CHANGING HOW ALERT YOU FEEL

1. PUT SOMETHING IN YOUR MOUTH:
   • eat hard candy (sugarless if you want)
   • eat crunchy food: pretzels, popcorn, nuts, apples
   • eat chewy food: gum (1 or more pieces), raisins, bagels, chunks of cheese
   • eat sour food: pickles, sour candy
   • eat sweet food: fruit or candy
   • drink from a straw: use an “exercise bottle” to drink liquids such as a milkshake, a “Slurpie”
     (partially thaw a frozen drink), or other drinks
   • try a combination such as trail mix (crunchy, chewy, sweet), Starburst (chewy, sweet, and tart), or
     chips dipped into salsa (crunchy and spicy)
   • use green rubber tubing
   • take slow deep breaths

2. MOVE: (try moving before you need to concentrate - ex: homework)
   • do isometrics (push arms on a wall or push hands together)
   • walk quickly (in school or take the dog for a walk)
   • run up and down steps
   • do an errand for a teacher
   • shake head quickly
   • roll neck slowly in circular motion
   • jump up and down or try to jump to touch a door frame
   • play sports - basketball, swimming, baseball, frisbee, etc.
   • do aerobics with a group or at home to music
   • dance
   • use a therapy ball

3. TOUCH:
   • try holding and “fidgeting” with a Koosh Ball, paper clips, rubber bands, straw, jewelry, or clay
   • rub gently or vigorously on your skin or clothing
   • take a cool shower or warm bath
   • wash your face with a cold or hot wash cloth
   • pet or play with an animal
   • hold or lean up against stuffed animal or large pillows

4. LOOK:
   • put bright lights on in room if you are in low speed
   • dim the lights if you are in high speed
   • clear off the table you are working on if it distracts you
   • watch fish in an aquarium
   • read a book or look at magazine

5. LISTEN:
   • listen to classical type music (even, slow beat)
   • listen to hard rock type music (loud bass, uneven beat)
   • use a personal cassette player if the music bothers someone else
   • avoid loud, noisy places if you are in high speed or if it bothers you when you are trying to
     concentrate

A-46 "How does your engine run?" © 1994, TherapyWorks, Inc. This page may be reproduced for instructional use.
LISTEN (AUDITORY INPUT):
- listen to Classical Music
- listen to Hard Rock
- listen to others "hum"
- work in "quiet" room
- work in "noisy" room
- sing or talk to self
- How do you react to:
  - scratch on a chalkboard
  - "squeak" of a mechanical pencil
  - fire siren
  - waking to an unusual noise
  - dog barking (almost constantly)

QUESTIONS TO PONDER

1. Review this Sensory-Motor Preference Checklist. Think about what you do in a small manner to maintain an appropriate alert level that a child with a less mature nervous system may need to do in a larger more intense way.

2. Notice which types of sensory input are comforting to your nervous system and which types of sensory input bother your nervous system. Are your items clustered in a certain category of sensory input?

3. Consider how often (frequency), how long (duration), how much (intensity), and with what rhythm (fast, slow, uneven, even) you use these inputs to change your state of alertness.

4. When you are needing to concentrate at your work space, what sensory input do you prefer to work most efficiently?
   a) What do you put in or around your mouth? (Example: food, drink, gum, etc.)
   
   b) What do you prefer to touch? (Example: clothing, texture of chair, fidgeting with objects, etc.)
   
   c) What types of movement do you use? (Example: rock in chair or movement breaks to stretch or walk, etc.)
   
   d) What are your visual preferences? (Example: natural lighting from window, use of lamp, brightly colored walls. Are you an “in” person working best with your desk cleared off or an “out” person whose desk is piled high with papers, etc.)
   
   e) What auditory input do you use? (Example: do you listen to music while you work? If so, what type of beat? Do you like to talk to yourself or others and work at the same time? Do you prefer a quiet environment?, etc.)
SENSORY-MOTOR PREFERENCE CHECKLIST (FOR ADULTS)

DIRECTIONS: This checklist was developed to help adults recognize what strategies their own nervous systems employ to attain an appropriate state of alertness. Mark the items below that you use to increase (↑) or to decrease (↓) your state of alertness. You might mark both (↑↓) or some items. Others you might not use at all.

