

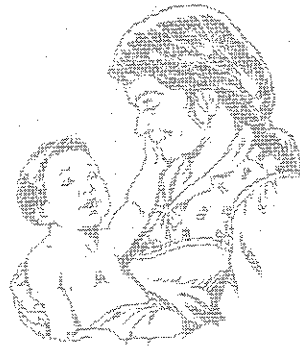
Ages & Stages Questionnaires: A Parent-Completed, Child-Monitoring System
Second Edition

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with assistance from Linda Mounts, LaWanda Potter, Robert Nickel, Elizabeth Twombly, and Jane Farrell

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◆ 10 Month ◆ **Questionnaire**



On the following pages are questions about activities children do. Your child may have already done some of the activities described here, and there may be some your child has not begun doing yet. For each item, please check the box that tells whether your child is doing the activity regularly, sometimes, or not yet.

Important Points to Remember:

- Be sure to try each activity with your child before checking a box.
- Try to make completing this questionnaire a game that is fun for you and your child.
- Make sure your child is rested, fed, and ready to play.
- Please return this questionnaire by _____.
- If you have any questions or concerns about your child or about this questionnaire, please call: _____.
- Look forward to filling out another questionnaire in _____ months.



ACTIVITIES FOR INFANTS 8 - 12 MONTHS OLD

<p>Let your baby feed her- or himself. This gives your baby practice picking up small objects (cereal, cooked peas) and also gives him experience with textures in his hands and mouth. Soon your baby will be able to finger feed an entire meal.</p>	<p>Your baby will be interested in banging objects to make noise. Give your baby blocks to bang, rattles to shake, or wooden spoons to bang on containers. Show your baby how to bang objects together.</p>	<p>A good pastime is putting objects in and out of containers. Give your baby plastic containers with large beads or blocks. Your baby may enjoy putting socks in and out of the sock drawer or small cartons (Jell-O, tuna or soup cans) on and off shelves.</p>	<p>Mirrors are exciting at this age. Let your baby pat and poke at herself in the mirror. Smile and make faces together in the mirror.</p>	<p>Your baby will begin using her or his index fingers to poke. Let your baby poke at a play telephone or busy box. Your baby will want to poke at faces. Name the body parts as your baby touches your face.</p>
<p>Put toys on a sofa or sturdy table so your baby can practice standing while playing with the toys.</p>	<p>Find a big box that your baby can crawl in and out of. Stay close by and talk to your baby about what he or she is doing. "You went <i>in!</i> Now you are <i>out!</i>"</p>	<p>Read baby books or colorful magazines by pointing and telling your baby what is in the picture. Let your baby pat pictures in the book.</p>	<p>Play hide-and-seek games with objects. Let your baby see you hide an object under a blanket, diaper, or pillow. If your baby doesn't uncover the object, just cover part of it. Help your baby find the object.</p>	<p>Play ball games. Roll a ball to your baby. Help your baby, or have a partner help him roll the ball back to you. Your baby may even throw the ball, so beach balls or Nerf balls are great for this game.</p>
<p>Turn on a radio or stereo. Hold your baby in a standing position and let your baby bounce and dance. If your baby can stand with a little support, hold her hands and dance like partners.</p>	<p>Play imitation games like Peekaboo and So Big. Show pleasure at your baby's imitations of movements and sounds. Babies enjoy playing the same games over and over.</p>	<p>Let your baby play with plastic measuring cups, cups with handles, sieves and strainers, sponges, and balls that float in the bathtub. Bath time is a great learning time.</p>	<p>Play Pat-a-cake with your baby. Clap his or her hands together or take turns. Wait and see if your baby signals you to start the game again. Try the game using blocks or spoons to clap and bang with.</p>	<p>Your baby will play more with different sounds like "la-la" and "da-da." Copy the sounds your baby makes. Add a new one and see if your baby tries it, too. Enjoy baby's early attempts at talking.</p>
<p>Make a simple puzzle for your baby by putting blocks or Ping-Pong balls inside a muffin pan or egg carton.</p>	<p>You can make another simple toy by cutting a round hole in the plastic lid of a coffee can. Give your baby wooden clothes pins or Ping-Pong balls to drop inside.</p>	<p>Say "Hi" and wave when entering a room with your baby. Encourage your baby to imitate. Help your baby wave to greet others. Waving "Hi" and "Bye" are early gestures.</p>	<p>Let your baby make choices. Offer two toys or foods and see which one your baby picks. Encourage your baby to reach or point to the chosen object. Babies have definite likes and dislikes!</p>	<p>New places and people are good experiences for your baby, but these can be frightening. Let your baby watch and listen and move at his or her own speed. Go slowly. Your baby will tell you when he or she is ready for more.</p>

YES SOMETIMES NOT YET

COMMUNICATION





Be sure to try each activity with your child.

