





6 things

EVERY PARENT
SHOULD UNDERSTAND ABOUT
CRANIOFACIAL DEVELOPMENT

With
Carmen Woodland





What Concerns Do You Have?

Child Quick Assessment Tool

Please answer the questions below to the best of your knowledge. Generally, if any of these questions can be answered "yes", your child probably has some myofunctional impairment.

- ___ Was your child bottle fed?
- ___ Did your child suffer from latching issues, colic, acid reflux, "spitting up" a lot, feeding, troubles, ear infections or "failure to thrive" as an infant?
- ___ Has your child had the tonsils removed, or have you been told your child's tonsils are enlarged?
- ___ Do you notice that your child's mouth is open at rest (even occasionally)?
- ___ Does your child breathe with an open mouth?
- ___ Does your child have any breathing issues or difficulties? (chronic congestion, asthma, seasonal allergies, etc)
- ___ Does your child take medicines that help "manage" the breathing / allergy problems but not find the root cause?
- ___ Has your child had (or been told to have) nasal surgery, deviated septum, or another airway surgery?
- ___ Does your child's tongue rest anywhere other than entirely on the roof of the mouth?
- ___ Has anyone ever told you that your child has a tongue thrust?
- ___ Has your child experienced issues with digestion? (stomach aches, burping, gas, acid reflux, inadequate chewing of food, etc)
- ___ Do you notice that you your child gags easily?
- ___ Is your child a picky eater? Or does your child hate some textures?
- ___ Does your child chew with an open mouth?
- ___ Did your child suck a thumb/finger or have a pacifier for an extended period of time when young?
- ___ Has your child had braces and experienced a relapse of treatment?
- ___ Has your child had palatal expansion, premolars extracted or headgear?
- ___ Has anyone ever told you that your child may be tongue-tied?
- ___ Has your child ever had trouble with speech or been to speech therapy?
- ___ Does your child have any behavioral issues or trouble with inattentiveness?
- ___ Does your child clench or grind the teeth?
- ___ Does your child snore?
- ___ Does your child wake feeling tired or unrefreshed?
- ___ Has your child had a sleep study or been diagnosed with sleep apnea or UARS?
- ___ Does your child have poor posture?



What Did You Discover?

Airway Awareness





What Can I Do?

Tongue-Tie Screenings





What Can I Do?

Oral Rest Posture



What Can I Do?

Chewing





What Can I Do?

Nasal Breathing





What Can I Do?

Early Ortho Referrals





What Can I Do?



Other Notes



Other Notes



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Other Notes