PUT SOMETHING IN YOUR MOUTH (ORAL MOTOR INPUT):
_ drink a milkshake
_ suck on hard candy
_ crunch or suck on ice pieces
_ tongue in cheek movements
_ "chew" on pencil / pen
_ chew on coffee swizzle sticks
_ take slow deep breaths
_ suck, lick, bite on your lips or the inside of your cheeks
_ drink carbonated drink
_ eat a cold popsicle
_ eat a pickle
_ chew gum
_ crunch on nuts / pretzels / chips
_ bite on nails / cuticle
_ eat popcorn / cut up vegetables
_ eat chips and a spicy dip
_ smoke cigarettes
_ chew on buttons, sweatshirt strings or collars
_ whistle while you work
_ drink coffee / tea (caffeinated)
_ drink hot cocoa or warm milk
_ other:

MOVE (VESTIBULAR / PROPRIOCEPTIVE INPUT):
_ rock in a rocking chair
_ shift or "squirm" in a chair
_ push chair back on 2 legs
_ aerobic exercise
_ isometrics / lift weights
_ rock own body slightly
_ scrub kitchen floor
_ roll neck and head slowly
_ sit with crossed legs and bounce one slightly
_ run / jog
_ ride bike
_ tap toe, heel or foot
_ dance
_ tap pencil / pen
_ yard work
_ stretch / shake body parts
_ Other:

TOUCH (TACTILE INPUT):
_ twist own hair
_ move keys or coins in pocket with your hand
_ cool shower
_ warm bath
_ receive a massage
_ pet a dog or cat
_ drum fingers or pencil on table
_ rub gently on skin / clothes
* Fidget with the following:
_ a straw
_ paper clips
_ cuticle / nails
_ pencil / pen
_ earring or necklace
_ phone cord while talking
_ put fingers near mouth, eye, or nose
_ other:

LOOK (VISUAL INPUT):
_ open window shades after a boring movie in a classroom
_ watch a fireplace
_ watch fish tank
_ watch sunset / sunrise
_ watch "oil and water" toys
* How do you react to:
_ dim lighting
_ fluorescent lighting
_ sunlight through bedroom window when sleeping
_ rose colored room
_ a "cluttered desk" when needing to concentrate

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Williams, Shellenberger  A-55
SENSORIMOTOR METHODS TO CHANGE ENGINE LEVELS
(Terms in italics are recommended for use with students.)

1) **Put something in your mouth.** Oral motor input has a range of characteristics, including the following (Wilberger, J., 1993 and Oetter, P. 1991).
   a) Action Variables (*what you do*): Blowing, sucking, swallowing, biting, chewing, chewing, or licking.
   b) Quality Variables (*how it feels or tastes*): Physical feeling of resistance when biting, chewing, sucking, and blowing; the taste of sour, sweet, salty, spicy, or bitter; the temperature of food such as hot chocolate, cold popsicle, or warm soup.
   c) Medium Variables (*with what?):* Whistle, straw, bubbles, musical instrument, exercise water bottle, candy, beef jerky, rubber tubing, fruit, crackers, pretzels, gum, bagels, popcorn, etc.

