

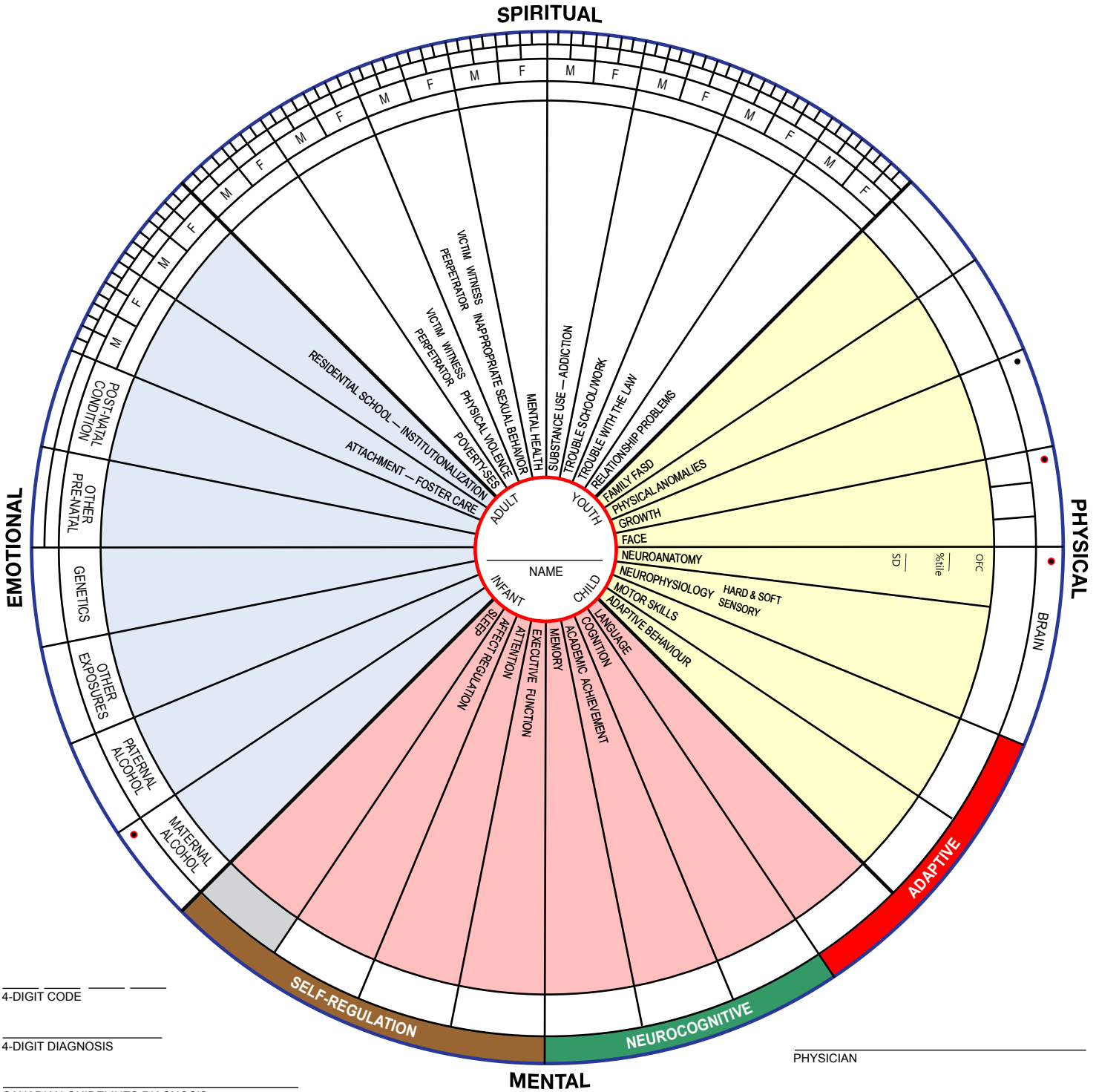
# TES NEURODEVELOPMENTAL DIAGNOSTIC WHEEL

DIAGNOSIS				Other Pre Natal Risks	Post Natal Risks	Generational Risk	Secondary Conditions
Severe 4							
Moderate 3							
Mild 2							
None 1							
	GROWTH	FACE	BRAIN	ALCOHOL			

NAME \_\_\_\_\_

D.O.B \_\_\_\_\_

AGE AT DIAGNOSIS \_\_\_\_\_



4-DIGIT CODE \_\_\_\_\_

4-DIGIT DIAGNOSIS \_\_\_\_\_

CANADIAN GUIDELINES DIAGNOSIS \_\_\_\_\_

DSM-5 DIAGNOSIS \_\_\_\_\_

OTHER DIAGNOSIS \_\_\_\_\_

PHYSICIAN \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

