



Name:

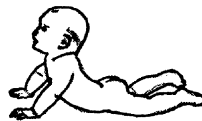
Geburtsdatum:

U4

Dear Parents,

You now know your child very well. He or she has probably made significant developmental progress since the last checkup. You discover something new every day. But often your child will not show me everything they can do in a checkup situation: I therefore also have to rely on your observations and have therefore prepared a few questions. **Please circle the appropriate answer.**

How is your child fed?	Breastfed	/	Formula-fed
How many feedings does your child get per day?		
Do you give Vigantol-Oil regularly?	Yes		No
How long does your child sleep at night in one stretch?	hours	
Does your child react to noises / do they get startled?	Yes		No
Does your child turn its head towards a noise?	Yes		No
Does your child raise its head when you put them on their stomach?	Yes		No
How do they support themselves with their arms?			



Does your child smile at you?	Yes		No
Do they hold eye contact for any length of time?	Yes		No
Does your child look at an object held in front of them?	Yes		No
Does your child observe their surroundings?	Yes		No
Do they put their hands in their mouth?	Yes		No
Do their hands play with each other, and does your child watch this game?	Yes		No
Does your child have different cries? For example, do you already recognize when your child is hungry based on the cry?	Yes		No
Is there anything that causes you concern? If yes, what is it?	No		Yes