## Survey: Bright Futures 4 Year Developmental Surveillance

Description: Bright Futures parental surveillance for 4 year visit

Instructions: Please answer these questions about your growing and developing child.

Privacy level: Any staff member

Does your child go to the bathroom and have a bowel movement by him/herself?	yes	no
Does your child dress and undress without much help?	yes	no
Does your child play make-believe?	yes	no
Does your child answer questions such as "What do you do when you are cold?" and "When you are sleepy?"	yes	no
Does your child use 4-word sentences?	yes	no
Does your child speak so strangers can understand 100% of what he/she says?	yes	no
Can your child draw pictures you recognize?	yes	no
Does your child follow simple rules when playing board or card games?	yes	no
Can your child tell you a story from a book?	yes	no
Can your child skip on one foot?	yes	no
Can your child climb stairs, using one foot, then the other, without support?	yes	no
Can your child draw a person with at least 3 body parts?	yes	no
Can your child draw a simple cross?	yes	no
Can your child unbutton and button medium-sized buttons?	yes	no
Does your child grasp a pencil with a thumb and fingers instead of his/her fist?	yes	no
Do you have specific concerns about your child's development, learning, or behavior?	yes	no
If yes, please describe your concerns:		