

DEPARTMENT OF CLINICAL PSYCHOLOGY INSTITUTE OF MENTAL HEALTH

PSYCHOLOGICAL EVALUATION REPORT

Name: J. Shreyan Goutham

Age: 2 years 8 months CR No: 12332/6/24

Sex: Male DR No: 46/06/24

Date: 13/06/2024

Lest kindings:

Socio-Demographic Details:

Little MasterMrShreyan is a 2 years 8 months old male child, Hindu, hailing from a middle socio-economic status and coming from annural background. He was brought by his parents, with the following

Chief Complaints: While and Complete has be seen to any pode the nucleoff A

- Age-inappropriate speech
- · Self-laugh
- · No response for name call
- · Does not stay at one place
- Easily Frustrated
- Sleeps late
- Not ablemingle with others

Duration: 3 months

Brief Clinical History:

According to the parent's (Father) report, the child is not having age-appropriate speech. And does not respond to when called by his name and often laughs by himself. The father stated that the child does not sit at one place and roams about the room repeatedly and when the needs of the child is not fulfilled, he gets easily frustrated and bangs his head towards wall. The informant also added that the child always seeks perfectionism and always clings with the parents and does not wish to mingle with others. The father also reported that the child is facing difficulties with the sleep at night.

The father stated that the child was taken to a local doctor for a regular checkup and was suggested for intervention about child having features of autism.

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With the above chief complaints, the parents brought the child to Sweekaar on 13/06/2024.

Birth and Developmental History:

The Child was born to non-consanguineous parents. It was full-term caesarean birth (reason for caesarean is due to excessive amniotic fluid). Immediate Birth cry was present and birth weight was 3 kgs. All the developmental mile stones were delayed for 1 month and not achieved age appropriately.

Behavioural Observations:

The child was well-kempt, Eye contact was partially maintained, rapport could not be established with ease as the child was clinging to the parent continuously during examination. Attention and concentration were not aroused and sustained. The child was irritable throughout the session.

Tests Administered

- 1) Denver Developmental Screening Test (DDST)
- 2) Vineland Social Maturity Scale (VSMS)
- 3) Childhood Autism rating Scale (CARS)

Test Findings:

1. Developmental Screening Test (DDST):

It was administered to assess the developmental functioning of the child. On DST the Obtained Developmental Age (DA) was 1 year 11 months and the corresponding Developmental Quotient (DQ) was 72, indicating Borderline deficits in Developmental functioning.

S.no	Domain	Developmental Age
1.	Gross Motor Development	3 years 1 month 15 days
2.	Language Development	9 months
3.	Fine-Motor Development	2 years 7 months 15 days
4.	Personal-Social Development	11 months 10 days

· Siceps late

. Not ablemingle with others

2. Vineland Social Maturity Scale (VSMS):

It was administered to assess the socio-adaptive functioning of the child. The obtained Social Age (SA) was 2 years 1 months and the corresponding Social Quotient (SQ) was 78, indicating Borderline deficits in socio-adaptive functioning.

3. Childhood Autism Rating Scale (CARS):

This test was administered to assess the features of autism of the child. The obtained score was 31 Indicating Mild Autistic Features

Impression:

Based on the Chief complaints, Birth and Developmental history, Clinical history, Behavioural and clinical observations and psycho diagnostic evaluation suggest that the child is provisionally diagnosed as "Mild Level of Autistic features with Borderline deficits in developmental and socio-adaptive functioning".

Suggestions and Recommendations:

- 1) Psychoeducation and parental guidance
- 2) Consult Rehab Medical Specialist
- 3) Behaviour Therapy
- 4) Occupational Therapy
- 5) Speech Therapy
- 6) Reassessments after 6 months
- 7) Review after one month

K. Nagarjuna
Clinical Psychologist
CRR No. A62133





SPEECH AND LANGUAGE ASSESSMENT

INSTITUTE OF SPEECH AND AUDIOLOGY

Date: 13/06/2024 Name: Shreyan Gowtham Age/Gender: 2.8 Y/M DR no: 28/6/24 CR no: 12332/6/2024

Brief History: Unable to speak Age appropriately.

- 1. Poor concentration
- 2. Poor eye contact
- 3. Poor attention
- 4. Unstable
- 5. Throws objects
- 6. Flapping of hands
- 7. Shouting
- 8. Restless
- 9. Stubborn

Birth History: Mother's age of conception was 24 years. Child is 1st issue to nonconsanguineous parents. Natal history reveals Full term cesarean delivery with immediate birth cry and birth weight of (3kgs). H/O Child had neonatal jaundice and was given phototherapy for 2hrs. No other complications reported by parents.

