

## LEADS Head Start/Early Head Start Screening Results

Child's Name: Mansour AlSaadon

Center: Delaware

### VISION

Date of Screening: 8/23/16

#### Suresight

X

Pass – The results appear to be within the normal range.

\_\_\_\_\_

Fail – Rescreen needed in 2 weeks

\_\_\_\_\_

Fail HOWEVER no rescreen needed due to child already seeing specialist.

#### Stereoptis

X

Pass – The results appear to be within the normal range.

\_\_\_\_\_

Fail – Rescreen needed in 2 weeks

\_\_\_\_\_

Fail HOWEVER no rescreen needed due to child already seeing specialist.

#### Paper Screen (EHS ONLY)

\_\_\_\_\_

Pass – The results appear to be within the normal range.

\_\_\_\_\_

Fail – Rescreen needed in 2 weeks

\_\_\_\_\_

Fail HOWEVER no rescreen needed due to child already seeing specialist.

### HEARING

Date of Screening: 8/23/16

X

Pass – The results appear to be within the normal range.

\_\_\_\_\_

Fail – Immediate Referral

\_\_\_\_\_

Fail HOWEVER no rescreen needed due to child already seeing specialist.

### BRIGANCE DEVELOPMENTAL

Date of Screening: 8/23/16

\_\_\_\_\_

Pass – The results appear to be within the normal range.

X

Fail – rescreen needed in 2 weeks

\_\_\_\_\_

Failed HOWEVER no rescreen needed due to child having a current IEP on file.

### HEIGHT AND WEIGHT

Date of Screening: 8/23/16

Height: 43.5

Weight: 38.6

BMI: \_\_\_\_\_

Head Circumference: \_\_\_\_\_ (EHS ONLY)

\*Results discussed with parents on: 8/23/16 (within 1 week of screenings)

Parent's Signature: \_\_\_\_\_

Date: 8/23/16

FSW/HV's Signature: \_\_\_\_\_

Kristi murfield

Date: 8/23/16

# LEADS Head Start/Early Head Start RESCREEN Results

(If Applicable)

Child's Name: Mansour AlSaadon

Center: Delaware

**Vision – RESCREEN** Date of Rescreen: \_\_\_\_\_

**Suresight**

\_\_\_\_\_ Pass – The results appear to be within the normal range and child will be monitored

\_\_\_\_\_ Fail – Referral needed

**Stereoptis**

\_\_\_\_\_ Pass – The results appear to be within the normal range and child will be monitored

\_\_\_\_\_ Fail – Referral needed

**Paper Screen** (EHS ONLY)

\_\_\_\_\_ Pass – The results appear to be within the normal range and child will be monitored

\_\_\_\_\_ Fail – Referral needed

**Brigance- RESCREEN** Date of Rescreen: 9/22/16

\_\_\_\_\_ Pass – The results appear to be within the normal range and child will be monitored

X \_\_\_\_\_ Fail – Referral needed

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\*Results discussed with parents on: \_\_\_\_\_ (within 1 week of RESCREEN)

Parent's Signature: \_\_\_\_\_

Date: 4/23/17

FSW/HV's Signature: \_\_\_\_\_

Kristi Munfield

Date: 4/28/17