2) **Move.** Vestibular and proprioceptive inputs include:
   a) Oscillation (*up and down*): Sitting on a teeter-totter, trotting on a horse, jumping, sitting and bouncing on a therapy ball, or jumping on a trampoline.
   b) Linear (*front and back*): Swinging on a playground swing, rocking in a rocking chair or on a rocking horse, or swinging on a glider.
   c) Rotary (*circles*): Riding on a merry-go-round, using a “Sit ’n Spin,” standing and twirling, or spinning on a tire swing.
   d) Inverted (*upside down*): Hanging by the knees on a playground bar with hands near the ground, bending over with head between knees, “wheelbarrow” walking, or on tummy laying over therapy ball.
   e) One type of proprioception (*heavy work*), meaning input to muscles, tendons, and joints: Crossing the monkey bars on a playground, climbing a tree, pushing furniture, lifting firewood, or pulling a sled uphill.

3) **Touch.** Tactile input variables include:
   a) Fidgeting and holding objects, such as Koosh balls, Squish balls, paper clips, flexible straws, or stuffed animals.
   b) Temperature variables, such as warm baths, cool showers, or the neutral warmth of being held by another or snuggled under blankets.
   c) Light touch, such as tickling, light back scratch, petting a dog or cat, or sleeping under flannel sheets.
   d) Deep touch, such as playing with resistive clay or therapy putty, deep “bear hug,” or deep massage.

4) **Look.** Visual input can include:
   a) Variations in light (natural lighting versus artificial lighting, or dim lighting versus bright lighting).
   b) Variations in color (walls painted a bright color versus a pastel color, or classroom bulletin boards decorated with brilliant red, orange, and yellow colors versus muted brown, beige, and rose colors).
   c) Variations in the amount of visual distractions (visually cluttered room versus sparsely decorated room).

5) **Listen.** Auditory input can include:
   a) Variations in noise level (loud music versus quiet music, or screaming versus whispering).
   b) Variations in rhythm (fast versus slow music, or arrhythmic versus rhythmical music).
   c) Variations in amount of auditory distractions (quiet working environment versus noisy working environment, or sudden unexpected sounds versus constant background noise such as a clock ticking).
# Sensory Checklist

From *Raising a Sensory Smart Child*, © Biel & Peske, 2005

<table>
<thead>
<tr>
<th>TOUCH</th>
<th>AVOIDS</th>
<th>SEEEKS</th>
<th>MIXED</th>
<th>NEUTRAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Being touched on some body parts, hugs and cuddles</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Certain clothing fabrics, seams, tags, waistbands, cuffs, etc.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Clothing, shoes, or accessories that are very tight or very loose</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Getting hands, face, or other body parts “messy” with paint, glue, sand, food, lotion, etc.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Grooming activities such as face and hair washing, brushing, cutting, and nail trimming</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Taking a bath, shower, or swimming</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Getting toweled dry</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Trying new foods</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Feeling particular food textures and temperatures inside the mouth—mushy, smooth, etc.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Standing close to other people</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Walking barefoot</td>
<td>☐</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>PROPRIOCEPTION (BODY SENSE)</th>
<th>AVOIDS</th>
<th>SEEEKS</th>
<th>MIXED</th>
<th>NEUTRAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Activities such as roughhousing, jumping, banging, pushing, bouncing, climbing, hanging, and other active play</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>High-risk play (jumps from extreme heights, climbs very high trees, rides bicycle over gravel)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Fine motor tasks such as writing, drawing, closing buttons and snaps, attaching pop beads and snap-together building toys</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Activities requiring physical strength and force</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Eating crunchy foods (pretzels, dry cereal, etc.) or chewy foods (e.g., meat, caramels)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Smooth, creamy foods (yogurt, cream cheese, pudding)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Having eyes closed or covered</td>
<td>☐</td>
<td>☐</td>
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</tr>
</tbody>
</table>

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### VESTIBULAR (MOVEMENT SENSE)

