

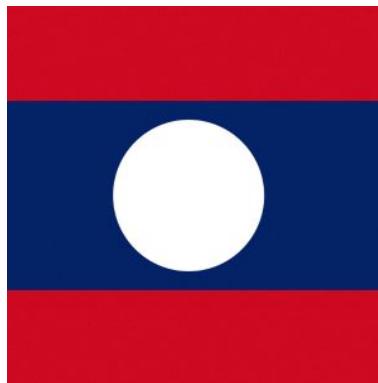
Niam Txiv Questionnaire rau Kev Ntsuas Kev Hais Lus

Parent Questionnaire for Speech-Language Evaluations (Hmong)

Ua tsaug rau koj siv koj lub sijhuawm los ua daim ntawv no. Daim ntawv no yuav siv sijhawm li 8 feem. (Thank you for taking the time to fill this out. On average this form takes 8 minutes to complete.)

Koj tus menuam lub npe:

(Student Name)



Daim ntawv ua tiav los ntawm:

(Form Completed by)

Hnub tim daim ntawv ua tiav:

(Date Form Completed)

Koj pom hais thiab koj tus menuam muaj txuj cim yog dabtsi?

(What do you see as your child's gifts or greatest strengths?)

Koj tus menuam nyiam ua dabtsi?

(What activities does your child enjoy?)

Koj tsev neeg nyiam ua dabtsi ua kev?

(What activities does your family like to do together?)

Koj tus menuam nyob nrog leejtwg?

(Who does your child live with?)

Lub npe (Name)	Kev sib raug zoo (Relation)	Hnub nyooog (Age)

Koj tus menuam puas nrog lwg tus cha nrog koj? (niam tais yawg txiv/pog yawg)
(Does your child spend a significant amount of time in a second household? (babysitter, grandparents)?)

Yog lawm (YES) _____ Tsis muaj (NO) _____
yog tias muaj, koj tus menuam nyob qhov twg? (If YES, where does the child spend this time?)

- Lwm tus niam txiv lub tsev (Other parent's house) pog yawg/niam tais yawg txiv lub tsev (Grandparents house)
- Tus neeg ua zov menuam lub tsev (Babysitter's house) Lwm lub tsev: (Other house) _____

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Leejtwg nyob hauv lub tsev? (Who lives there?)

Lub npe (Name)	Kev sib raug ZOO (Relation)

Koj tus menyuam puas hais lwg yam lus ua tsis yog lus askiv?

(Does your child speak a language other than English?)

Yog lawm (YES) _____ Tsis muaj (NO) _____

Yam lus ua siv hauv tsev ntau dua yog dabtsi? (kij tag nhro ua yog)

(What is the primary language spoken in the home?)

Lus Askiv (English) Lus Mev (Spanish) Lus suav (Mandarin) Lus Nyab laj (Vietnamese)

Lwm yam LUS (Other): _____

Hais lus: Koj tus menyuam hais lus mekas ntau npuam li cas, pes tsawg feem pua?

(Speaking: What percentage of the time does the child **speak English?**)*

Thaum lawb ntawv (After School)	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Hmo ntuj/Hmo ntuj (Evenings/Nights)	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Hnub rau/Hnub xya (Weekends)	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%

Mloog: Koj tus menyuam hnov lus mekas ntau npuam li cas, pes tsawg feem pua?

(Listening: What percentage of the time does the child **hear English?**)*

Thaum lawb ntawv (After School)	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Hmo ntuj/Hmo ntuj (Evenings/Nights)	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Hnub rau/Hnub xya (Weekends)	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%

*Lwm cov lus feem pua raug suav raws li Askiv tau tshaj lawm (70% Lus Askiv = 30% Lus Mev). (Lwm cov
(Other language percentages calculated based on English reported (e.g., 70% English = 30% Spanish))

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Koj tus menyuam yug qhov twg? (Where was your child born?) U.S. (U.S.)

Lwm yam (Other): _____

Koj tus menyuam muaj pes tsawg xyoo tuaj txoj teb chaws Mekas? _____

(How old was your child when they arrived?)

Lub xyoo dhua los, Puas muaj te Yam ua tshwm sim huav koj tus menyuam lub neej ? (e.g. kev plog kev tuag, kev sib nrauj, nws muag tshiab, tsiv)

(Have there been any significant changes in your child's life over the past three years?)

