When you take your child to a well visit, your doctor or nurse will also do developmental monitoring. The doctor or nurse might ask you questions about your child’s development or will talk and play with your child to see if he or she is developing and meeting milestones. A missed milestone could be a sign of a problem, so the doctor or another specialist will take a closer look by using a more thorough test or exam (CDC, 2021).

**Developmental Screening**

*Developmental screening* takes a closer look at how your child is developing. Your child will get a brief test, or you will complete a questionnaire about your child. The tools used for developmental and behavioral screening are formal questionnaires or checklists based on research that ask questions about a child’s development, including language, movement, thinking, behavior, and emotions. Developmental screening can be done by a doctor or nurse, but also by other professionals in healthcare, community, or school settings.

Developmental screening is more formal than developmental monitoring and normally done less often than developmental monitoring. Your child should be screened if you or your doctor have a concern. However, developmental screening is a regular part of some of the well-child visits for all children even if there is not a known concern.

The American Academy of Pediatrics (AAP) recommends that all children receive autism screening at 18 and 24 months of age. The Modified Checklist of Autism in Toddlers (M-CHAT-R) is one of the AAP’s recommended tools. The M-CHAT-R™ is a scientifically validated checklist of questions used for screening children between 16 and 30 months of age to assess their risk for autism spectrum disorder (ASD). The M-CHAT-R is called a “screener” because it is designed to identify those children who need to be referred for a full evaluation. There is a possibility that your child may screen positive on the M-CHAT-R but will not be diagnosed with ASD. Therefore, it is important to follow up with your health care provider (Hyman, 2020).

If your child is at higher risk for developmental problems due to preterm birth, low birthweight, environmental risks like lead exposure, or other factors, your healthcare provider may also discuss additional screening. If a child has an existing long-lasting health problem or a diagnosed condition, the child should have developmental
monitoring and screening in all areas of development, just like those without special healthcare needs.

* If your child’s healthcare provider does not periodically check your child with a developmental screening test, you can ask that it be done *

**Comprehensive Developmental Evaluation:**

A brief test using a screening tool does not provide a diagnosis, but it indicates if a child is on the right development track or if a specialist should take a closer look. If the screening tool identifies an area of concern, a formal *developmental evaluation* may be needed. This formal evaluation is a more in-depth look at a child’s development, usually done by a trained specialist, such as a developmental pediatrician, child psychologist, speech-language pathologist, occupational therapist, or other specialist. The specialist may observe the child, give the child a structured test, ask the parents or caregivers questions, or ask them to fill out questionnaires. The results of this formal evaluation determines whether a child needs special treatments or early intervention services or both.

**Assessments child may receive:**

Your health care provider may also provide referrals for an evaluation or additional testing, which may or may not be covered by insurance. Here are some important points:

- An audiological assessment (hearing test) referral should be made for all concerns regarding speech, language or hearing difficulties. This is usually done by an audiologist.

- A cognitive evaluation (or developmental assessment) using standardized tests that measure both verbal and nonverbal abilities should be performed by a psychologist or other professional experienced in testing children.

- A medical and neurological evaluation may need to be conducted to assess such issues as acquired brain injury, seizure disorder, self-injury and sleep or eating disturbances.

- A speech-language-communication evaluation should be performed on all children who have communication difficulties. This is done by a speech-language pathologist or psychologist.

- An evaluation of sensorimotor skills by a physical or occupational therapist should be considered when a child demonstrates difficulties in how he or she moves or in sensory responses, as part of the diagnostic, cognitive, medical or speech evaluation.
- If your health care provider sends you to a specialist for a diagnostic assessment of autism, you will receive a written report of the results of your child’s evaluation. This should also include information on your child’s strengths and weaknesses, as well as general level of developmental functioning.

Document Resources:
