

Age in Months : 0		
visually attentive	<input checked="" type="checkbox"/>	<input type="checkbox"/>
startles to sound	<input checked="" type="checkbox"/>	<input type="checkbox"/>
palmar grasp	<input checked="" type="checkbox"/>	<input type="checkbox"/>
turns head side to side	<input checked="" type="checkbox"/>	<input type="checkbox"/>
equal movements	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Age in Months : 6		
rolls over front to back	<input checked="" type="checkbox"/>	<input type="checkbox"/>
rolls both ways	<input checked="" type="checkbox"/>	<input type="checkbox"/>
sits with support	<input checked="" type="checkbox"/>	<input type="checkbox"/>
reaches, grasps and transfers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
separation/stranger anxiety	<input checked="" type="checkbox"/>	<input type="checkbox"/>
listens to adult voice/vocalizes when angry	<input checked="" type="checkbox"/>	<input type="checkbox"/>
works for toy (out of reach)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
bears weight on legs	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Age in Months : 2		
on stomach, lifts head 45 degrees	<input checked="" type="checkbox"/>	<input type="checkbox"/>
holds object placed in hand	<input checked="" type="checkbox"/>	<input type="checkbox"/>
follows to midline	<input checked="" type="checkbox"/>	<input type="checkbox"/>
smiles responsively	<input checked="" type="checkbox"/>	<input type="checkbox"/>
vocalizes/coos	<input checked="" type="checkbox"/>	<input type="checkbox"/>
turns toward mother's voice	<input checked="" type="checkbox"/>	<input type="checkbox"/>
follows past midline	<input checked="" type="checkbox"/>	<input type="checkbox"/>
responds to adult voice and smile	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Age in Months : 9		
pulls to stand	<input checked="" type="checkbox"/>	<input type="checkbox"/>
seeks object after it falls to floor	<input checked="" type="checkbox"/>	<input type="checkbox"/>
sits well without support	<input checked="" type="checkbox"/>	<input type="checkbox"/>
inhibits to "no"	<input checked="" type="checkbox"/>	<input type="checkbox"/>
rolls both ways	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Dada/Mama non-specific	<input checked="" type="checkbox"/>	<input type="checkbox"/>
waves bye-bye	<input checked="" type="checkbox"/>	<input type="checkbox"/>
creeps/crawls	<input checked="" type="checkbox"/>	<input type="checkbox"/>
pincer grasp	<input checked="" type="checkbox"/>	<input type="checkbox"/>
stands holding on	<input checked="" type="checkbox"/>	<input type="checkbox"/>
peek-a-boo, social tricks	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Age in Months : 4		
sits with head steady	<input checked="" type="checkbox"/>	<input type="checkbox"/>
no head lag when pulled to sitting	<input checked="" type="checkbox"/>	<input type="checkbox"/>
reaches and grasps	<input checked="" type="checkbox"/>	<input type="checkbox"/>
follows 180 degrees	<input checked="" type="checkbox"/>	<input type="checkbox"/>
laughs/chuckles	<input checked="" type="checkbox"/>	<input type="checkbox"/>
localizes voice	<input checked="" type="checkbox"/>	<input type="checkbox"/>
smiles spontaneously	<input checked="" type="checkbox"/>	<input type="checkbox"/>
regards own hand	<input checked="" type="checkbox"/>	<input type="checkbox"/>
vocalizes	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Age in Months : 12		
pulls to stand	<input checked="" type="checkbox"/>	<input type="checkbox"/>
stands alone	<input checked="" type="checkbox"/>	<input type="checkbox"/>
walks without holding on	<input checked="" type="checkbox"/>	<input type="checkbox"/>
points	<input checked="" type="checkbox"/>	<input type="checkbox"/>
imitates vocalizations/sounds	<input checked="" type="checkbox"/>	<input type="checkbox"/>
understands speech	<input checked="" type="checkbox"/>	<input type="checkbox"/>
speaks 2-3 words	<input checked="" type="checkbox"/>	<input type="checkbox"/>
plays pat-a-cake	<input checked="" type="checkbox"/>	<input type="checkbox"/>
waves bye-bye	<input checked="" type="checkbox"/>	<input type="checkbox"/>
finger feeds self	<input checked="" type="checkbox"/>	<input type="checkbox"/>
seeks parent when upset	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Age in Months : 15		
stoops and recovers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
"runs"	<input checked="" type="checkbox"/>	<input type="checkbox"/>
climbs stairs or on furniture	<input checked="" type="checkbox"/>	<input type="checkbox"/>
scribbles	<input checked="" type="checkbox"/>	<input type="checkbox"/>
uses eating utensils	<input checked="" type="checkbox"/>	<input type="checkbox"/>
says 5-10 words with meaning	<input checked="" type="checkbox"/>	<input type="checkbox"/>