Yog lawm (YES) _____ Tsis muaj (NO) _____

Yog tias muaj, thov piav (If yes, please explain):

Kev Kho Mob Keeb Kwm (Medical History)

Puas muaj teem meem thaum tsheem cev xeeb tub? (Were there any complications during pregnancy?)

Yog lawm (YES) _____ Tsis muaj (NO) _____

Yog tias muaj, thov piav (If yes, please explain):

Koj tus menyuam puas tau muaj kev mob, pws huav tsev kho mob? (i.e. kub tom hau, phias, ntaus taub hau) (Has your child had any serious illnesses, accidents, or hospitalizations?)

Yog lawm (YES) _____ Tsis muaj (NO) _____

Yog tias muaj, thov piav (If yes, please explain):

Koj tus menyuam puas tau muaj kev pab ntawm kev pabcuam thaum nxtov lossis therapy? (Has your child ever had therapy or early childhood intervention?)

Kev pab siv lus/hais lus (Speech therapy)

Tsis muaj (None)

Kev pab ntawm lub cev, lub hlwb thiab xyua ya ua txhua hnub (Occupational therapy)

Kev kho lub cev muaj zog (Physical therapy)

Kev pabcuam thaum nxtov (Early Childhood Intervention)

Lwm yam (Other): _____

Kev pab noj mob (Feeding Therapy)

Yog lawm tau kev pab, thov qhia ntxiv (If they received services, tell us more):

Koj tus menyuam puas muaj kev mob dabtsis? Yog tias muaj, thov qhia (Does your child have any medical diagnoses?)

Yog lawm (YES) _____ Tsis muaj (NO) _____

Yog tias muaj, thov piav (If yes, please explain):

Koj tus menyuam puas tau mob pob ntseg? (Has your child had ear infections?)

Yog lawm (YES) _____ Tsis muaj (NO) _____ Yog tias muaj, pes tsawg xyoo ua koj tus menyuam mob pob ntseg? (If yes, approximately how many ear infections?) _____ Thiab thaum twg lawv mob pob ntseg? (and at what age(s)?) _____

Puas yog Pressure Equalization tubes ('PE tubes') muab tso rau hauv pob ntseg? (Were Pressure Equalization tubes ('PE tubes') placed in the ears?)

Yog lawm (YES) _____ Tsis muaj (NO) _____

Yog tias muaj, hnub tim PE Tubes: (If yes, date of PE tubes): _____

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Tam sim no koj tus menyuam puas noj tshuaj? (Is your child currently taking any medications?)

Yog lawm (YES) _____ Tsis muaj (NO) _____

Yog tias muaj, sau npe thiab sau vim li cas koj tus menyuam noj (If YES, list the name and reason for each medication):

Koj puas muaj kev txhawj txog koj tus menyuam lub cev xws li, tuag kev, khiav, kos duab lossis siv txiab? (Do you have any concerns about your child's physical abilities, such as running, walking, drawing, or using scissors)

Yog lawm (YES) _____ Tsis muaj (NO) _____

Yog tias muaj, thov piav (If yes, please explain):

TEJ YAM UA KOJ TXHAWJ NTAWM KOJ TUS MENYUAM KEV KAWM (ACADEMIC CONCERNS)

Koj puas muaj kev txhawj xeeb txog koj tus menyuam tkoj kev kawm?

(Do you have any concerns about your child's academic performance?)

Yog lawm (YES) _____ Tsis muaj (NO) _____

Yog tias muaj, thov piav (If yes, please explain):

KEV TXAWJ NTSE THIAB KEV COJ TUS CWJ PWM ZOO (kev saib xyuas yus tus nkeeg)

(INTELLIGENCE AND ADAPTIVE BEHAVIOR (SELF-CARE))

Koj ntsuas koj tus menyuam lis cas rau hauv qab no? (How would you rate your child in the following areas?)

