



## Joint Follow-up: 4 years

♂ Boy  ♀ Girl  Date of the visit: \_\_\_\_\_ Age: \_\_\_\_\_ Accompanied by: \_\_\_\_\_

### Parental Concerns

\_\_\_\_\_  
\_\_\_\_\_

### Life Context

- Type of day-care?: \_\_\_\_\_  Preschool??: \_\_\_\_\_  
 Change in the family?: \_\_\_\_\_  
 Social support network?: \_\_\_\_\_  Difficulties in feeding the family?: \_\_\_\_\_  
 Other \_\_\_\_\_

### Health Monitoring

\_\_\_\_\_  
\_\_\_\_\_

### Current Lifestyle Habits

#### Nutrition

- Water offered during meals: \_\_\_\_\_  Fluoride if risk of cavities? (\*) \_\_\_\_\_  
 Cow's milk 2% or enriched soy milk (max 20 oz. or 600 ml/day)? \_\_\_\_\_  Other supplements/natural products? \_\_\_\_\_  
 **Avoid juice:** \_\_\_\_\_  Vegetarianism? \_\_\_\_\_  
 Vitamin D: 400 IU/day supplement: \_\_\_\_\_  **Proportion of foods from the 3 food groups?** \_\_\_\_\_

**Sleep (nbr of hours/24 h)?:** \_\_\_\_\_ **Is exposed to screens?** (nb min./d) \_\_\_\_\_ **Various physical activities (nbr of hours/d):** \_\_\_\_\_

### Developmental Surveillance

#### Cognitive

- Copies a circle and a cross (without demonstration).  
 Draws a person by representing at least four body parts (e.g., head, eyes, nose, mouth, arms, legs).  
 Knows the difference between boys and girls (e.g., can tell who are the boys in the group).  
 Names four colours.  
 Counts at least four objects.  
 Understands some opposing concepts: "long/short", "behind/in front", "near/far", "inside/outside".  
 Plays pretend: creates more detailed scenarios where he or she can take on several roles (e.g., parent, spouse, doctor).

#### Physical and Motor

- Stands on one foot for at least 4 seconds without support.  
 Catches a ball that is thrown to him/her with arms extended.  
 Holds paper in place when drawing.  
 Uses one hand preferentially.  
 Eats meals unaided and without making a mess, using utensils.  
 Undresses and dresses unaided, except for buttons, some zippers or tight clothing (e.g., can put on his or her coat alone).

#### Language

- Responds to verbal instructions of 3 or more steps in the same context without the support of gestures or pictures (e.g., "Give me your hat, boots and mitts").  
 Asks and answers different types of questions (e.g., "Why?", "When?").  
 Uses a variety of conjugated verbs (e.g., "The baby fell down", "Mommy is coming later").  
 Properly uses "me", "you" and the pronouns "I", "you", "he", "she", "we". ("I" and "a" can replace "she" and "he").  
 Tells a short story in 2 or 3 sentences.  
 Speaks clearly enough to be understood most of the time, without repeating sounds or words.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Developmental Surveillance (continued)

### Social and Emotional

- Plays with other children to achieve a common goal (e.g., builds a structure out of blocks with other children).
- Agrees to end an activity when asked to do so by an adult.
- Can wait his or her turn (e.g., can wait his or her turn to speak during a conversation, to take his or her turn while playing a board game).
- Tries to comfort another child by reproducing the adult's behavior in the same context (e.g., brings a toy, uses soft words).
- Expresses emotions using words (e.g., "I'm angry").

### Red Flags

- Moves one side of his body little or not at all in relation to the other (asymmetrical use: avoids using one hand, keeps one hand more closed than the other).
- Has difficulty on stairs or walking (frequent falls, loss of balance, clumsiness, always walks on tiptoes).
- Does not look at the person when talking to them (eye contact).
- Seems not to hear well.
- Seems not to be able to see well.
- Loses a skill he or she has already learned (regression).

