

SUPPLEMENT TO THE GENERAL MEDICAL REPORT ON THE CHILD

REPORT CONCERNING THE PSYCHOLOGICAL AND SOCIAL CIRCUMSTANCES OF THE SMALL CHILD

For Contracting States within the scope of the Hague Convention on intercountry adoption
Please respond to each statement.

Activity with toys:	
<input type="checkbox"/>	<i>The child's eyes follow rattles/toys, that are moved in front of the child</i>
<input type="checkbox"/>	<i>The child holds on to a rattle</i>
<input type="checkbox"/>	<i>The child plays with rattles: putting it in the mouth, shaking it, moving it from one hand to the other etc</i>
<input type="checkbox"/>	<i>The child puts cubes on top of each other</i>
<input type="checkbox"/>	<i>The child plays purposely with toys: pushes cars, puts dolls to bed, feeds dolls etc</i>
<input type="checkbox"/>	<i>The child plays role-play with toys with other children</i>
<input type="checkbox"/>	<i>The child draws faces, human beings or animals with distinct features</i>
<input type="checkbox"/>	<i>The child cooperates in structured games with other children (ballgames, card games etc)</i>
<input type="checkbox"/>	<i>No observation available</i>
Vocalization/language development:	
<input type="checkbox"/>	<i>1. The child vocalizes in contact with caregiver</i>
<input type="checkbox"/>	<i>2. The child repeats different vowel-consonant combinations (ba-ba, da-da, ma-ma etc)</i>
<input type="checkbox"/>	<i>3. The child uses single words to communicate needs</i>
<input type="checkbox"/>	<i>4. The child speaks in sentences</i>
<input type="checkbox"/>	<i>5. The child understands prepositions as: on top of, under, behind etc</i>
<input type="checkbox"/>	<i>6. The child uses prepositions as: on top of, under, behind etc</i>
<input type="checkbox"/>	<i>7. The child speaks in past tense</i>
<input type="checkbox"/>	<i>8. The child writes his own name</i>
<input type="checkbox"/>	<i>9. The child reads simple words</i>
<input type="checkbox"/>	<i>No observation available</i>

Motor development:	
	<i>The child turns from back to stomach from age: _____</i>
	<i>The child sits without support from age: _____</i>
	<i>The child crawls/moves forwards from age: _____</i>
	<i>The child walks with support from furniture from age: _____</i>
	<i>The child walks alone from age: _____</i>
	<i>The child walks up and down stairs with support from age: _____</i>
	<i>The child walks up and down stairs without support from age: _____</i>
	<i>The child rides a bicycle without support from age: _____</i>
Contact with adults:	
<input type="checkbox"/>	<i>1. The child smiles in contact with known caregiver</i>
<input type="checkbox"/>	<i>2. The child is more easily soothed when held by known caregiver</i>
<input type="checkbox"/>	<i>3. The child cries/follows known caregiver, when the caregiver leaves the room</i>
<input type="checkbox"/>	<i>4. The child actively seeks known caregiver when he/she is upset or has hurt him/herself</i>
<input type="checkbox"/>	<i>5. The child seeks physical contact with all adults, that come into the ward</i>
<input type="checkbox"/>	<i>6. The child communicates his feeling in words to caregivers</i>
Contact with other children:	
<input type="checkbox"/>	<i>1. The child shows interest in other children by looking or smiling at their activity</i>
<input type="checkbox"/>	<i>2. The child enjoys playing beside other children</i>
<input type="checkbox"/>	<i>3. The child engages actively in activities with other children</i>
General Level of Activity:	
<input type="checkbox"/>	<i>Passive</i>
<input type="checkbox"/>	<i>Active</i>
<input type="checkbox"/>	<i>Overactive</i>
General mood:	
<input type="checkbox"/>	<i>Sober, serious</i>
<input type="checkbox"/>	<i>Emotionally indifferent</i>
<input type="checkbox"/>	<i>Fussy, difficult to soothe</i>
<input type="checkbox"/>	<i>Happy, content</i>

Any additional comments?

Name, occupation, signature and stamp of the examining person

Date