<table>
<thead>
<tr>
<th>Activity</th>
<th>AVOIDS</th>
<th>SEEKS</th>
<th>MIXED</th>
<th>NEUTRAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Being moved passively by another person (rocked or twirling by an adult, pushed in a wagon)</td>
<td>✔</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Riding equipment that moves through space (swings, teeter-totter, escalators and elevators)</td>
<td>✔</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spinning activities (carousels, spinning toys, spinning around in circles)</td>
<td>✔</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Activities that require changes in head position (such as bending over sink) or having head upside down (such as somersaults, hanging from feet)</td>
<td>✔</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Challenges to balance such as skating, bicycle riding, skiing, and balance beams</td>
<td>✔</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Climbing and descending stairs, slides, and ladders</td>
<td>✔</td>
<td></td>
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</tr>
<tr>
<td>Being up high, such as at the top of a slide or mountain overlook</td>
<td>✔</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less stable ground surfaces such as deep pile carpet, grass, sand, and snow</td>
<td>✔</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Riding in a car or other form of transportation</td>
<td>✔</td>
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</tr>
</tbody>
</table>

### AUDITORY/LISTENING

<table>
<thead>
<tr>
<th>Activity</th>
<th>AVOIDS</th>
<th>SEEKS</th>
<th>MIXED</th>
<th>NEUTRAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hearing loud sounds—car horns, sirens, loud music or TV</td>
<td>✔</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Being in noisy settings such as a crowded restaurant, party, or busy store</td>
<td>✔</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Watching TV or listening to music at very high or very low volume</td>
<td>✔</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Speaking or being spoken to amid other sounds or voices</td>
<td>✔</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Background noise when concentrating on a task (music, dishwasher, fan, etc.)</td>
<td>✔</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Games with rapid verbal instructions such as Simon Says or Hokey Pokey</td>
<td>✔</td>
<td></td>
<td></td>
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<tr>
<td>Back-and-forth, interactive conversations</td>
<td>✔</td>
<td></td>
<td></td>
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<tr>
<td>Unfamiliar sounds, silly voices, foreign language</td>
<td>✔</td>
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</tr>
<tr>
<td>Singing alone or with others</td>
<td>✔</td>
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</tbody>
</table>
### VISION

<table>
<thead>
<tr>
<th>Activity</th>
<th>AVOIDS</th>
<th>SEEKS</th>
<th>MIXED</th>
<th>NEUTRAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learning to read or reading for more than a few minutes</td>
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</tr>
<tr>
<td>Looking at shiny, spinning, or moving objects</td>
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<tr>
<td>Activities that require eye-hand coordination such as baseball, catch, stringing beads, writing, and tracing</td>
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<tr>
<td>Tasks requiring visual analysis like puzzles, mazes, and hidden pictures</td>
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<td></td>
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<tr>
<td>Activities that require discriminating between colors, shapes, and sizes</td>
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<tr>
<td>Visually “busy” places such as stores and crowded playgrounds</td>
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<tr>
<td>Finding objects such as socks in a drawer or a particular book on a shelf</td>
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<tr>
<td>Very bright light or sunshine, or being photographed with a flash</td>
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<tr>
<td>Dim lighting, shade, or the dark</td>
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<tr>
<td>Action-packed, colorful television, movies or computer/video games</td>
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<tr>
<td>New visual experiences such as looking through a kaleidoscope or colored glass</td>
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</tbody>
</table>

### TASTE AND SMELL

<table>
<thead>
<tr>
<th>Activity</th>
<th>AVOIDS</th>
<th>SEEKS</th>
<th>MIXED</th>
<th>NEUTRAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smelling unfamiliar scents</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strong odors such as perfume, gasoline, cleaning products</td>
<td></td>
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<td></td>
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<tr>
<td>Smelling objects that aren't food such as flowers, plastic items, playdough, and garbage</td>
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<td></td>
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<tr>
<td>Eating new foods</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eating familiar foods</td>
<td></td>
<td></td>
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<tr>
<td>Eating strongly flavored foods (very spicy, salty, bitter, sour, or sweet)</td>
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</tbody>
</table>
Sensory Diet Activities

What is a sensory diet?

