experience difficulty with hopping, jumping, or running compared to others same age
- Appear stiff and awkward in his movements
- Seem clumsy, not know how to move body, bumps into things, falls out of chair
- Tend to confuse left and right
- Appear reluctant in playground participation/sports; prefers table activities
- Exhibit poor desk posture (slumps, leans on arm, head too close to work, other hand does not assist)
- Experience difficulty drawing, coloring, copying, cutting; possibly avoids these activities
- Have poor pencil grasp, drops pencil frequently, breaks pencil lead often
- Draw lines with are tight, wobbly, too faint or too dark
- Lack of established hand dominance after six years of age
- Have difficulty with reading
- Have difficulty with spelling
- Become distracted easily
- Appear hyperactive
- Appear to be a slow worker
- Always need to organize

- Have difficulty finishing tasks
- Experience difficulty following verbal instructions
- Have difficulty remembering information
- Have short attention span
- Seem to withdraw from touch
- Tend to wear coat when not needed; will not allow shirt sleeves to be pulled up
- Have trouble keeping hands to self; tends to “learn through fingers”
- Dislike being cuddled or hugged
- Appear fearful of activities that challenge balance
- Have an excessive craving for swinging, bouncing, slides, merry-go-rounds, rocking
- Appear overly sensitive to sounds
- Seem to talk excessively
- Like to make loud noises
- Have difficulty making self understood
- Appear to have difficulty understanding you/others
- Tend to repeat directions to self
- Have difficulty discriminating colors, shapes, or doing puzzles
- Read/write letter reversals after first grade
- Experience difficulty with eye tracking (following objects with eyes while holding head still)
- Experience difficulty with copying designs, numbers, or letters
- Become frustrated easily
- Act out behaviorally; difficulty getting along with others
- Apt to be impulsive or accident prone
- Easier to handle in small groups or individually
- Experience marked mood variations, outbursts, or tantrums
- Frequently out of seat