mature jargoning	<input checked="" type="checkbox"/>	<input type="checkbox"/>
obeys simple command	<input checked="" type="checkbox"/>	<input type="checkbox"/>
drinks from cup, no bottle	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Age in Months : 36		
throws ball overhand	<input checked="" type="checkbox"/>	<input type="checkbox"/>
broad jumps	<input checked="" type="checkbox"/>	<input type="checkbox"/>
balances on one foot	<input checked="" type="checkbox"/>	<input type="checkbox"/>
alternates feet up stairs	<input checked="" type="checkbox"/>	<input type="checkbox"/>
imitates drawing of vertical line and cir	<input checked="" type="checkbox"/>	<input type="checkbox"/>
conversational speech	<input checked="" type="checkbox"/>	<input type="checkbox"/>
handedness established _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
speech at least 75% intelligible	<input checked="" type="checkbox"/>	<input type="checkbox"/>
knows own gender and age	<input checked="" type="checkbox"/>	<input type="checkbox"/>
imaginative play	<input checked="" type="checkbox"/>	<input type="checkbox"/>
brushes teeth with help	<input checked="" type="checkbox"/>	<input type="checkbox"/>
counts to 3+	<input checked="" type="checkbox"/>	<input type="checkbox"/>
uses utensils well	<input checked="" type="checkbox"/>	<input type="checkbox"/>
pedals tricycle	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Age in Months : 18		
passes M-CHAT	<input checked="" type="checkbox"/>	<input type="checkbox"/>
walks up steps with help	<input checked="" type="checkbox"/>	<input type="checkbox"/>
runs	<input checked="" type="checkbox"/>	<input type="checkbox"/>
scribbles	<input checked="" type="checkbox"/>	<input type="checkbox"/>
imitates animal/engine noises	<input checked="" type="checkbox"/>	<input type="checkbox"/>
speaks 10-20 words	<input checked="" type="checkbox"/>	<input type="checkbox"/>
points to 3+ body parts	<input checked="" type="checkbox"/>	<input type="checkbox"/>
helps around the house	<input checked="" type="checkbox"/>	<input type="checkbox"/>
removes articles of clothing	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Age in Months : 48		
hops on one foot	<input checked="" type="checkbox"/>	<input type="checkbox"/>
writes some letters	<input checked="" type="checkbox"/>	<input type="checkbox"/>
draws person with 4+ body parts	<input checked="" type="checkbox"/>	<input type="checkbox"/>
speech at least 90% intelligible	<input checked="" type="checkbox"/>	<input type="checkbox"/>
names 4 colors	<input checked="" type="checkbox"/>	<input type="checkbox"/>
counts to 10+	<input checked="" type="checkbox"/>	<input type="checkbox"/>
copies a circle, square, +	<input checked="" type="checkbox"/>	<input type="checkbox"/>
identifies most letters and numbers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
uses utensils well	<input checked="" type="checkbox"/>	<input type="checkbox"/>
rides tricycle or training bike	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Age in Months : 24		
kicks ball or object on floor	<input checked="" type="checkbox"/>	<input type="checkbox"/>
walks up steps independently	<input checked="" type="checkbox"/>	<input type="checkbox"/>
throws ball overhand	<input checked="" type="checkbox"/>	<input type="checkbox"/>
jumps with both feet off floor	<input checked="" type="checkbox"/>	<input type="checkbox"/>
undresses (if no buttons)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
says 50+ words	<input checked="" type="checkbox"/>	<input type="checkbox"/>
says 2-3 word phrases	<input checked="" type="checkbox"/>	<input type="checkbox"/>
follows 2-step command	<input checked="" type="checkbox"/>	<input type="checkbox"/>
speech at least 50% intelligible	<input checked="" type="checkbox"/>	<input type="checkbox"/>
puts on clothing with help	<input checked="" type="checkbox"/>	<input type="checkbox"/>
passes M-CHAT	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Age in Months : 60		
balances on one foot, hops, skips	<input checked="" type="checkbox"/>	<input type="checkbox"/>
can tie a knot	<input checked="" type="checkbox"/>	<input type="checkbox"/>
mature pencil grasp, _____ handed	<input checked="" type="checkbox"/>	<input type="checkbox"/>
writes first name	<input checked="" type="checkbox"/>	<input type="checkbox"/>
prints most letters and numbers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
counts to 20	<input checked="" type="checkbox"/>	<input type="checkbox"/>
dresses self independently	<input checked="" type="checkbox"/>	<input type="checkbox"/>
rides bicycle with or w/o training whe	<input checked="" type="checkbox"/>	<input type="checkbox"/>
complete sentences, 100% intelligible	<input checked="" type="checkbox"/>	<input type="checkbox"/>
catches ball	<input checked="" type="checkbox"/>	<input type="checkbox"/>