Just as your child needs food throughout the course of the day, his need for sensory input must also be met. A “sensory diet” (coined by OT Patricia Wilbarger) is a carefully designed, personalized activity plan that provides the sensory input a person needs to stay focused and organized throughout the day. Just as you may jiggle your knee or chew gum to stay awake or soak in a hot tub to unwind, children need to engage in stabilizing, focusing activities too. Infants, young children, teens, and adults with mild to severe sensory issues can all benefit from a personalized sensory diet.

Each child has a unique set of sensory needs. Generally, a child whose nervous system is on “high trigger/too wired” needs more calming input, while the child who is more “sluggish/too tired” needs more arousing input. A qualified occupational therapist can use her advanced training and evaluation skills to develop a good sensory diet for your child—or you!—but it’s up to you and your child to implement it throughout the course of the day.

The great news is that the effects of a sensory diet are usually immediate AND cumulative. Activities that perk up your child or calm him down are not only effective in the moment; they actually help to restructure your child’s nervous system over time so that he is better able to:

- tolerate sensations and situations he finds challenging
- regulate his alertness and increase attention span
- limit sensory seeking and sensory avoiding behaviors
- handle transitions with less stress

Creating a Sensory Diet: The Ingredients

It is strongly recommended that you work with an occupational therapist who specializes in sensory processing issues. One of the trickiest aspects of SPD is recognizing when a child is overreactive or underreactive in any given moment, and then calibrating sensory input to meet him where he is and then provide a “just right challenge” to help him move forward into a “just right” state of being. That’s why it’s so important to partner up with knowledgeable help. Our comprehensive book, Raising a Sensory Smart Child, which includes the Sensory Checklist you can print here, is geared toward building your “sensory smarts.”
Print out these sensory diet activities to get started. You’ll need to modify them depending on your child’s age, arousal level (does she to rev up or relax?), whether she is in school, at home, or away, and whether or not you have special equipment available. See our Toys and Equipment page for items that provide valuable sensory input. Also check our Working with Schools page regarding sensory diet at school.

Proprioception

Proprioceptive input (sensations from joints, muscles and connective tissues that lead to body awareness) can be obtained by lifting, pushing, and pulling heavy objects, including one’s own weight. A child can also stimulate the proprioceptive sense by engaging in activities that push joints together like pushing something heavy or pull joints apart like hanging from monkey bars.

Toddlers and Preschoolers

Make a “burrito” or “sandwich.” Firmly press on your child’s arms legs and back with pillows or make a “burrito” by rolling her up in a blanket.

Push and pull. She can push her own stroller, and a stronger child can push a stroller or cart filled with weighted objects such as groceries.

Carry that weight. Your child can wear a backpack or fanny pack filled with toys (not too heavy!).

School-age Kids

Jump! Have your child jump on a mini-trampoline or rebounder or play hopscotch.

Push and pull. Have him vacuum, carry books from one room to another, help wash windows or a tabletop, and transfer wet laundry from the washing machine to the dryer.

Teenagers and Adults
Heavy lifting. Without straining, teens and adults can shovel snow or lift free weights.

Push, pull, and carry. Rake leaves, push heavy objects like firewood in a wheelbarrow, do push-ups against the wall, wear a heavy knapsack (not too heavy!) or pull a luggage cart-style backpack, or mow the lawn with a push mower.

Reassuring pressure. Get a firm massage, use a weighted vest or lap pad from a therapy catalog, or place light weights in the pockets of a fishing, athletic or regular type of vest. (Please see Raising a Sensory Smart Child for weighted wearable recommendations and precautions).

Vestibular

Vestibular input (the sense of movement, centered in the inner ear). Any type of movement will stimulate the vestibular receptors, but spinning, swinging, and hanging upside down provide the most intense, longest lasting input. If your child has vestibular (movement) sensitivities, please work closely with a sensory smart OT who can help you recognize and prevent signs of nervous system overload.

