



SWYC™:
18 个月

18 个月 0 天至 22 个月 31 天
V1.08, 9/1/19

SWYC:™
18 months, 0 days to
22 months, 31 days
V1.08, 9/1/19

儿童姓名:
Child's Name:

出生日期:
Birth Date:

今天日期:
Today's Date:

发育里程碑(Developmental Milestones)

此年龄段的孩子大多能够完成下面列出的部分（但并非全部）发育任务。请告诉我们您的孩子能够完成这些任务的程度。请务必回答所有问题。

	尚无法做到 Not at all	一些 Somewhat	很多 Very Much
跑。 ①	①	②	
Runs.			
在别人帮助下走上楼梯 ①	①	②	
Walks up stairs with help.....			
踢球 ①	①	②	
Kicks a ball			
能说出至少 5 个熟悉的物体的名称——如球或牛奶 ①	①	②	
Names at least 5 familiar objects - like ball or milk			
能说出至少 5 个身体部位的名称——如鼻子、手或肚子 ①	①	②	
Names at least 5 body parts - like nose, hand, or tummy			
在游乐场上爬上梯子 ①	①	②	
Climbs up a ladder at a playground			
使用“我”或“我的”等词语..... ①	①	②	
Uses words like "me" or "mine".....			
用双脚跳离地面 ①	①	②	
Jumps off the ground with two feet			
将 2 个或多个单词连在一起使用——如“多点水”或“到外面去”..... ①	①	②	
Puts 2 or more words together - like "more water" or "go outside".....			
用语言寻求帮助 ①	①	②	
Uses words to ask for help			

学龄前儿童症状检查表 (PPSC)) (PRESCHOOL PEDIATRIC SYMPTOM CHECKLIST (PPSC))

这些问题是关于您孩子的行为。想想您对其他同龄孩子的期望，然后告诉我们每项描述与您孩子的相符程度。

		一点也不符合 Not at all	一些 Somewhat	很多 Very Much
您的孩子是否.....	看起来紧张或害怕?	①	①	②
Does your child...	Seem nervous or afraid?			
	看起来难过或不开心?	①	①	②
	Seem sad or unhappy?			
	如果事情没有按照某种方式完成，会感到不安?	①	①	②
	Get upset if things are not done in a certain way?			
	难以接受变化?	①	①	②
	Have a hard time with change?			
	很难和其他孩子一起玩耍?	①	①	②
	Have trouble playing with other children?			
	会故意毁坏东西?	①	①	②
	Break things on purpose?			
	会和其他孩子打架?	①	①	②
	Fight with other children?			
	很难集中注意力?	①	①	②
	Have trouble paying attention?			
	很难安静下来?	①	①	②
	Have a hard time calming down?			
	很难坚持一项活动?	①	①	②
	Have trouble staying with one activity?			
您的孩子是否.....	有攻击性?	①	①	②
Is your child...	Aggressive?			
	坐立不安或无法静坐?	①	①	②
	Fidgety or unable to sit still?			
	会生气?	①	①	②
	Angry?			
以下事情是否会很难完成?	带孩子外出?	①	①	②
Is it hard to...	Take your child out in public?			
	安慰孩子?	①	①	②
	Comfort your child?			
	了解孩子的需求?	①	①	②
	Know what your child needs?			
	让孩子遵守时间表或例行模式?	①	①	②
	Keep your child on a schedule or routine?			
	让孩子听从您?	①	①	②
	Get your child to obey you?			

父母对社交互动的观察 (POSI)

(PARENT'S OBSERVATIONS OF SOCIAL INTERACTIONS (POSI))

您的孩子会把东西拿给您看吗? <i>Does your child bring things to you to show them to you?</i>	每天许多次 <i>Many times a day</i>	每天几次 <i>A few times a day</i>	每周几次 <i>A few times a week</i>	少于每周一次 <i>Less than once a week</i>	从不 <i>Never</i>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
您的孩子对和其他孩子一起玩感兴趣吗? <i>Is your child interested in playing with other children?</i>	总是 <i>Always</i>	经常 <i>Usually</i>	有时 <i>Sometimes</i>	很少 <i>Rarely</i>	从不 <i>Never</i>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
当您说一个词或挥手时，您的孩子会试图模仿您吗? <i>When you say a word or wave your hand, will your child try to copy you?</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
当您叫您的孩子的名字时，他/她会看向您吗? <i>Does your child look at you when you call his or her name?</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
当您指向房间对面的某样物品时，您的孩子会看向它吗? <i>Does your child look if you point to something across the room?</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

