

# Overview of Developmental Surveillance and Screening How to Identify a Developmental Concern

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Developmental *surveillance* is a continuous process that is recommended at least at every well-child/health supervision visit through early childhood. Developmental *screening*, on the other hand, is done with validated screening tools with appropriate sensitivity and specificity at strategic time points in early childhood.

Developmental surveillance and screening are different but complementary, working well *together* to identify developmental concerns so children get the appropriate interventions they need. In developmental surveillance the ongoing, longitudinal conversations help build relationships that can support developmental discussions including sharing of concerns.

## Specific components to include in the developmental surveillance process:

1. Eliciting and attending to the parent concerns about development
2. Documenting and maintaining a developmental history
3. Making accurate developmental observations
4. Identifying factors that may relate to risk and/or protection
5. Maintaining/documenting the process and findings
6. Sharing and obtaining opinions and findings with other professionals

Surveillance is not screening, but concerns identified during surveillance should trigger additional developmental screening. Surveillance may also occur at acute care visits if a child has missed a routine health supervision visit or if concerns arise between health supervision visits. The [Milestone Checklists](#) from the CDC's "Learn the Signs. Act Early." program can help support these discussions as they include family-friendly tips and activities to promote healthy development and are useful for the ongoing surveillance process.

Screening is intended to identify risk but is not in itself diagnostic. At minimum, formal screening is recommended at health supervision visits at 9-, 18-, and 30-months for general



developmental screening, and 18- and 24-months for autism screening. Screening should also be done at other visits if a child has missed a routine health supervision visit when screening would have typically occurred, or if concerns arise between health supervision visits. An example of a commonly used validated general developmental screening test is the *Ages and Stages Questionnaire, Third Edition (ASQ-3)*,\* and for autism screening the *Modified Checklist for Autism in Toddlers, Revised, with Follow-up (M-CHAT-R/F)*\*. Other validated screening tools exist, and choice of appropriate screening tools is left to the clinician. For a list of many available tools, please visit <https://www.aap.org/en/patient-care/screening-technical-assistance-and-resource-center/screening-tool-finder>.

[Please see guidance in the 2020 AAP Clinical Report for more details:](#)

Lipkin PH, Macias MM. Promoting Optimal Development: Identifying Infants and Young Children With Developmental Disorders Through Developmental Surveillance and Screening. *Pediatrics*. 2020;145(1).

\*The AAP does not approve nor endorse any specific tool for screening purposes. Other screening tools may be available.

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