

# Self-Assessment Airway Centric Checklist that may identify compromised growth, development, and function: 6 months – 2 years



## Key Signs and Symptoms that You can Assess

If you have answered **Yes to multiple items** below, we would encourage you to schedule a comprehensive airway centric, tongue, and lip assessment for your loved one at Little Bird Pediatric Dentistry by calling [905-876-2473 \(BIRD\)](tel:905-876-2473) or visiting [www.littlebirddental.ca](http://www.littlebirddental.ca) for further information

### While Child is Awake

- Mouth open at rest (when not babbling, talking, playing) most of the day or routinely throughout day
- Difficulty or avoidance of nasal breathing and/or tends to breathe through their mouth
- Frequent ear infections, strep throat, and/or tonsillitis (with/without ENT referral/consult)
- Regularly has bags (dark circles) under eyes
- Seems overtired or sleepy during the day and/or wakes up feeling unrefreshed/difficult to wake up in the morning
- Crowding of teeth (no spaces) and/or anterior open bite (space between front teeth when back teeth touching)
- Hyperactivity throughout the day and/or limited attention span (difficulty concentrating/focusing, etc.)
- Highly spirited (poor emotional regulation)

### While Child is Sleeping

- Mouth open/lips apart and/or drool on pillow (regularly)
- Snoring with mouth open for more than half the night's sleep duration and/or gasp/stop breathing
- Restless sleep (always moving around and/or restless legs/arms)
- Frequent awakenings, waking often after falling asleep, regular nightmares, and/or night terrors
- Sweating heavily (pajamas and/or sheets regularly damp)

### While Child is Feeding (Current\* or History of Challenges)

#### a) Breastfeeding & Bottle Feeding Signs/Symptoms

- Poor latch (e.g. difficulty achieving or maintaining a good latch) and/or shallow latch (limited wide mouth opening)
- Gumming or chewing of nipple
- Frequent clicking sounds, gulping, coughing, gagging, and/or choking
- Milk leaks or spills out the side of their mouth while actively feeding
- Upper lip folded down (curled inwards) and/or lower lip tucked in (curled inwards)
- Dried milk residue/coating on back of tongue
- Reflux symptoms (e.g. vomiting, regurgitation, frequent spit ups, crying after feeding, etc.)
- Swallowing air regularly (increased gassiness, belly discomfort)
- Insatiable baby (e.g. feeding every hour, falls asleep quickly when feeding and wakes shortly to feed again)
- Poor weight gain, failure to thrive, and/or slows down weight gain

#### b) Eating & Drinking Signs/Symptoms

- Picky eater (e.g. limited quantity and/or interest/enjoyment with eating, avoidance of crunchy/fibrous foods and/or specific food textures)
- Smacking sounds when chewing/swallowing (mouth open when chewing)
- Difficulty swallowing (e.g. tongue thrust, pushing food out of mouth, sensitive gag, choking and/or vomiting, etc.)
- Difficulty drinking from an open cup

#### c) Mom's Signs/Symptoms (if applicable)

- Creased, cracking, bruised, flattened, blanched, cut, and/or bleeding nipples after nursing
- Severe pain when attempting to latch and/or while nursing and/or using a nipple shield due to pain/latching
- Poor or incomplete breast drainage and/or drop in Mom's milk supply (taking herbals or domperidone to assist)
- Plugged ducts, infected nipples/breasts, and/or mastitis

For families with current feeding challenges (breast/bottle/solids), we would also encourage you to seek assistance from either your local lactation consultant or pediatric occupational therapist (OT)