Toddler’s and Preschoolers

Swing. Encourage her to swing on playground swings, trying various types of swings and movements, such as front to back and side to side.

Spin. Have him spin using a Sit n’ Spin, Dizzy Disc Jr., or office chair. Let her run in circles, and ride a carousel. Hold your child’s arm and spin in a circle as he lifts off the ground, or play airplane by holding one of his arms and the leg on the same side of his body as you spin in place (only if he does not have low muscle tone).

School-age kids
Get upside down. Have him hang upside down from playground equipment, do somersaults, or ride a loop-de-loop rollercoaster.

Swing and roll. Encourage her to use playground swings and roll down a grassy or snowy hill (which good proprioceptive input as well).

Spin. Encourage her to go on amusement park rides that spin, have a Dizzy Disc Jr.

Teenagers and Adults

Swing and spin. Swing on a hammock, use playground swings or merry-go-round (you’re never too old!).

Move that body! Do cartwheels, swim (doing flip turns and somersaults in the water), do jumping jacks, and dance.

Tactile

The tactile sense detects light touch, deep pressure, texture, temperature, vibration, and pain. This includes both the skin covering your body and the skin lining the inside of your mouth. Oral tactile issues can contribute to picky eating and feeding difficulties.

Toddlers and Preschoolers

Food and drink. Let your child drink plain seltzer or carbonated mineral water to experience bubbles in her mouth (you can flavor it with a little juice or with lemon, lime, etc.).

Messy play with textures. Have her play with foamy soap or shaving cream, and add sand for extra texture. Have her fingerpaint, play with glitter glue, mix cookie dough and cake batter, and so on. Let your child use the playground sandbox or create your own at home, filling a bin with dry beans and rice or other materials and small toys. Cover and store the bin for future use.

Use child-friendly modeling material such as Play-Doh, Model Magic, and Sculpey (the classic Play-Doh Fun Factory provides excellent proprioceptive input as well). Never force a child who is unwilling to touch “yucky” substances. Let him use a paintbrush, stick, or even a toy for cautious exploration.

Dress up. Dress up in fun costumes to get used to the feel of unfamiliar clothing,
School-age kids

Food and drink. Provide your child with frozen foods (popsicles, frozen fruit or vegetables) and mixed temperature foods (hot fudge sundae, hot taco with cold toppings, etc.).

Get in touch with nature. Encourage him to walk barefoot in the grass (avoiding pesticide applications), sand, or dirt. Have him garden and repot indoor plants.

Play dress-ups. Encourage play with make-up, face painting, and costumes, putting on a play or making a mini movie with a video camera.

Teenagers and Adults

Tactile hobbies. Sculpt, sew, weave, crochet or knit. Create a scrapbook (which involves lots of pasting and working with different textures). Use sandpaper to smooth a woodworking project. Make things out of clay, and try using a potter’s wheel.

Auditory

Auditory input refers to both what we hear and how we listen, and is physiologically connected with the vestibular sense. In addition to various types of recorded and live music, here are some ways kids and adults can get calming and organizing auditory input.

Get outside and listen. Go to the beach or sit still and listen to the rain, thunder, and so on. If you hear birds singing, try to identify what direction a given bird is calling from.

Listen to natural sound recordings. There are many recordings of rain falling, ocean waves, bird songs, and so on. Sometimes natural sound recordings also feature light instrumentation with flutes, keyboards, etc. Some children and adults find they sleep better if they play such music.

Play a listening game. You and your child sit very quietly and try to identify the sounds you hear (traffic, the hum of the refrigerator, a door shutting, etc.) and where it’s coming from.

Find calming, focusing music. Listen to music specially engineered to promote calm, focus, energy, or creativity. Keep in mind, of course, that musical preference is highly idiosyncratic, so this will take some experimentation. The music you love may distress your child, while the music he finds so soothing may drive you up the wall.