Oro-Peripheral Mechanism Examination: OPME was observed to be structurally normal and functionally adequate. Vegetative skills are adequate except blowing. Pre linguistic skills adequate except for eye contact and imitation of speech. Cognitive prerequisites are adequate.

Motor Development: Age -appropriate motor development.

Speech and Language Evaluation: Childs main mode of communication is nonverbal. Child can comprehend simple verbal requests and unable to follow commands. Child can recognize parents. Child receptive vocabulary consists of few body parts, few food items and functional words. Child expressive vocabulary consists of babbling. Child expresses his needs through vocalization and dragging parents' hands towards the object. Jargon speech was observed during play.

Test Administered

REELS

Reception: 8-9 months. Expression: 6-7 months.

Provisional Diagnosis

CHAMISTERS I THE WAY Spoken language disorder secondary to (?) Autistic features.

except blowing. Pre tinguistic skills adequate except for eye contact and imitation

Recommendation

1. Rehab medical specialist

vergal of (3kgs), 14/O Child had nechanal fauntice

- 2. Speech therapy
- 3. Consult psychologist
- 4. Occupational therapy
- 5. Counseling
- 6. Follow up

of history reveals rall term cesarean delivery with anguage Pathologist

B. Sowmya Reddy.

Oro-Peripheral Nechanism Tennination: OPME was observed to be RCI.NO: A73832 structurally nominal and innerconally adequate. Vegetaine skills are adequate



OCCUPATIONAL THERAPY (CHILD ASSESMENT)

DEPARTMENT OF OCCUPATIONAL THERAPY INSTITUTE OF PHYSICAL MEDICINE AND REHABILITATION

Name: Shreyan.Goutham

Date: 13/6/24 DR no: 13035/6/24 CR no: 12332/6/24

1.CHEIF COMPLAIN:

- Speech delayed
- > Stubborn
- > Self playing
- Poor Attention and concentration
- Poor fine motor skills
- Less sitting tolerance
- Poor name called respond

2.BIRTH/MEDICAL H/O:1st issue to non consanguineous parent. Mother's age of conception was 24yrs. FTCD with immediate birth cry. No other complications reported by parents.

3. AREAS OF ASSESSMENT:

I. Gross Motor: Good

II. Fine motor: Poor

III. Musculoskeletal:

a) Posture: Normal

b) Gait: Normal

c) Tightness /Contracture: Nil

d) Deformities: Nil

e) Muscle Tone: Normal

f) Balance /Coordination: Intact

g) Muscle strength: Good

h) ROM: AROM

- 4. ACTIVITIES OF DAILY LIVING: Maximal dependent on mother
- 5. ACTIVITY LEVEL: Poor
- 6. ANY OTHER DISORDER: Poor academic skills, Poor cognitive skills
- 7. PROVISIONAL DIAGNOSIS: Delayed speech With? Autism
- 8. RECOMMENDATIONS:
 - Rehab medical specialist
 - Occupational therapy
 - Consult Behavioral therapy
 - Consult Speech therapy

Shubham Kumar
Occupational therapist
MOT



SPECIAL EDUCATION SCREENING

INSTITUTE OF SPECIAL EDUCATION

Name: Shreyan Goutam Age: 2 yrs 8 months

Reg No: 12332 /06/24

Date: 13/06/2024 Gender: Male

General behaviour

Shreyan is 2 years 8 months old. He was conscious, less attentive, and in touch with his surrounding environment. He was comfortable, but could not establish rapport. He was well groomed and showed good physical health.

Fre-Academics: Cannot identify most of the fruits vegutables, colour

Present complaints: Communication Skills: Language and communication Expressi-

- Poor eye contact
- Poor Socialisation when the state of the second of the sec
- Does not respond properly
- Speech problem
- Low motor skills
- Self-shouting
- Self-talking
- Beating other
- Cannot ask for food
- Cannot identify Mother and Father

Purpose: To know the current level of functioning and training.

Test Administered: Special Education Screening

I. Motor skills: His fine motor skills and gross motor skills are inadequate.

II. Self-help Assessment:

a) Toileting: Dependent

b) Brushing: Dependent

c) Bathing: Dependent

d) Dressing: Dependent

e) Eating: Dependent

Pre-Academics: Cannot identify most of the fruits, vegetables, colours.

III. Academics:

a) Reading: Not applicable

b) Writing: Not applicable

c) Arithmetic: Not applicable and applicable and applicable and boundary the state of the state

- IV. Communication Skills: Language and communication Expressive, Receptive is inadequate.
- V. Socialisation Skills: Cannot mingle with Family members and others.

Recommendations

- Behaviour Therapy
- Speech Therapy
- Occupational Therapy

Special Education Specialist

· Speech problem

· Soif-tallong

RCI NO: A33604