

### HOW TO USE THESE CHECKLISTS:

In her book, "The Out-Of-Sync-Child", Carol Kranowitz, uses a similar checklist to understand what she refers to as the "five Caveats" of the sensational child. It is important to remember the following when using this checklist:

- Children with a sensory dysfunction will not necessarily display every characteristic. For example, a child with vestibular dysfunction may have poor balance but good muscle tone.
- "Inconsistency is the hallmark of every neurological dysfunction"- a child may show signs of dysfunction one day but not the next. For example, they may be "clumsy" and trip several times on Friday but kick a ball perfectly into a goal on Saturday.
- A child who shows signs of a particular dysfunction may have a different underlying problem and not a dysfunction at all. For example, a child who dislikes being touched may not be over-reacting to tactile sensation but may have an emotional problem instead. It is therefore important to consult your doctor or Occupational Therapist for an accurate diagnosis.
- Children can be both hyposensitive and hypersensitive. To illustrate, a child may jerk away from a light pat on the shoulder, but may show indifference when given an inoculation.
- We all have sensory integration problems from time-to-time and all kinds of stimuli can temporarily disrupt normal functioning of the brain. This can either occur through sensory overload or if we are deprived of sensory stimulation.
- Only use this checklist as a guide, it is NOT designed to be used as a diagnostic tool but rather as a means of understanding the signs of sensory processing dysfunction.
- What is of importance is which symptoms your child shows, which of the categories they are having difficulties with, how much it interferes in their and others lives, and how much it affects their global level of functioning.

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**Tactile Sense:** input from the skin receptors about touch, pressure, temperature, pain, and movement of the hairs on the skin.

### Signs of Tactile Dysfunction

#### 1. Hypersensitivity to Touch (Tactile Defensiveness)

- becomes fearful, anxious or aggressive with light or unexpected touch
- as an infant, did/does not like to be held or cuddled; may arch back, cry, and pull away
- distressed when diaper is being, or needs to be, changed
- appears fearful of, or avoids standing in close proximity to other people or peers (especially in lines)
- becomes frightened when touched from behind or by someone/something they can not see (such as under a blanket)
- complains about having hair brushed; may be very picky about using a particular brush
- bothered by rough bed sheets (i.e., if old and "bumpy")
- avoids group situations for fear of the unexpected touch
- resists friendly or affectionate touch from anyone besides parents or siblings (and sometimes them too!)

- dislikes kisses, will "wipe off" place where kissed, prefers hugs
- a raindrop, water from the shower, or wind blowing on the skin may feel like torture and produce adverse and avoidance reactions
- may overreact to minor cuts, scrapes, and or bug bites
- avoids touching certain textures of material (blankets, rugs, stuffed animals)
- refuses to wear new or stiff clothes, clothes with rough textures, turtlenecks, jeans, hats, or belts, etc.
- avoids using hands for play
- avoids/dislikes/aversive to "messy play", i.e., sand, mud, water, glue, glitter, playdoh, slime, shaving cream/funny foam etc.
- will be distressed by dirty hands and want to wipe or wash them frequently
- excessively ticklish
- distressed by seams in socks and may refuse to wear them
- distressed by clothes rubbing on skin; may want to wear shorts and short sleeves year round, toddlers may prefer to be naked and pull diapers and clothes off constantly
- or, may want to wear long sleeve shirts and long pants year round to avoid having skin exposed
- distressed about having face washed
- distressed about having hair, toenails, or fingernails cut
- resists brushing teeth and is extremely fearful of the dentist
- is a picky eater, only eating certain tastes and textures; mixed textures tend to be avoided as well as hot or cold foods; resists trying new foods
- may refuse to walk barefoot on grass or sand
- may walk on toes only

## 2. Hyposensitivity to Touch (Under-Responsive)

- may crave touch, needs to touch everything and everyone
- is not aware of being touched/bumped unless done with extreme force or intensity
- is not bothered by injuries, like cuts and bruises, and shows no distress with shots (may even say they love getting shots!)
- may not be aware that hands or face are dirty or feel his/her nose running
- may be self-abusive; pinching, biting, or banging his own head
- mouths objects excessively
- frequently hurts other children or pets while playing
- repeatedly touches surfaces or objects that are soothing (i.e., blanket)
- seeks out surfaces and textures that provide strong tactile feedback
- thoroughly enjoys and seeks out messy play
- craves vibrating or strong sensory input
- has a preference and craving for excessively spicy, sweet, sour, or salty foods

## 3. Poor Tactile Perception and Discrimination

- has difficulty with fine motor tasks such as buttoning, zipping, and fastening clothes

- may not be able to identify which part of their body was touched if they were not looking
- may be afraid of the dark
- may be a messy dresser; looks disheveled, does not notice pants are twisted, shirt is half untucked, shoes are untied, one pant leg is up and one is down, etc.
- has difficulty using scissors, crayons, or silverware
- continues to mouth objects to explore them even after age two
- has difficulty figuring out physical characteristics of objects; shape, size, texture, temperature, weight, etc.
- may not be able to identify objects by feel, uses vision to help; such as, reaching into backpack or desk to retrieve an item

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**Vestibular Sense:** input from the inner ear about equilibrium, gravitational changes, movement experiences, and position in space.

