

Interactive Metronome Checklist – Complete Pre, Mid and Post IM Training.

Name:
Sessions:

Therapist:

Date:

Frequency:

#IM

Area of Interest	No Concern	Mild Concern	Moderate Concern	Maximal Concern
Attention/Focus/Concentration during preferred tasks (i.e. playing games/activities of own choosing)				
Attention/Focus/Concentration during non-preferred tasks (i.e. playing games/activities of not of own choosing)				
Avoidance of activities				
Body coordination				
Balance				
Endurance				
Timing of body movements (fluidity of movement)				
Sequencing				
Frustration tolerance				
Impulsivity				
Emotional outbursts				
Ability to express emotions				
Observable mouth or tongue movements during activity				
Loss of saliva or drooling during activity				
Chewing of non-food items i.e. shirt collar, fingers				
Excessive 'fidgety' behaviors				
Slurs speech or talks with a 'baby voice' when excited				
Is a loner, prefers solitary play.				
Response speed of interactions : too quicker than peer group				
Response speed of interactions : too slower than peer group				
Eye contact				
Transitions : during situations i.e. from one place to another)				
Transitions : response to changes in routine				
Writing speed				
Writing legibility				
Writing with mixed upper case/lower case				
Writing grasp on pencil				
Pressure applied to pencil during written tasks				
Breathing rate i.e. increased or holding during activity				

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