HELPFUL HINTS!

Materials for Moms to Keep

☐ $20 Check
Thank you for considering participating in the Upstate KIDS Infant Development Screening Program! The enclosed $20 check is for you to spend at your convenience whether you decide to participate or not.

☐ Questions and Answers Flyer
This flyer reviews various questions that you may have about the Upstate KIDS Program. If there is a question you have that is not listed, please contact us at 1-888-870-0247 or e-mail us at UpstateKIDS@health.state.ny.us.

☐ Child Health Journal
We have enclosed this child health journal for you to keep - both for your own recordkeeping, and also to help you record the growth and developmental information we will be asking you to report to us.

Materials for Moms to Complete and Return to Upstate KIDS

Booklet of Mom’s Materials

☐ Parental Consent Form
If you would like to participate in this screening program, please read and complete this form. Detach and return the last page to us in the envelope provided.

☐ Mom’s Questionnaire
Congratulations on your recent delivery! After completing this Mom’s Questionnaire, please send it back to us in the postage-paid envelope provided for you. All of the information that you provide will be kept strictly confidential and your privacy will be protected.

Booklet of Baby’s Materials

☐ Authorization Form for Release of Survey Information
This form gives us permission to release your child’s screening results to his/her primary health care provider. We will not share your child’s results with his/her medical provider unless you authorize us to do so.

☐ Authorization Form for Physician Medical Release of Information
This form grants us permission to contact your child’s medical provider to obtain relevant medical information collected during routine visits and check-ups. We will not request any information from your child’s medical provider unless you authorize us to do so.

☐ Baby Questionnaire
This questionnaire asks about your baby’s growth and development since birth. After completing this Baby Questionnaire, please send it back to us in the postage paid envelope provided for you. All of the information that you provide will be kept strictly confidential and your privacy will be protected.

☐ 4 Month Ages & Stages Questionnaire
This standardized screening questionnaire asks about activities your child may or may not have begun doing. Please do not be alarmed if your child is not yet able to do all of the activities listed, since it is perfectly normal for different children to develop differently. After filling out the questionnaire please send it back to us in the postage paid envelope provided for you.