Current topics

A suggested child-health clinic form

R. S. ILLINGWORTH

Children's Hospital, Sheffield

After more than 30 years' experience of baby clinics, first in an obstetrics hospital and more recently in Area Health Authority clinics, I am convinced that there is a need for a suitable form for the use of clinic doctors and health visitors, and for family doctors who have their own child health clinics. I believe that the form I have designed provides a good basis.

The assessment, and the form recording it, must be simple and practical. An assessment which takes about 30 minutes is certainly necessary in special circumstances if there is difficulty in the diagnosis, but it is impractical in a busy clinic with babies and children awaiting immunisation, or assessment, or both. Hence all irrelevant developmental features—interesting as they are, and sometimes important for difficult cases—must be eliminated. Milestones and tests should be strictly confined to those that matter, those which are extremely unlikely to miss any significant abnormality.

As in a passport form, application for life insurance, or VAT assessment form, each question must be answered and so must be capable of being answered. For instance, it is useless in the 6-week assessment to include the word 'reflexes', as is currently done in a commonly used form; the clinic doctor cannot be expected to know which of the 70 or so primitive reflexes is relevant, and he therefore has to decide whether to insert a 'yes' or 'no', or a tick or a cross. He almost always inserts a tick, hardly an informative answer.

In a much used school clinic form, there is the heading:

<table>
<thead>
<tr>
<th>Development, hernia</th>
<th>☐</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other</td>
<td>☐</td>
</tr>
<tr>
<td>Psychological</td>
<td>☐</td>
</tr>
<tr>
<td>Stability</td>
<td>☐</td>
</tr>
</tbody>
</table>

In my form, there are spaces with headings which anyone can understand: they are 'normal', 'doubtful', 'abnormal', with a space for explaining why the finding may be abnormal.

I have left no space for an overall score, in the form of a figure. Some features of a child's development—especially his alertness, responsiveness, and interest in surroundings—are much more important than others. It is not the place of a clinic doctor to attempt to calculate an IQ score: but he is required to separate the normal from the abnormal, to detect the child who calls for special investigation by an expert. I have avoided defining the range of normal, for it is never possible to insert the exact dividing line between normal and abnormal.

I have sketched the principal features of motor and manipulative development because many doctors and health visitors like to have such a guide (Illingworth, 1977). For the same reason I have given the average age at which milestones are reached, using Gesell's figures. For further information about these see Illingworth (1979).

My intention is that all the information will go on a 6-sided form card, similar to the one now often used in clinics. I would welcome suggestions for its improvement, but the form must not be lengthened.

Permission was obtained from Blackwell Scientific Publications for reproduction of the sketches.

References


Correspondence to Professor R. S. Illingworth, Children's Hospital, Western Bank, Sheffield S10 2TH.

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# A suggested child-health clinic form

## Health record (first 5 years)

<table>
<thead>
<tr>
<th>Surname: (block letters)</th>
<th>Christian names:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date of birth</th>
<th>Mother married or single</th>
<th>Where born</th>
<th>Sex</th>
<th>Birthweight (kg)</th>
<th>Birthweight (lb)</th>
<th>Head circumference (cm)</th>
<th>Duration of gestation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M/S</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address</th>
<th>Telephone:</th>
<th>Doctor’s address</th>
<th>Telephone:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Parents: year of birth</th>
<th>Occupation</th>
<th>Health</th>
<th>Relevant illness, especially genetic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Father</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Previous pregnancies</th>
<th>Child alive year of birth</th>
<th>Special illness or handicap</th>
<th>Miscarriage (year)</th>
<th>Stillbirth (year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
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<td>3</td>
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<td></td>
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<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Risk factors</th>
<th>Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td>i.e. Rubella</td>
<td>Vertex</td>
</tr>
<tr>
<td>Other infection in pregnancy</td>
<td>Breech</td>
</tr>
<tr>
<td>Blood group incompatibility</td>
<td>Caesarean</td>
</tr>
<tr>
<td>APH</td>
<td>Condition at birth</td>
</tr>
<tr>
<td>Diabetes</td>
<td>Anoxia</td>
</tr>
<tr>
<td>Toxaemia</td>
<td>Other</td>
</tr>
<tr>
<td>Drugs in pregnancy</td>
<td>Treated in intensive care unit</td>
</tr>
<tr>
<td>Other illness</td>
<td>Newborn period</td>
</tr>
<tr>
<td>Other</td>
<td>Anopec attacks</td>
</tr>
<tr>
<td>Other illness</td>
<td>Congenital abnormalities</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Immunisation</th>
<th>Date</th>
<th>Booster</th>
<th>Significant reaction</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>DPT</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DT</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Polio</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BCG</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Measles</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Hearing test | |
|--------------| |
6 weeks (corrected age: prematurity allowed for)

