When you should seek further help (from 12 months of age)

Tick all that apply. Take this completed checklist along to your health appointment. Health Your child..... □ Needs formula, supplements, or tube feeds* owing to lack of variety/intake ☐ Has frequent constipation (or dependent on laxatives) from deficiencies in diet and hydration ☐ Has identified delays in growth, or nutritional deficiencies ☐ Has low food intake, eating only a little, or skipping meals ☐ Refuses to drink enough water or milk/formula ☐ More dependent on liquids than eating solid foods ☐ Only eats snack (packet, dry, crunchy) or junk foods; grazes ☐ Does not eat from all food groups (foods hidden do not count) Protein (meat, fish, nuts, beans, cheese) Starch (breads, cereals, pastas, rice, potato) Vegetable (cucumber, broccoli, avocado, celery, carrot, beetroot, pumpkin) Fruit (melons, apple, banana, berries, stone fruits) Refuses supplements or medication Skill and Independence Your child..... ☐ Still drinks from a baby bottle at >18 months age ☐ Has difficulty chewing or swallowing, may include holding foods for long periods, gagging, or coughing ☐ Does not eat age-appropriate textures (e.g., relying on food to be mashed/puree) ☐ Does not have independence with drinking expected at age (open cup by themselves) Does not have independence with eating expected at age (full utensil use, food has to be cut up) Behaviour and Social Your child..... ☐ Requires separate foods from the family ☐ Engages in inappropriate mealtime behaviours such as crying, negative statements, turning head, covering mouth, hitting items, spitting out food, aggression, hurting self, leaving table ☐ Has lengthy mealtimes (over 20 minutes) Only consumes food or drink at certain temperatures, prepared a certain way, specific brands, colours, or in certain receptacles/utensils Only eats in certain settings (e.g., home), at certain times, or with certain people (e.g., Mum)

☐ Requires "distractions" to stay sitting or eat (e.g., TV on during meals)

☐ You are feeling high levels of stress, such as dreading mealtimes

☐ Refuses to sit at table for meals

Developed by Dr. Tessa Taylor (Australia) - http://www.paediatricfeedingintl.com/

^{*}If on tube feeds (Gastrostomy, nasogastric tube), has clearance to eat or drink orally (or, to work towards swallow evaluation).