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## **Speech/Language/Dysphagia by 12 Months—Self Screening**

Check the skills your child can demonstrate and then refer to the \* to determine if a formal evaluation is indicated at this time. If an evaluation is recommended than please contact you child's primary care physician and/or a local Speech Language Pathologist to schedule an evaluation.

### **SPEECH/LANGUAGE SKILLS**

- Responds to No-No
- Responds to their name
- Gives object/toy on request "give me the ball"
- Says mama or dada
- Imitates waving Bye-bye
- Points to, pulls or pushes caregiver to desired object
- Vocalizes with a few vowels "ah, oooo, e..." and a few consonants "p, b, h, m"

**\*Refer to a Speech Language Pathologist if the child has less than 5 items checked**

### **FEEDING/DYSPHAGIA SKILLS**

- Consuming Liquids in a sippy cup and/or regular cup
- Consuming Finger Foods
- No choking or gagging observed while eating or drinking
- Eats at least 10 different foods

**\*Refer to a Speech Language Pathologist if the child has less than 4 items checked**