<table>
<thead>
<tr>
<th>Date</th>
<th>Number of days after birth</th>
<th>Weight (kg)</th>
<th>Weight (lb)</th>
<th>Head circumference (cm)</th>
<th>Head circumference (in)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Feeding</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Breast</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Modified dried milks</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Measures of powder</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Water</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Number per day</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other foods</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

History
Any problems (e.g. crying, sleep, feeding, vomiting)

Developmental history

<table>
<thead>
<tr>
<th>Smiling in response to mother (average 4–6 weeks)</th>
<th>If +, say age it began</th>
<th>Doubtful</th>
<th>No</th>
</tr>
</thead>
</table>

Examination
Interest, alertness, responsiveness
Eyes (look for nystagmus, opacity, persistent squint)
Development prone

- Newborn
- 6 weeks
- 8 weeks

As differences in weight between boys and girls are so slight only one chart is necessary.
**A suggested child-health clinic form**

### Examination

<table>
<thead>
<tr>
<th>Normal</th>
<th>Doubtful</th>
<th>Abnormal</th>
<th>If doubtful or abnormal, in what way?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neurological examination (e.g. tone—exaggerated knee jerks, persistent ankle clonus, hypotonia, hypertonia)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Back (look for congenital dermal sinus)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mouth (no thrush)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heart</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Abdomen</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Umbilicus</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hip, abduction</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Testes—descended or will descend</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skin</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overall opinion</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Action taken

i.e. Letter to GP to hospital

- Why?
- Extra appointment (date)
- Note for health visitor

### Intermediate

**Date**

### Milestones

i.e. Prone

<table>
<thead>
<tr>
<th>Normal</th>
<th>Doubtful</th>
<th>Abnormal</th>
</tr>
</thead>
</table>

- Pulled to sit, no head lag
  - 3 months

- Turns to sound (average 3–4 months) on level with ear
  - Plays with rattle—placed in hand (average 3–4 months)
  - Reaches for and gets object not placed in hand (average 5 months)

- 4 months
### 6 months (corrected age: prematurity allowed for)

<table>
<thead>
<tr>
<th>Date</th>
<th>Age (weeks)</th>
<th>Weight (kg)</th>
<th>(lb)</th>
<th>Head circumference (cm)</th>
<th>(in)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**History**
- Any problems (e.g. crying, sleep, feeding, vomiting)
- Any illness?

**Examination**

<table>
<thead>
<tr>
<th>Developmental history</th>
<th>If +, say age it began</th>
<th>Doubtful</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turns to sound (average 3-4 months)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reaches and gets objects (not placed in hand)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chews (not sucks) average 6 months</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Eyes**
- Sees pellet or cube
- Development
  - Prone

**Supine, head up spontaneously**

**Interest, alertness, responsiveness**

**Neurological (e.g. tone; hypotonia or hypertonia)**

**Hearing**
- Right
- Left

**Mouth (look for thrush)**

**Heart**

**Abdomen**

**Hips (abduction)**

**Testes (as before)**

**Skin**

**Overall opinion**

**Action taken**
- i.e. Letter to GP
- to hospital
- Why?
- Extra appointment (date)
- Note for health visitor

**Intermediate**
- Sit for seconds on floor, no support (average 32 weeks)
## 10-12 months (corrected age: prematurity allowed for)

<table>
<thead>
<tr>
<th>Date</th>
<th>Age (months)</th>
<th>Weight (kg)</th>
<th>(lb)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### History
- Any problems (e.g. crying, sleep, feeding, vomiting, sphincter control)
- Any illnesses?

### Developmental history
- Sits on floor for seconds, no support (average 7 months)
- Crawls on abdomen (average 9 months)
- Creeps, hands and knees (average 10 months)
- Walks, holding on to furniture (average 11 months)
- Chews (average 6 months)
- Bye-bye, pat-a-cake (average 9 months)
- Helps dress (arm out for coat, foot for shoe) (average 10 months)
- Words with meaning (average 12 months)

<table>
<thead>
<tr>
<th>If +, give age it began</th>
<th>Doubtful</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Examination
- Normal
- Doubtful
- Abnormal
- If doubtful or abnormal, in what way?

