(RCI Rg,#A00154)

#### Dr. Krishna Dutt

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Hon. Consultant Asmita: A Centre For Slow Learners Mental Health Care, Lucknow.

Date. 0.1. 2 9001

PSYCHOMETRIC REPORT (Developmental))
Ms./Mr./Master/Baby A. Manuel Shuble Query Yrs. 3 Months.
Milestones of Development: Reportedly-Normal/Delayed  V.S. M. S. (Vineland Social Maturity Scale):
DA = around.  DQ = around.
Gessel's Drawing Test/DDST/Gessel's Developmental schedule
DA = around.  DQ = around.
Over All $DQ = around$
Conclusion: Developmental age around. The Court will Yrs. and thus  Developmental Quotient (D.Q.) approx
Remark (if any):
Fraining to make him socialise and thus facilitating his over all
Further, Spelch therapy & also indicated pyro
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## **Identification Data**

Name: Aryansh Shukla

Age: 2 years 3months

**Date of Birth:** 31/5/2019

Gender: Male

Mother's Name: Mrs. Niharika Shukla

Occupation: Homemaker

Father: Mr. Anand Shukla

Occupation: Judicial Officer

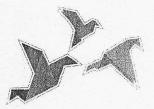
Place of Residence: Lucknow, Uttar Pradesh

Informants: Mother and Father

Date of Assessment: 28/8/2021

Source of Referral: Self

Reason of Referral: Does not speak words, difficulty in maintaining eye contact, difficulty in following instructions.



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### **Chief Complains**

- 1. Difficulty in speech and language.
- 2. Does not respond to name and other verbal and nonverbal cues.
- 3. Does not maintain eye contact.
- 4. Difficulty in following instructions.
- 5. Increased activity level.

## **Interview Information and Relevant History**

Master Aryansh is 2 years 3months old child, born out of full term pregnancy through normal mode of delivery with induced labour pain. The mother had vaginal bleeding twice during the second trimester of pregnancy, but as further reported, there was no complication due to it. Post-delivery, the child had immediate birth cry, birth weight was within normal range and no other birth complication was reported. Breastfeeding was given for 6 months exclusively, followed by partial breastfeeding which is continued till present.

The child was presented with chief complaints of difficulty in speech and language, difficulty in comprehending verbal and non-verbal communication, not willing to sit at one place, difficulty in making eye contact, difficulty in following instructions properly and disturbed sleep pattern-the child sleeps up to 3 hours at night and does not have a peaceful sleep.

## Psychological Assessment

**Behavior During Assessment** 



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## **Autism Screening: Childhood Autism Rating Scale 2**

The test results suggest presence of Mild to Moderate Symptoms of Autism Spectrum Disorder, predominantly lacking social relationship and reciprocity, increased activity level, lack of eye contact, non-responsive to environmental and social cues.

Score: 33	Range: 30-36	Impression: Mild to
		Moderate Symptoms of
		Autism

#### Impression:

Test findings are suggestive of presence of Autism like features and Developmental delays specifically in areas of speech and social communication skills.

#### Recommendations

- 1. Parental Counseling is suggested.
- 2. Activity scheduling of the child.
- 3. Speech Therapy is recommended for the child.
- 4. Behavior Management of the child.
- 5. Caregiver should encourage reciprocal communication with the child.
- 6. Instructions should be provided in short and clear sentences.
- 7. Graded task performance should be encouraged.
- 8. Monitoring of the child's progress and psychological assessment on the same parameters is suggested after a period of 6 months to 1 year.



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Master Aryansh came along with his mother and father On being greeted, Aryansh gave no response, did not respond to his name, did not respond to any verbal or non-verbal cues and did not maintain eye contact during the assessment duration. It was observed during the session, that the index child could not communicate verbally and nonverbally. He would continuously walk around in the room, was not willing to sit and would try to grasp objects and throw them. He also tried to run out of the room many a times and on being stopped to do so, he would get irritated and make squealing sounds.

# **DQ** Assessment: Developmental Screening Test

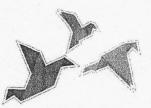
The test results indicate a Developmental Quotient (DQ) of 77 which is suggestive of Borderline delay in developmental functioning, specifically in areas of speech and communication and following instructions.

Score: 77	Range:68-84	
	- Tange. 00-04	Impression: Borderline DQ
		1 Dordernne DQ

# SQ Assessment: Vineland Social Maturity Scale (VSMS)

The test results indicate Social Quotient (SQ) of 79 which suggestive of Borderline delay in socio adaptive functioning. Findings are suggestive of delay in command following, understanding verbal, social cues and demanding personal attention.

Score:79	Range:70-79	
	Mange: /0-/9	Impression: Borderline SQ



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\*This report is not valid for medico-legal purpose.



Nandini Sharma,

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## INSTITUTE FOR HEALTH & LIFE SCIENCES CHILD DEVELOPMENT AND NUTRITION

### Dr. NEERAJ SHARMA

MBBS, DCH, PGPN (University of Boston USA) Consultant Paediatrician, Neonatologist

## Ms. ANUBHUTI DWIVEDI

MA.Psy, DC.Psy, DDMT, DVN **Consultant Child Psychologist** and Vedio Nutritionist

Name of Child Anyonsh Shoria.	Date: <u>!                                   </u>
DOB A.S.y. Gender M. Weight	Height / Length

Background Information: informer - Father and mother

- Child was born full term
- Mother had normal delivery
- Birth cry was normal
- Birth weight was 3.1 kg
- Child had exclusive 6 month of breast feeding
- Mother had bleeding during 3<sup>rd</sup> and 4<sup>th</sup> trimester
- Developmental milestones like social smile, crawling, sitting and walking, except for speech
- The child has issues in attention, concentration and sitting

Aryansh is into speech therapy and occupational therapy since last 2.5 years. Currently the child doesn't have age-appropriate speech. The child was tested on Indian scale for assessment of autism where he scored 113 which indicates moderate Autism.

Self puerle Recommendations:

Frand Shuff • Speech

- Speech and Occupational therapy to be continued
- Encourage the child to follow commands
- 20 minutes of story time every day at night
- Play creative board games
- Do not force the child to feed him
- Expose the child to colouring in different shapes and designs, alphabets, fruits, numbers
- Interact more with the child
- Maintain the routine of the child

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