- | | | | | |
|--|--------------------------|--------------------------|--------------------------|-----|
| 1. Does your baby make sounds like "da," "ga," "ka," and "ba"? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 2. If you copy the sounds your baby makes, does your baby repeat the same sounds back to you? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 3. Does your baby make two similar sounds like "ba-ba," "da-da," or "ga-ga"? (He may say these sounds without referring to any particular object or person.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 4. If you ask her to, does your baby play at least one nursery game even if you don't show her the activity yourself (e.g., "bye-bye," "Peekaboo," "clap your hands," "So Big")? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 5. Does your baby follow one simple command, such as "Come here," "Give it to me," or "Put it back," <i>without</i> your using gestures? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 6. Does your baby say one word in addition to "Mama" and "Dada"? (A "word" is a sound or sounds the baby says consistently to mean someone or something, such as "baba" for bottle.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |

COMMUNICATION TOTAL ___

GROSS MOTOR


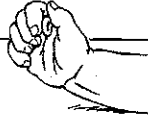
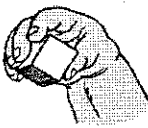

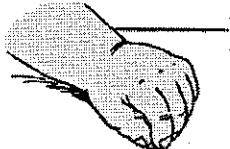
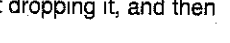
Be sure to try each activity with your child.

- | | | | | | |
|---|---|--------------------------|--------------------------|--------------------------|-----|
| 1. If you hold both hands just to balance her, does your baby support her own weight while standing? |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 2. When sitting on the floor, does your baby sit up straight for several minutes <i>without</i> using his hands for support? |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 3. When you stand her next to furniture or the crib rail, does your baby hold on without leaning her chest against the furniture for support? |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 4. While holding onto furniture, does your baby bend down and pick up a toy from the floor and then return to a standing position? |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 5. While holding onto furniture, does your baby lower himself with control (without falling or flopping down)? | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 6. Does your baby walk along furniture while holding on with only one hand? | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |

GROSS MOTOR TOTAL ___

YES SOMETIMES NOT YET

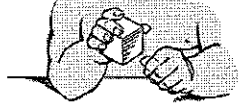
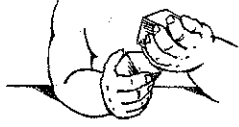
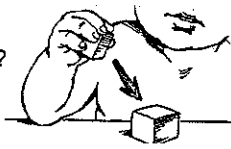
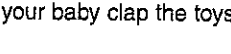
FINE MOTOR *Be sure to try each activity with your child.*

- | | | | | | |
|--|---|--------------------------|--------------------------|--------------------------|-------|
| 1. Does your baby pick up small toys with only one hand? |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 2. Does your baby <i>successfully</i> pick up a crumb or Cheerio by using her thumb and all her fingers in a raking motion? (If she already picks up a crumb or Cheerio, check "yes" for this item.) |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 3. Does your baby pick up a small toy with the <i>tips</i> of his thumb and fingers? (You should see a space between the toy and his palm.) |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 4. After one or two tries, does your baby pick up a piece of string with her first finger and thumb? (The string may be attached to a toy.) |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 5. Does your baby pick up a crumb or Cheerio with the tips of his thumb and a finger? He may rest his arm or hand on the table while doing it. |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ * |
| 6. Does your baby set a small toy down, without dropping it, and then take her hand off the toy? |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |

FINE MOTOR TOTAL ___

**If fine motor item 5 is marked "yes" or "sometimes," mark fine motor item 2 as "yes."*

PROBLEM SOLVING *Be sure to try each activity with your child.*

- | | | | | | |
|---|---|--------------------------|--------------------------|--------------------------|-----|
| 1. Does your baby pass a toy back and forth from one hand to the other? |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 2. Does your baby pick up two small toys, one in each hand, and hold onto them for about 1 minute? |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 3. When holding a toy in his hand, does your baby bang it against another toy on the table? |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| 4. While holding a small toy in each hand, does your baby clap the toys together (like "Pat-a-cake")? |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |

YES SOMETIMES NOT YET

PROBLEM SOLVING *(continued)*

- 5. Does your baby poke at or try to get a crumb or Cheerio that is inside a clear bottle (such as a plastic soda-pop bottle or baby bottle)? _____
- 6. After he watches you hide a small toy under a piece of paper or cloth, does your baby find it? (Be sure the toy is completely hidden.) _____

PROBLEM SOLVING TOTAL _____

PERSONAL-SOCIAL *Be sure to try each activity with your child.*



- 1. While on her back, does your baby put her foot in her mouth? _____
- 2. Does your baby drink water, juice, or formula from a cup while you hold it? _____
- 3. Does your baby feed himself a cracker or a cookie? _____
- 4. When you hold out your hand and ask for her toy, does your baby offer it to you even if she doesn't let go of it? (If she already lets go of the toy into your hand, check "yes" for this item.) _____
- 5. When you dress him, does your baby push his arm through a sleeve once his arm is started in the hole of the sleeve? _____
- 6. When you hold out your hand and ask for her toy, does your baby let go of it into your hand? _____

PERSONAL-SOCIAL TOTAL _____

OVERALL *Parents and providers may use the bottom of the next sheet for additional comments.*

- 1. Do you think your child hears well? YES NO
If no, explain: _____
- 2. Does your baby use both hands equally well? YES NO
If no, explain: _____
- 3. When you help your baby stand, are his feet flat on the surface most of the time? YES NO
If no, explain: _____
- 4. Does either parent have a family history of childhood deafness or hearing impairment? YES NO
If yes, explain: _____

OVERALL (continued)

5. Do you have any concerns about your child's vision?

YES NO

If yes, explain: _____

6. Has your child had any medical problems in the last several months?

YES NO

If yes, explain: _____

7. Does anything about your child worry you?

YES NO

If yes, explain: _____