Encourage musicianship. Provide your child with a musical instrument and encourage him to play and even take lessons.

Give him some control. For a child with auditory sensitivity, predicting and controlling sounds can be very helpful. Encourage him to turn on the vacuum cleaner, help him pop the balloons after a birthday party, anticipating the noise. Try Sound Eaze and School Eaze CDs that desensitize children to everyday sounds such as flushing toilets, thunder, barking dogs, alarms, and other sounds many kids find distressing.

Create pleasant sounds. Get a white noise machine, tabletop rocks-and-water fountain, or aquarium.

Visual
Visual input can often be overstimulating for a child with sensory issues. Think about ways you can simplify the visual field at home or school for a calming, organizing effect. Alternately, if the child seems “tuned out” and doesn’t respond easily to visual stimulation, add brightly colored objects to encourage visual attention. For example, a child who has trouble getting aroused for play may be attracted by a brightly painted toy chest filled with toys in appealing colors. A child who seem unable to watch a ball as it rolls may be able to watch it if the ball lights up or makes noise as it moves.

Avoid excess visuals. Hide clutter in bins or boxes or behind curtains or doors—a simple, solid-color curtain hung over a bookshelf instantly reduces visual clutter. In rooms where the child spends a lot of time, try to use solid colored rugs instead of patterned ones. Solid-colored walls in neutral or soft colors are less stimulating than patterned wallpaper in bold colors.

Seat him elsewhere. Have your child sit at the front of a classroom where there is less distraction. He may also need to sit away from the window to avoid the allure of the outdoors. Some children do best sitting in the back of the room so they can monitor what other kids are doing without constantly turning around. Work with the teacher and an OT to see which seat placement works best.

Be color-sensitive. Avoid toys, clothes, towels, etc., in colors that your child find distressing.

Smell

Olfactory input (sense of smell) comes through the nose and goes straight to the most primitive, emotional part of the brain. So if your child is upset by something being stinky, it’s no wonder. Certain odors can stimulate, calm, or send him into sensory overload.

Smell stuff! Explore scents with your child to find ones that work best to meet your goal (to soothe him or to wake him up). Everyone has different preferences, but vanilla and rose scents are generally calming. Peppermint and citrus are usually alerting. Let’s say your child needs help staying calm and loves vanilla. You can use high-quality vanilla soap and bath oils at bath time, vanilla candles or essential oils in an aromatherapy machine at bedtime, and vanilla body lotion.

  Caution: Avoid lavender products for boys as several recent studies show a link with breast development in boys. It’s probably best to avoid using these products for girls as well.

Scent break. If your child is overtired at the shopping mall and you know scents help, have her smell her favorite scent or stop into a store that sells candles and soaps.

Scent play. Play a smelling game with your child. Have her close her eyes or wear a blindfold and try to
identify smells such as citrus fruit, flowers, spices such as cinnamon, and so on.

Taste

Taste input is perceived by our tongue but how we interpret or experience it is strongly influenced by our sense of smell. As an experiment, chew some gum until the flavor is gone, then hold a lemon under your nose; the gum will taste like lemon. Help your child with to broaden the tastes he tolerates or likes, and use strong tastes he enjoys to help arouse his sluggish system.

Give strong-tasting foods before introducing new ones. Strong tastes can stimulate the mouth of an undersensitive child and make him more willing to try new foods. Before presenting new foods, let the child have one peppermint, sour gummy bear, or other strong-flavored food.

Play a taste game. If your child does not have a strong negative reaction to refined sugar (becomes very “hyper” or sleepy), get an assortment of flavored jellybeans. Eat one at a time, and have her guess which flavor it is. If you wish to avoid sugar (and artificial color and flavor in most candies), you can play this game with slices of fruit, or another healthier snack.