	Poob qab lwm tus menyuam hnub nyooq (Below other children the same age)	Zoo ib yam li Lwm Tus Me Nyuam Hnub Nyooq (Similar to other children the same age)	N/A
Nco ntsoov tej yam uas koj thov kom lawv ua (Remembering things you ask them to do)			
ua tau thiab npaj tau koom ua kom tiav (Exhibiting organization in accomplishing tasks)			
ua tiv zoo mloog thaum muaj lwg tus kia ua khoom (Focusing during activities)			
Hnav khaub ncaws nws tus kheej (Getting dressed independently)			
Kev saib xyuas cov khoom ntiag tug (Taking care of personal items).			

Puas muaj lwm yam uas koj xav ntxiv? (Is there anything else you want to add?) Yog lawm (YES) _____ Tsis muaj (NO) _____

Yog tias muaj, thov piav (If yes, please explain):

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KEV SIV LUS/TXUAS LUS (COMMUNICATION)

Koj puas muaj kev txhawj xeeb txog kev sib txuas lus ntawm koj tus menuam? (Do you have concerns about the way your child communicates?)

Yog lawm (YES) _____ Tsis muaj (NO) _____

Yog tias muaj, xaiv cov kev txhawj xeeb uas tsim nyog. Kuv tus menuam (If yes, select appropriate concerns. My child):

- nyuaj to taub thaum hais lus (Is difficult to understand when he speaks)
- tsis muab lo lus ua ke tsim nyog zoo li lwm tus tib lub hnub nyooq (Does not put words together appropriately like others the same age)
- nyuaj to taub lwm tus (Has difficulty understanding others)
- hais cov suab thiab lus ntau lws lossis kab lus (Repeats sounds, words, or phrases (stutters))
- Lwm yam: Thov piav lawm yam kev txhawj xeeb txog koj tus menuam txog kev hais lus huav tsev (Other: Please explain any other concerns about how your child communicates at home):

Feem ntau, koj tus menuam puas totaub thaum lwg tus hais lus? (Does your child understand what other people say most of the time?)

Yog lawm (YES) _____ Tsis muaj (NO) _____

Koj tsev neeg nkag siab koj tus menuam npuam li cas thuam nws hais lus? (How much of the child's speech is understood by **family members**?)

- 100% - Txhua yam (Everything)
- 75% - Feem ntau (Most)
- 50% - Qee qhov (Some)
- 25% - Tsawg heev (Very Little)
- 0% - Tsis muaj (None)

Lwm tus ua tsis paub koj tus menuam nkag siab koj tus menuam npaum li cas thaum nws hais lus? (How much of your child's speech is understood by **strangers or unfamiliar people**?)

- 100% - Txhua yam (Everything)
- 75% - Feem ntau (Most)
- 50% - Qee qhov (Some)
- 25% - Tsawg heev (Very Little)
- 0% - Tsis muaj (None)

Koj tus menuam puas xaiv lus, siv lus ntua lws lossis pib kab lus dua?

(Does your child stutter, get stuck on words, repeat words, or restart sentences?)

Yog lawm (YES) _____ Tsis muaj (NO) _____ Yog tias muaj, qhov no tshwm sim ntau npaum li cas? (If yes, how often does this occur?)

Puas muaj leejtwg nyob rau koj tsev neeg uas hais lus/txuas lus nyuaj thaum lawm tseem hluas? (Did anyone in your family have difficulty communicating when they were young?)

Yog lawm (Yes) ____ Tsis muaj (No) ____ Yog tias muaj, leej twg? (If yes, who?)

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Qhia txog koj tus menyuam tus cwj pwm hauv tsev: (kij tag nhro ua yog) (Describe your child's behavior at home: check all that apply):

- Yooj yim mus (Easy going)
- ua zog (Active)
- coj zoo (Well Behaved)
- Chim yooj yim (Easily Upset)
- Lwm yam (Other): _____

Koj tus menyuam ua si nrog lws tus menyuam lis cas? (kij tag nhro ua yog) (How does your child interact with other children? check all that apply)

- Ua si nrog lwm tus menyuam yaus (Plays together with other children)
- Saib lwm tus menyuam yaus ua si (Watches other children play)
- Tsis txhob ua si nrog lwm tus menyuam (Avoids playing with other children)
- Coj lwm tus menyuam hauv kev ua si (Leads other children in play)
- Lwm yam (Other): _____

Koj puas muaj kev txhawj xeeb lossis lwm yam ntxiv uas koj xav qhia? Ua tsaug!

Do you have any other concerns or any additional information you would like to share? Thank you!

