

M-CHAT (Modified Checklist for Autism in Toddlers)

www.m-chat.org

Child's Name _____

Filled Out By _____

Date of Birth _____

Relationship to Child _____

Today's Date _____

Please fill out the following about how your child **usually** is. Please try to answer every question.
If behavior is rare (e.g., you've seen it once or twice, please answer as if your child does not do it.)

1. Does your child enjoy being swung, bounced on your knee, etc.?----- Yes No
2. Does your child take an interest in other children?----- Yes No
3. Does your child like climbing on things, such as up stairs?----- Yes No
4. Does your child enjoy playing peek-a-boo/hide-and-seek?----- Yes No
5. Does your child ever pretend, for example, to talk on the phone or take----- Yes No
care of dolls, or pretend other things?

6. Does your child ever use his/her index finger to point, to ask for something?----- Yes No
7. Does your child ever use his/her index finger to point, to indicate----- Yes No
interest in something?
8. Can your child play properly with small toys (e.g. cars or bricks) without just ----- Yes No
mouthing, fiddling, or dropping them?
9. Does your child ever bring objects over to you (parent) to show you----- Yes No
something?
10. Does your child look you in the eye for more than a second or two?----- Yes No

11. Does you child ever seem oversensitive to noise? (e.g. plugging ears)----- Yes No
12. Does your child smile in response to your face or your smile?----- Yes No
13. Does your child imitate you? (e.g. You make a face-Will your child imitate it?)----- Yes No
14. Does your child respond to his/her name when you call?----- Yes No
15. If you point at a toy across the room, does your child look at it?----- Yes No

16. Does your child walk?----- Yes No
17. Does your child look at things you are looking at?----- Yes No
18. Does your child make unusual finger movements near his/her face?----- Yes No
19. Does your child try to attract your attention to his/her own activity?----- Yes No
20. Have you ever wondered if your child is deaf?----- Yes No

21. Does your child understand what people say?----- Yes No
22. Does your child sometimes stare at nothing or wander with no purpose?----- Yes No
23. Does your child look at your face to check your reaction when faced with----- Yes No
something unfamiliar?