

(27~29months)

# K-DST

## Korean Developmental Screening Test for Infants & Children

This screening Test is part of the medical research of infants and children of the ministry of health and welfare and Korea Centers for Disease and Control and Prevention and was developed by experts under the auspices of Korean National Institute for Pediatrics and Korean Society of Pediatric Rehabilitation and Developmental Medicine, Psychologists etc.

**Revised Version**



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## Korean Developmental Screening Test for Infants and Children (27~29months)

✦ Enter the respective situation. Mark the empty fields .

Name of child		(m, f)	Interviewee	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Grandmother <input type="checkbox"/> Grandfather <input type="checkbox"/> Others( )		
Date of birth	year	month	day (prebirth, date of birth:	year	month	day)
Parent's information (optional)	Mother	age: ( years)	Degree: <input type="checkbox"/> Postgraduate <input type="checkbox"/> Graduate <input type="checkbox"/> Drop out <input type="checkbox"/> High school graduate <input type="checkbox"/> Junior high graduate			
	Father	age: ( years)	Degree: <input type="checkbox"/> Postgraduate <input type="checkbox"/> Graduate <input type="checkbox"/> Drop out <input type="checkbox"/> High school graduate <input type="checkbox"/> Junior high graduate			
Is the child is physically or developmentally challenged?			<input type="checkbox"/> No <input type="checkbox"/> Yes (what sort of developmentally challenge? )			

**\*\* This questionnaire is related to 27-29 month old infants. If the age of the child does not coincide, you have to replace the questionnaire.**

✦ Choose one of the four answers below.

If you don't know the answer, you can check at the infant and then answer the question.

Can do well ③	Can do ②	Can do not well ①	Absolutely can't do ④
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The following questions are about “what the infant can do”.

If the infant is able to do a certain act but has not done it well due to other reasons, check “Can do”.

e.g., The infant seems to have an ability to use scissors, but you have never let him/her use them before. The infant seems to be able to build with blocks, but you don't have such toys (blocks) in your house or he/she doesn't like playing with them.

### GROSS MOTOR SKILLS

1	Jumps up and down in place with both feet		③ ② ① ④
2	Jumps from bottom step		③ ② ① ④
3	Throws tennis ball overhead while standing		③ ② ① ④
4	Walks up the stairs with 1 hand on rail placing 1 foot on each step		③ ② ① ④
5	Lifts his/her heels and walks more than four steps on his/her tiptoes		③ ② ① ④
6	The infant climbs stairs one step at a time by putting both feet on the same stair without holding onto the railing. (Check “Can do well” or “Can do” if the infant climbs stairs step by step alternately (one foot at a time).)		③ ② ① ④
7	Imitates one foot standing 1 second		③ ② ① ④
8	The infant goes down stairs one step at a time by putting both feet on the same stair without holding anything. (Check “Can do well” or “Can do” if the infant goes down stairs step by step alternately (one foot at a time).)		③ ② ① ④

Can do well ③


Can do ②


Can do not well ①

Absolutely can't do ④



## FINE MOTOR SKILLS

1	Sets more than two blocks side by side 	③ ② ① ④
2	Opens door by turning knob	③ ② ① ④
3	Holds the lower part of a (colored) pencil	③ ② ① ④
4	Cuts across a piece of paper, grasps scissor and paper in each hand.	③ ② ① ④

5	Strings lace in shoelace hole or pearls on a cord, puts it off. 	③ ② ① ④
6	Imitates vertical strokes. (except in cases where the infant draws by tracing over lines already drawn)	③ ② ① ④
7	Holds a (colored) pencil, crayon, or pen using his/her thumb and another finger	③ ② ① ④
8	Undresses itself and a doll upon request	③ ② ① ④



## COGNITION

1	Shows at least five parts of the body (e.g.: eye, nose, lips, ears, arm etc.).	③ ② ① ④
2	Differentiates two small/big objects.	③ ② ① ④
3	Matches the correct color of coloured blocks (red, yellow, blue)	③ ② ① ④
4	Among circle, triangle and rectangle differentiates at least more than three geometric form.	③ ② ① ④

5	Knows the measurement "much-less" (e.g.: knows 6 candies are more than 2.)	③ ② ① ④
6	Understands "1" (e.g. gets 1 of 3 candies on the table).	③ ② ① ④
7	Matches a 6-piece puzzle.	③ ② ① ④
8	Differentiates the long stroke from the short stroke.	③ ② ① ④