Involve him in food preparation. Children are more likely to taste something if they help make it. Let your child help you grow fruit, vegetables, and herbs, and plan dinner and shop. Give him a sense of control: let him choose between chicken or fish, string beans or sugar snaps, potato or rice. Then let your child put the meat in the baking pan, break off vegetable tips and dump in water, and so on. Let him help you arrange food on each plate so it looks nice.

Play with your food. A so-called picky eater may be more willing to eat “rocks and trees” than meatballs and broccoli. Fun arrangements such as some vegetable sticks and grape tomatoes placed in a smiley face pattern on a plate encourage kids to taste something new.

Sample Sensory Diet

Here is a sample sensory diet, created for a second grade child with sensory processing disorder. We’ve used the annoying term “as directed” to avoid providing a cookbook recipe. Activities must be individualized for each child and modified frequently to meet changing needs. A separate program was worked out for this child with the school, including frequent movement breaks, an inflatable seat cushion for wiggling while remaining seated, and providing crunchy/chewy oral comfort snacks at handwriting time.

In the Morning

- Massage feet and back to help wake up
- Listen to recommended therapeutic listening CD
- Use vibrating toothbrush and/or vibrating hairbrush
- Eat crunchy cereal with fruit and some protein
- Spin on Dizzy Disc Jr. as directed
- Jump on mini-trampoline as directed

After school

- Go to playground for at least 30 minutes
- Push grocery cart or stroller
- Spinning as directed
- Mini-trampoline. Add variety: have him play catch or toss toys into a basket while jumping.
- Massage feet to “reorganize,” use therapy putty, make “body sandwiches,” wheelbarrow walk
- Do ball exercises as directed
- Listen to therapeutic listening CD
- Oral work — suck thick liquids through a straw, eat crunchy and chewy snacks, or chew gum before and/or during tabletop activities

**At dinnertime**

- Help with cooking, mixing, chopping, etc.
- Help set table, using two hands to carry and balance a tray
- Provide crunchy and chewy foods

**At night**

- Family time: clay projects, painting projects, etc.
- Warm bath with bubbles and calming essential oil
- Massage during reading time

Previous (Winter Tips). Next (Working with Schools)
Sensory Processing Disorder


The purpose of this sensory processing disorder checklist is to help parents and professionals who interact with children become educated about particular signs of sensory processing dysfunction.

**It is not to be used as the absolute diagnostic criteria for labeling children with sensory processing disorder.**

**Identifying and understanding this disorder is HUGE!**

Please understand the "Five Caveats" that Carol Stock Kranowitz points out in her book, "The Out-Of-Sync Child" (1995), about using a checklist such as this. She writes:

1. "The child with sensory dysfunction does not necessarily exhibit every characteristic. Thus, the child with vestibular dysfunction may have poor balance but good muscle tone."

2. "Sometimes the child will show characteristics of a dysfunction one day but not the next. For instance, the child with proprioceptive problems may trip over every bump in the pavement on Friday yet score every soccer goal on Saturday. **Inconsistency is a hallmark of every neurological dysfunction.**"

3. "The child may exhibit characteristics of a particular dysfunction yet not have that dysfunction. For example, the child who typically withdraws from being touched may seem to be hypersensitive to tactile stimulation but may, instead, have an emotional problem."

4. "The child may be both hypersensitive and hyposensitive. For instance, the child may be extremely sensitive to light touch, jerking away from a soft pat on the shoulder, while being rather indifferent to the deep pain of an inoculation."

5. "Everyone has some sensory integration problems now and then, because no one is well regulated all the time. All kinds of stimuli can temporarily disrupt normal functioning of the brain, either by overloading it with, or by depriving it of, sensory stimulation."
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
m ouths 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

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

__ 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

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
   __ fear of the sound of a flushing toilet (especially in public bathrooms), vacuum, hairdryer, squeaky shoes, or a dog barking
   __ started 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

Signs of Oral Input Dysfunction:

1. Hypersensitivity To Oral Input (Oral Defensiveness):
2. 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

**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

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
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)
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