## Physical Examination

Weight: \_\_\_\_\_ Perc: \_\_\_\_\_ Height: \_\_\_\_\_ Perc: \_\_\_\_\_ BMI: \_\_\_\_\_ Perc: \_\_\_\_\_ TA: \_\_\_\_\_

General appearance: \_\_\_\_\_

- |  |   |   |
|--|---|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Red reflex</li> <li><input type="checkbox"/> Corneal reflex</li> <li><input type="checkbox"/> Modified cover test</li> <li><input type="checkbox"/> Visual acuity (3-5 years)</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> ENT<br/>Eardrums: _____</li> <li><input type="checkbox"/> Dentition (cavities?): _____</li> <li><input type="checkbox"/> Heart</li> <li><input type="checkbox"/> Lungs</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Abdomen</li> <li><input type="checkbox"/> External genital organs</li> <li><input type="checkbox"/> Limbs</li> <li><input type="checkbox"/> Teguments: _____</li> <li>Suspicious lesions?: _____</li> <li><input type="checkbox"/> Gait: _____</li> </ul> |
|--|---|---|

Observations \_\_\_\_\_

## Promotion of Healthy Lifestyles and Preventive Advices

- |  |  |   |
|--|--|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Avoid juice, offer water instead</li> <li><input type="checkbox"/> Offer a variety of foods from the 3 food groups: <u>vegetables and fruits, whole grain products and protein foods</u></li> <li><input type="checkbox"/> Promote healthy eating behaviours: <u>provide nutritious meals and snacks at regular times, eat at the table and not in front of the screen, avoid rewarding with food, respect the child's hunger and satiety cues</u></li> <li><input type="checkbox"/> Oral hygiene: <u>dental floss and tooth brushing 2 times a day with pea-sized amount of fluoride toothpaste</u></li> <li><input type="checkbox"/> Encouraging a smoke-free environment</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Limited screen time (maximum 1 hour)</li> <li><input type="checkbox"/> Promotion of various physical activities (<u>≥ 3 hours/day for an active lifestyle</u>)</li> <li><input type="checkbox"/> Encourage good hygiene of sleep (<u>&gt; 10h/24 hours</u>)</li> <li><input type="checkbox"/> Encourage a quality day-care attendances especially if underprivileged environment</li> <li><input type="checkbox"/> Encouraging reading awareness</li> <li><input type="checkbox"/> Avoiding violent programmes</li> <li><input type="checkbox"/> Supporting Parenting Skills: attitude relative temper tantrums, discipline (consistency and coherence between parents), etc.</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Safety (motor vehicles, ATV, bicycle helmet, crossing street, <u>sun protection and seasonal protection, drowning, trampoline, dog bites</u>)</li> <li><input type="radio"/> Firearms storage</li> <li><input type="radio"/> Prevention of sexual abuse</li> <li><input type="checkbox"/> Small responsibilities, autonomy</li> <li><input type="checkbox"/> Stimulation of development (see guide)</li> <li><input type="checkbox"/> <u>Promote vaccination: support for reluctant parents.</u></li> </ul> |
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## Impressions and Conducts

### Impressions

- Physical health:  
\_\_\_\_\_
- Growth:  
\_\_\_\_\_
- Development:  
\_\_\_\_\_
- Other impression(s):  
\_\_\_\_\_  
\_\_\_\_\_

### Conducts


### General conduct

- Immunization:**
- DTaP-polio
  - 2<sup>nd</sup> Varicella vaccine
  - Reminder meningococcal A, C, Y, W<sub>135</sub> and meningococcal B vaccines (\*)
  - Regular visits to the dentist (in priority if cavities)
  - Vision test (optometrist) if not done with physical examination
  - Lipid profile, if not done? (\*)
  - Reference if overweight or obesity
  - Blood lead test? (\*)
  - Hearing test if retarded language skills and/or questionable sensitivity
  - Tools or resources for parents:  
\_\_\_\_\_

Signature : \_\_\_\_\_ Next appointment: \_\_\_\_\_