您的孩子通常如何向您表示他/她想要某样东西? <i>How does your child <u>usually</u> show you something he or she wants?</i>	说出他/她想要的东西 <i>Says a word for what he or she wants</i>	用手指指向想要的东西 <i>Points to it with one finger</i>	伸手去够 <i>Reaches for it</i>	将我拉过去或我的手放在那样东西上 <i>Pulls me over or puts my hand on it</i>	发出哼声、哭泣或尖叫 <i>Grunts, cries or screams</i>
(请选中所有适用的选项) <i>(please check all that apply)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
您的孩子最喜欢的游戏活动是什么? <i>What are your child's favorite play activities?</i>	玩洋娃娃或毛绒动物 <i>Playing with dolls or stuffed animals</i>	与您一起读书 <i>Reading books with you</i>	攀爬、跑跳或身体活动 <i>Climbing, running and being active</i>	把玩具或其他东西排成一排 <i>Lining up toys or other things</i>	看着物体旋转，如风扇或轮子 <i>Watching things go round and round like fans or wheels</i>
(请选中所有适用的选项) <i>(please check all that apply)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

有关 POSI 的确认、验证和其他信息，请参阅 www.theswyc.org/posi

For acknowledgments, validation, and other information concerning the POSI, please see www.theswyc.org/posi

家长的担忧(PARENT'S CONCERNS)

	完全没有 <i>Not At All</i>	一些 <i>Somewhat</i>	很多 <i>Very Much</i>
您是否担心孩子的学习或发育? <i>Do you have any concerns about your child's learning or development?</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
您是否担心孩子的行为? <i>Do you have any concerns about your child's behavior?</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

家庭问题(FAMILY QUESTIONS)

由于家庭成员会对孩子的发育产生重大影响, 请回答以下几个有关您家庭的问题:

		是	否		
		Yes	No		
1 与您孩子一起生活中的人中，是否有人吸烟？	<input type="radio"/>	<input type="radio"/>			
Does anyone who lives with your child smoke tobacco?					
2 过去的一年中，您是否有过过度饮酒或药物使用的情形？	<input type="radio"/>	<input type="radio"/>			
In the last year, have you ever drunk alcohol or used drugs more than you meant to?					
3 过去的一年中，您是否曾觉得自己想要或需要减少饮酒或药物使用量？	<input type="radio"/>	<input type="radio"/>			
Have you felt you wanted or needed to cut down on your drinking or drug use in the last year?					
4 家庭成员的饮酒或药物使用是否曾对孩子的产生不良影响？	<input type="radio"/>	<input type="radio"/>			
Has a family member's drinking or drug use ever had a bad effect on your child?					
		绝不符合	有时符合	通常符合	
		Never true	Sometimes true	Often true	
5 在过去的 12 个月里，我们曾担心过在有钱购买更多食物之前，食物会耗尽。	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
Within the past 12 months, we worried whether our food would run out before we got money to buy more.					
在过去的两周里，您会被以下问题所困扰的频率为多少？		一点都没有	有几天	超过一半的日子	几乎每天
Over the past two weeks, how often have you been bothered by any of the following problems?		Not at all	Several days	More than half the days	Nearly every day
6 对做事没有兴趣或乐趣？	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Having little interest or pleasure in doing things?					
7 感到沮丧、抑郁或绝望？	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Feeling down, depressed, or hopeless?					
8 总体而言，您会如何描述您与配偶/伴侣的关系？	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
In general, how would you describe your relationship with your spouse/partner?		No tension	Some tension	A lot of tension	Not applicable
9 您和您的伴侣在解决争端时是否：	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Do you and your partner work out arguments with:		No difficulty	Some difficulty	Great difficulty	Not applicable
10 过去一周内，有几天您或其他家庭成员为孩子阅读书籍？	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
During the past week, how many days did you or other family members read to your child?					