### Signs of Vestibular Dysfunction

#### 1. Hypersensitivity to Movement (Over-Responsive)

- avoids/dislikes playground equipment; i.e., swings, ladders, slides, or merry-go-rounds
- prefers sedentary tasks, moves slowly and cautiously, avoids taking risks, and may appear "wimpy"
- avoids/dislikes elevators and escalators; may prefer sitting while they are on them or, actually get motion sickness from them
- may physically cling to an adult they trust
- may appear terrified of falling even when there is no real risk of it
- afraid of heights, even the height of a curb or step
- fearful of feet leaving the ground
- fearful of going up or down stairs or walking on uneven surfaces
- afraid of being tipped upside down, sideways or backwards; will strongly resist getting hair washed over the sink
- startles if someone else moves them; i.e., pushing his/her chair closer to the table
- as an infant, may never have liked baby swings or jumpers
- may be fearful of, and have difficulty riding a bike, jumping, hopping, or balancing on one foot (especially if eyes are closed)
- may have disliked being placed on stomach as an infant
- loses balance easily and may appear clumsy
- fearful of activities which require good balance
- avoids rapid or rotating movements

#### 2. Hyposensitivity to Movement (Under-Responsive)

- in constant motion, can't seem to sit still
- craves fast, spinning, and/or intense movement experiences

- loves being tossed in the air
- could spin for hours and never appear to be dizzy
- loves the fast, intense, and/or scary rides at amusement parks
- always jumping on furniture, trampolines, spinning in a swivel chair, or getting into upside down positions
- loves to swing as high as possible and for long periods of time
- is a "thrill-seeker"; dangerous at times
- always running, jumping, hopping etc. instead of walking
- rocks body, shakes leg, or head while sitting
- likes sudden or quick movements, such as, going over a big bump in the car or on a bike

### 3. Poor Muscle Tone And/Or Coordination

- has a limp, "floppy" body
  - frequently slumps, lies down, and/or leans head on hand or arm while working at his/her desk
  - difficulty simultaneously lifting head, arms, and legs off the floor while lying on stomach ("superman" position)
  - often sits in a "W sit" position on the floor to stabilize body
  - fatigues easily
  - compensates for "looseness" by grasping objects tightly
  - difficulty turning doorknobs, handles, opening and closing items
  - difficulty catching him/her self if falling
  - difficulty getting dressed and doing fasteners, zippers, and buttons
  - may have never crawled as an baby
  - has poor body awareness; bumps into things, knocks things over, trips, and/or appears clumsy
  - poor gross motor skills; jumping, catching a ball, jumping jacks, climbing a ladder etc
  - poor fine motor skills; difficulty using "tools", such as pencils, silverware, combs, scissors etc.
  - may appear ambidextrous, frequently switching hands for coloring, cutting, writing etc.;
- does not have an established hand preference/dominance by 4 or 5 years old
- has difficulty licking an ice cream cone
  - seems to be unsure about how to move body during movement, for example, stepping over something
  - difficulty learning exercise or dance steps

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**Proprioceptive Sense:** input from the muscles and joints about body position, weight, pressure, stretch, movement, and changes in position in space.

### Signs of Proprioceptive Dysfunction

#### 1. Sensory Seeking Behaviors

- seeks out jumping, bumping, and crashing activities
- stomps feet when walking
- kicks his/her feet on floor or chair while sitting at desk/table
- bites or sucks on fingers and/or frequently cracks his/her knuckles
- loves to be tightly wrapped in many or weighted blankets, especially at bedtime
- prefers clothes (and belts, hoods, shoelaces) to be as tight as possible
- loves/seeks out "squishing" activities
- enjoys bear hugs
- excessive banging on/with toys and objects
- loves "roughhousing" and tackling/wrestling games
- frequently falls on floor intentionally
- would jump on a trampoline for hours on end
- grinds his/her teeth throughout the day
- loves pushing/pulling/dragging objects
- loves jumping off furniture or from high places
- frequently hits, bumps or pushes other children
- chews on pens, straws, shirt sleeves etc.