## LANGUAGE

1	Produces three word sentences (e.g.: "Baby sleeps, come home, want some milk".)	③ ② ① ④
2	Lifts voice at the end of the sentence for questioning.	③ ② ① ④
3	Says to its toys "mine".	③ ② ① ④
4	Follows request "put it on the table" without showing.	③ ② ① ④

5	Among 'inside', 'above', 'below', 'backwards' understands two	③ ② ① ④
6	Reading a book it can express what is happening. (e.g.: Mother: "What is the dog doing?" Child: "Sleeping", "Eating", "Crying" etc. retells the situation.	③ ② ① ④
7	If it is being asked "What 's your name?" say its full name (forename/surname).	③ ② ① ④
8	Can have a mini conversation.	③ ② ① ④

✦ Choose one of the four answers below.

If you don't know the answer, you can check at the infant and then answer the question.

Can do well ③	Can do ②	Can do not well ①	Absolutely can't do ④
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## SOCIABILITY

1	Tries to draw the mother's(guardian's) attention, points at different objects in the room.	③ ② ① ④
2	If you stop the infant from doing something he/she is enjoying, he/she says "no" or expresses his/her feeling with gestures.	③ ② ① ④
3	Tries to draw the mother's(guardian's) attention by showing something interesting or what it has crafted, drawn.	③ ② ① ④
4	Says "sorry" and "thank you" upon request	③ ② ① ④

5	Imitates other children's play	③ ② ① ④
6	Says "I am happy" or "I feel bad" when he/she feels so	③ ② ① ④
7	Requests help if the object is out of reach (e.g.: "Give me some water please.")	③ ② ① ④
8	Can imitate adults group behaviour. (e.g. Play the train game, catch-the-tail game, ladder and tunnel game, etc.)	③ ② ① ④



## RESPONSIBILITY

1	Wipes nose upon request	③ ② ① ④
2	Pulls pants down with assistance	③ ② ① ④
3	Avoids danger as pointy objects or stairs with no railing.	③ ② ① ④
4	Uses napkin after eating and doesn't use its sleeves.	③ ② ① ④

5	If you put the feet of the infant into their pants a little bit, he/she pulls them up to the waist.	③ ② ① ④
6	Remains dry during the day.	③ ② ① ④
7	Holds back stool during the day	③ ② ① ④
8	Soaps/washes hands alone when water is turned on	③ ② ① ④



## FURTHER QUESTION

1	Can't walk.	① ④
2	Words make no sense. (e.g. "Bow-wow", "momma", "water", etc.)	① ④
3	The infant does not make eye contact well with his/her guardians. (except in cases where the infant does not make eye contact because he/she is focusing on something else)	① ④

Yes ①	No ④
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4	The infant does not look at you even though you call his/her name. (except in cases where the infant has hearing impairments or does not look at you because he/she is focusing on something else)	① ④
5	The infant does not do any behaviors to attract adults' attention (e.g., Pointing his/her finger at an item and seeing his/her guardian's reactions, bringing and showing an item, pestering someone to play with him/her, calling someone by making sounds, etc.)	① ④

## Evaluation Chart (27~29 months)

Name of child		(m, f)	Date of preparation	year	month	day
Date of birth	year	month	day (prebirth, date of birth:	year	month	day)
Interviewee	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Grandmother <input type="checkbox"/> Grandfather <input type="checkbox"/> Others( )					

### Summary report

Category Domain	1	2	3	4	5	6	7	8	Total score	Transfer points		
										A	B	C
Gross motor skills										10	17	24
Fine motor skills										10	13	20
Cognition										8	14	21
Language										8	15	24
Sociability										6	15	24
Responsibility										8	12	23

### Further question

= Yes =No

Question	1 (M)		2 (M)		3 (S)		4 (S)		5 (S)		6 (S)	
Result	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Evaluation result

### Scoring

- The Scoring is based on four steps.  
(can do well = 3points can do = 2points, can't do well = 1point absolutely can't do = 0 points)
- Each domain is united with the points of difficulty of the question and recorded.
- The evaluation of the total score is based on the transfer points of each domain is scored on four steps.  
① advanced evaluation recommended ② monitoring is required ③ peer level ④ fast level

Date of preparation: \_\_\_\_\_

Preparing person: \_\_\_\_\_signature