



A Checklist for a Sound Start Before 6 months of age...







- | | | |
|--|-----|----|
|  My child smiles when he/she sees me | YES | NO |
|  My child has different cries for different needs | YES | NO |

Number of times you checked 'NO'

If you answered 'NO' to one or both questions,
please consider a referral to the Nova Scotia Hearing and Speech Centre nearest you.

(Scroll for the next page)

(Scroll to page 3)

 My child stirs or awakens when sleeping quietly and someone talks	YES	NO
 My child recognizes my voice and settles when I talk to him/her	YES	NO
 My child babbles for attention, uses speech-like sounds including "p", "b", and "m"	YES	NO
 My child makes gurgling sounds when left alone	YES	NO
 My child makes pleasure sounds	YES	NO
 My child turns his/her head toward voices and interesting sounds	YES	NO

Number of times you checked 'NO'

If you answered 'NO' to 3 or more questions,
please consider a referral to the Nova Scotia Hearing and Speech Centre nearest you.

How to Make a Referral

A parent/guardian may make a referral to the Nova Scotia Hearing and Speech Centre nearest your community by filling out a referral form or by contacting the nearest centre directly. NSHSC has an open referral policy meaning a doctor's referral is not necessary.

~ These services are available at no cost to Nova Scotia preschool children who have a valid NS Health Card. ~

[Click here](#) to find a centre near you

Toll Free: 1-888-780-3330

 *Pour communiquer avec quelqu'un en français, s.v.p. appelez le (902) 464-5001.*