## 2. Difficulty with "Grading of Movement"

- misjudges how much to flex and extend muscles during tasks/activities (i.e., putting arms into sleeves or climbing)
- difficulty regulating pressure when writing/drawing; may be too light to see or so hard the tip of writing utensil breaks
- written work is messy and he/she often rips the paper when erasing
- always seems to be breaking objects and toys
- misjudges the weight of an object, such as a glass of juice, picking it up with too much force sending it flying or spilling, or with too little force and complaining about objects being too heavy
- may not understand the idea of "heavy" or "light"; would not be able to hold two objects and tell you which weighs more
- seems to do everything with too much force; i.e., walking, slamming doors, pressing things too hard, slamming objects down
- plays with animals with too much force, often hurting them

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## Signs of Auditory Dysfunction: (no diagnosed hearing problem)

### 1. Hypersensitivity to Sounds (Auditory Defensiveness)

- distracted by sounds not normally noticed by others; i.e., humming of lights or refrigerators, fans, heaters, or clocks ticking
- fearful of the sound of a flushing toilet (especially in public bathrooms), vacuum, hairdryer,

squeaky shoes, or a dog barking

- startled with or distracted by loud or unexpected sounds
- bothered/distracted by background environmental sounds; i.e., lawn mowing or outside

construction

- frequently asks people to be quiet; i.e., stop making noise, talking, or singing
- runs away, cries, and/or covers ears with loud or unexpected sounds
- may refuse to go to movie theaters, parades, skating rinks, musical concerts etc.
- may decide whether they like certain people by the sound of their voice

### **□ 2. Hyposensitivity to Sounds (Under-Registers)**

- often does not respond to verbal cues or to name being called
- appears to "make noise for noise's sake"
- loves excessively loud music or TV
- seems to have difficulty understanding or remembering what was said
- appears oblivious to certain sounds
- appears confused about where a sound is coming from
- talks self through a task, often out loud
- had little or no vocalizing or babbling as an infant
- needs directions repeated often, or will say, "What?" frequently

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## **Signs of Oral Input Dysfunction**

### **1. Hypersensitivity to Oral Input (Oral Defensiveness)**

- picky eater, often with extreme food preferences; i.e., limited repertoire of foods, picky about brands, resistive to trying new foods or restaurants, and may not eat at other people's houses)
- may only eat "soft" or pureed foods past 24 months of age
- may gag with textured foods
- has difficulty with sucking, chewing, and swallowing; may choke or have a fear of choking
- resists/refuses/extremely fearful of going to the dentist or having dental work done
- may only eat hot or cold foods
- refuses to lick envelopes, stamps, or stickers because of their taste
- dislikes or complains about toothpaste and mouthwash
- avoids seasoned, spicy, sweet, sour or salty foods; prefers bland foods

### **2. Hyposensitivity to Oral Input (Under-Registers)**

- may lick, taste, or chew on inedible objects
- prefers foods with intense flavor; i.e., excessively spicy, sweet, sour, or salty
- excessive drooling past the teething stage

- frequently chews on hair, shirt, or fingers
- constantly putting objects in mouth past the toddler years
- acts as if all foods taste the same
- can never get enough condiments or seasonings on his/her food
- loves vibrating toothbrushes and even trips to the dentist

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### Signs of Olfactory Dysfunction (Smells)

#### 1. Hypersensitivity to Smells (Over-Responsive)

- reacts negatively to, or dislikes smells which do not usually bother, or get noticed, by other people
- tells other people (or talks about) how bad or funny they smell
- refuses to eat certain foods because of their smell
- offended and/or nauseated by bathroom odors or personal hygiene smells
- bothered/irritated by smell of perfume or cologne
- bothered by household or cooking smells
- may refuse to play at someone's house because of the way it smells
- decides whether he/she likes someone or some place by the way it smells

#### 2. Hyposensitivity to Smells (Under-Responsive)

- has difficulty discriminating unpleasant odors
- may drink or eat things that are poisonous because they do not notice the noxious smell
- unable to identify smells from scratch 'n sniff stickers
- does not notice odors that others usually complain about
- fails to notice or ignores unpleasant odors
- makes excessive use of smelling when introduced to objects, people, or places
- uses smell to interact with objects

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### Signs of Visual Input Dysfunction (No Diagnosed Visual Deficit)

#### 1. Hypersensitivity to Visual Input (Over-Responsiveness)

- sensitive to bright lights; will squint, cover eyes, cry and/or get headaches from the light
- has difficulty keeping eyes focused on task/activity he/she is working on for an appropriate amount of time
- easily distracted by other visual stimuli in the room; i.e., movement, decorations, toys, windows, doorways etc.
- has difficulty in bright colorful rooms or a dimly lit room
- rubs his/her eyes, has watery eyes or gets headaches after reading or watching TV