### Action taken
- i.e. Letter to GP
- to hospital
- Extra appointment (date)
- Note for health visitor

### Intermediate milestones (average)
- No more casting or mouthing of objects 15 months
- Takes shoes, socks off 15 months
- Domestic mimicry 15 months
- Tells mother he wants pot 18 months
- Points to 2-3 parts of body on request 18 months

### Developmental milestones

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>9-10 months</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

- Pellet between tip of forefinger and tip of thumb (both average 10 months)
- Crawls or creeps
- Full weight on legs
- Neurological (e.g. tone, hypotonia, or hypertonia)
- Hearing
  - Right
  - Left
- Mouth
- Heart
- Abdomen
- Hips
- Testes
- Skin
- Overall opinion

- Tower of 2 one-inch cubes 15 months
- Tower of 3-4 one-inch cubes 18 months
- Tower of 5-6 one-inch cubes 21 months
- Walks no help 13 months
- Manages ordinary cup, picks it up, drinks, puts it down (no help) 15 months
2 years

<table>
<thead>
<tr>
<th>Date</th>
<th>Age (years and months)</th>
<th>Weight (kg)</th>
<th>Height (cm)</th>
</tr>
</thead>
</table>

**History**

Any problems (e.g. crying, sleep, eating, vomiting, sphincter control)

Any illnesses?

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**Developmental history**

- **Dry by day** (average 2 years)
- Joins 2-3 words together (average 21-24 months)
- Puts shoes, socks, pants on (average 2 years)

**Developmental examination only if necessary**

- Tower of one-inch cubes (averages 6-7)
- Imitates drawing of vertical line and circle
- Points to 4 parts of body on request

**Examination**

- Interest, alertness
- Speech
- Eyes (as before)
- Appears to see normally
- Hearing
  - Right
  - Left
- Heart
- Abdomen
- Testes
- Skin
- Overall opinion

**Action taken**

- i.e. Letter to GP
to hospital
- Why?
- Extra appointment (date)
- Note for health visitor

**Intermediate**

- Tower of 8 one-inch cubes (24 years)
- Imitates vertical and horizontal stroke (in drawing)
- Digits (e.g. say after me 7-9) 2 in 1 of 3 trials
### A suggested child-health clinic form

3 years

<table>
<thead>
<tr>
<th>Date</th>
<th>Age (years and months)</th>
<th>Weight (kg)</th>
<th>Weight (lb)</th>
<th>Height (cm)</th>
<th>Height (in)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

**History**

- Any problems (e.g. crying, sleep, eating, sphincter control)
- Any significant illnesses?

**Developmental history**

- Dry by day
- Dry by night (average 3 years)
- Dresses self fully (except buttons, shoe laces) (average 3 years)
- Developmental examination only if necessary

- Tower of one-inch cubes (average 9-10)
- Note tremor or ataxia
- Imitates bridge (i.e. make bridge, letting him see you do it)

- Copies circle from card
- Imitates drawing of a cross + (i.e. let him see you do it)
- Digits, average 3 in 1 of 3 trials

**Examination**

- Interest, alertness, responsiveness
- Speech
- Eyes
- Hearing
  - Right
  - Left
- Heart
- Abdomen
- Testes
- Skin
- Overall opinion

**Action taken**

- i.e. Letter to GP
to hospital
- Why?
- Extra appointment (date)
- Note for health visitor

**Intermediate**

- 3½ years: Copies bridge of cubes (i.e. does not see it made)
- Digits 3 (2 of 3 trials)
- 4 years: Can button clothes
- Imitates gate (i.e. sees it made)

Copies + (cross) from card.
### History
Any problems?
Any illnesses?

### Developmental history
- Dry by day
- Dry by night
- Developmental examination only if necessary
- Copies gate (note tremor, ataxia)
- Copies square
- Digits 4 (1 of 3 trials)

### Examination
- Interest, alertness
- Speech
- Eyes
- Hearing
- Right
- Left
- Heart
- Abdomen
- Testes
- Skin
- Overall opinion

### Action taken
- i.e. Letter to GP
to hospital
- Why?
- Extra appointment (date)
- Note for health visitor

### Subsequent
- 5 years: copies triangle △
  - Digits 4 (2 of 3 trials)
  - Ties shoes laces
- 6 years: copies diamond ◊
  - Imitates steps of 10 cubes