



Université de Montréal

RÉGIE RÉGIONALE DE LA NUNAVIK REGIONAL SANTÉ ET DES SERVICES BOARD OF HEALTH

00	SOCIAUX DU NUNAVIK AND SOCIAL SERVICES	
5 years follow-u	p	
od Boy □ ♀ Girl □ Date of t	the visit: Ag	e: Accompanied by:
	Parental Conc	erns
	Life Contex	t
☐ Attending daycare?: ☐ Food insecurity?: ☐ Other	Stressors (separation, grief, se	Current family and friends support?:ubstance abuse or mental health conditions?):
	Health Monito	oring
	Current Lifestyle	Hahits
Nutrition  Cow's milk 2% or 3,25% or enriched soy (max 16 oz. or 500 ml/day)  Avoid juice:  Vitamin D: 400 IU/day supplement:	y milk? O Sti	ill wear diapers during day:
Sleep (nbr of hours/24h)?:	exposed to screens? (nb min./d)	Vigorous physical activities (1 hour/d):
	Developmen	tal
Cognitive  ☐ Draws elaborate images that you recognize (e.g. sun, house, car).  ☐ Knows the main colours (more than 5 colours).  ☐ Counts out loud or on his fingers to answer.  How many?	Physical and Motor  Runs with ease around obstacles. Goes up and down stairs without support or assistance. Jumps on one foot 5 to 10 times. Throws and catches a ball with ease. Dresses and undresses with minimal assistance (can button and unbutton)	Language  ☐ Responds to longer and more complex instructions (e.g., "Put on your coat and then your mittens"), several actions (e.g., "Pick up the cars, put them in the bin and put the bin on the table").  ☐ Answers the questions "How much?", "Why?", "When?", "How?".  ☐ Makes sentences of 5 words or more or uses log words on a regular basis.  ☐ No longer uses baby words  ☐ Uses the right words to talk about the present, past and future.

## 5 years follow-up (suite)

Developmental Developmental Developmental Developmental Developmental Developmental Developmental Development						
Social and Emotional  Waits his or her turn and shares when playing with other children.  Adjusts his behavior to the context (e.g., calm during the assessment conversation, more energetic at the park).  Expresses and explains emotions (e.g., "I'm angry because").  Can calm down in less than 20 minutes when upset.  Can engage in an activity he or she likes for 15 minutes.		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).  Has difficulty playing with peers or participating in group activities (even if very verbal) or has little interest in playing with other children.  Does not look at the person when talking to them (eye contact).  Seems not to hear well.  Seems not to see well.  Loses a skill he or she has already learned (regression).				
Physical Examination						
Weight: Perc:	_	Perc:	BMI: Perc: BP:			
General appearance:  Red reflex Corneal reflex Visual acuity (3-5 years)  *** Remember to look for active tuberculose i	ENT Eardrum Teeth (c) Heart Lungs	n eight and weight	Limbs Teguments: Unexplained lesions?:			
Observations						
Promotion of Healthy Lifestyles and Preventive Advices						
☐ Recommend tooth brushing 2 times a day with fluoride toothpaste (the size of a small pea)       ☐ Avoid screen time at mealtimes and before bedtime       ☐ Ensuring the child's safety: motorized vel before bedtime         ☐ Promote a traditional and varied diet       ☐ Avoiding violent programmes       ☐ Avoiding violent programmes       ☐ Small responsibilities, autonomy       ☐ Encouraging a smoke-free environment of sexual abuse         ☐ Limited screen time shared with caregiver (maximum 1 hour/d)       ☐ Firearms storage       ☐ Parenting skills: refer to Inunnguiniq Child's parenting address and phononumber, sun protection and seasonal protection and						
Impressions and Plan						
Impressions	P	lan	General conduct			
☐ Physical Health: ☐ Growth:	Refer to Tasiurtigiit program if any of to developmental items have not been mor if developmental difficulties or dela are suspected  Refer to audiology if language delay of parental concerns about hearing  Suggest parents to participate in SIPF					
☐ Development:	(llagiilluta) activi village	ties if available in the	☐ Regular visits to the dentis (in priority of cavities) ☐ Optometrist request a consultation between 3 and 5 yo ☐ Lipid profile, if not done? (*) ☐ Reference if overweight or obesity ☐ Blood lead test? (*)			
Other impression(s):  Signature :			Prochain RDV :			

(\*) If the child is at risk, see Recommandations: https://enseignement.chusj.org/fr/Formation-continue/ABCdaire/recommandations.