- avoids eye contact
- enjoys playing in the dark

### **2. Hyposensitivity to Visual Input (Under-Responsive Or Difficulty With Tracking, Discrimination, Or Perception)**

- has difficulty telling the difference between similar printed letters or figures; i.e., p & q, b & d, + and x, or square and rectangle
- has a hard time seeing the "big picture"; i.e., focuses on the details or patterns within the picture
- has difficulty locating items among other items; i.e., papers on a desk, clothes in a drawer, items on a grocery shelf, or toys in a bin/toy box
- often loses place when copying from a book or the chalkboard
- difficulty controlling eye movement to track and follow moving objects
- has difficulty telling the difference between different colors, shapes, and sizes
- often loses his/her place while reading or doing math problems
- makes reversals in words or letters when copying, or reads words backwards; i.e., "was" for "saw" and "no" for "on" after first grade
- complains about "seeing double"
- difficulty finding differences in pictures, words, symbols, or objects
- difficulty with consistent spacing and size of letters during writing and/or lining up numbers in math problems
- difficulty with jigsaw puzzles, copying shapes, and/or cutting/tracing along a line
- tends to write at a slant (up or down hill) on a page
- confuses left and right
- fatigues easily with schoolwork
- difficulty judging spatial relationships in the environment; i.e., bumps into objects/people or missteps on curbs and stairs

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### **Auditory-Language Processing Dysfunction**

- unable to locate the source of a sound
- difficulty identifying people's voices
- difficulty discriminating between sounds/words; i.e., "dare" and "dear"
- difficulty filtering out other sounds while trying to pay attention to one person talking
- bothered by loud, sudden, metallic, or high-pitched sounds
- difficulty attending to, understanding, and remembering what is said or read; often asks for directions to be repeated and may only be able to understand or follow two sequential directions at a time
- looks at others to/for reassurance before answering
- difficulty putting ideas into words (written or verbal)
- often talks out of turn or "off topic"
- if not understood, has difficulty re-phrasing; may get frustrated, angry, and give up
- difficulty reading, especially out loud (may also be dyslexic)

- difficulty articulating and speaking clearly
- ability to speak often improves after intense movement

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### **Social, Emotional, Play, And Self-Regulation Dysfunction**

#### **Social**

- difficulty getting along with peers
- prefers playing by self with objects or toys rather than with people
- does not interact reciprocally with peers or adults; hard to have a "meaningful" two-way conversation
- self-abusive or abusive to others
- others have a hard time interpreting child's cues, needs, or emotions
- does not seek out connections with familiar people

#### **Emotional**

- difficulty accepting changes in routine (to the point of tantrums)
- gets easily frustrated
- often impulsive
- functions best in small group or individually
- variable and quickly changing moods; prone to outbursts and tantrums
- prefers to play on the outside, away from groups, or just be an observer
- avoids eye contact
- difficulty appropriately making needs known

#### **Play**

- difficulty with imitative play (over 10 months)
- wanders aimlessly without purposeful play or exploration (over 15 months)
- needs adult guidance to play, difficulty playing independently (over 18 months)
- participates in repetitive play for hours; i.e., lining up toys cars, blocks, watching one movie over and over etc.

#### **Self-Regulation**

- excessive irritability, fussiness or colic as an infant
- can't calm or soothe self through pacifier, comfort object, or caregiver
- can't go from sleeping to awake without distress
- requires excessive help from caregiver to fall asleep; i.e., rubbing back or head, rocking, long walks, or car rides

#### **Internal Regulation (The Interoceptive Sense)**

- becoming too hot or too cold sooner than others in the same environments; may not appear to ever get cold/hot, may not be able to maintain body temperature effectively
- difficulty in extreme temperatures or going from one extreme to another (i.e., winter, summer, going from air conditioning to outside heat, a heated house to the cold outside)
- respiration that is too fast, too slow, or cannot switch from one to the other easily as the body demands an appropriate respiratory response
- heart rate that speeds up or slows down too fast or too slow based on the demands imposed on it
- respiration and heart rate that takes longer than what is expected to slow down during or after exertion or fear
- severe/several mood swings throughout the day (angry to happy in short periods of time, perhaps without visible cause)
- unpredictable state of arousal or inability to control arousal level (hyper to lethargic, quickly, vacillating between the two; over stimulated to under stimulated, within hours or days, depending on activity and setting, etc.)
- frequent constipation or diarrhea, or mixed during the same day or over a few days
- difficulty with potty training; does not seem to know when he/she has to go (i.e., cannot feel the necessary sensation that bowel or bladder are full)
- unable to regulate thirst; always thirsty, never thirsty, or oscillates back and forth
- unable to regulate hunger; eats all the time, won't eat at all, unable to feel full/hungry
- unable to regulate appetite; has little to no appetite and/or will be "starving" one minute then full two bites later, then back to hungry again (prone to eating disorders and/or failure to thrive)

***Replicated from [www.sensory-processing-disorder.com](http://www.sensory-processing-disorder.com)***