PEDIATRIC AFFILIATES
OF HAMPTON ROADS

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MCHAT QUESTIONAIRE

Date: ____/____/____

1. Does your child enjoy being swung, bounced on your knee, etc.? **Yes____ No____**

2. Does your child take an interest in other children? **Yes____ No____**

3. Does your child like climbing on things, such as up stairs? **Yes____ No____**

4. Does your child enjoy playing peek-a-boo/hide-and-seek? **Yes____ No____**

5. Does your child ever pretend, for example, to talk on the phone or take care of dolls, or pretend other things? **Yes____ No____**

6. Does your child ever use his/her index finger to point, to ask for something? **Yes____ No____**

7. Does your child ever use his/her index finger to point, to indicate interest in something? **Yes____ No____**

8. Can your child play properly with small toys (e.g. cars or bricks) without just mouthing, fiddling, or dropping them? **Yes____ No____**

9. Does your child ever bring objects over to you (parent) to show you something? **Yes____ No____**

CHILD'S NAME:_____

DATE OF BIRTH:_____/_____/_____

10. Does your child look you in the eye for more than a second or two? **Yes____ No____**

11. Does your child ever seem oversensitive to noise
(e.g., plugging ears)? **Yes____ No____**

12. Does your child smile in response to your face or your smile? **Yes____ No____**

13. Does your child imitate you? (e.g., you make a face-will your child imitate it?) **Yes____ No____**

14. Does your child respond to his/her name when you call? **Yes____ No____**

15. If you point at a toy across the room, does your child look at it? **Yes____ No____**

16. Does your child walk? **Yes____ No____**

17. Does your child look at things you are looking at? **Yes____ No____**

18. Does your child make unusual finger movements near his/her face? **Yes____ No____**

19. Does your child try to attract your attention to his/her own activity? **Yes____ No____**

20. Have you ever wondered if your child is deaf? **Yes____ No____**

21. Does your child understand what people say? **Yes____ No____**

22. Does your child sometimes stare at nothing or wander with no purpose? **Yes____ No____**

23. Does your child look at your face to check your reaction when faced with something unfamiliar? **Yes____ No____**

MCHAT SCORE: _____

MCHAT rev.: 11/10/09