Sensory Processing Disorder Checklist: Signs And Symptoms Of Dysfunction

The purpose of this sensory processing disorder checklist is to help parents and professionals who interact with children become educated about particular signs of sensory processing dysfunction.

It is not to be used as the absolute diagnostic criteria for labeling children with sensory processing disorder. But rather, as an educational tool and checklist for your own knowledge. Professionals who can diagnose this disorder have their own tools in addition to checklists to observe and test for sensory integration dysfunction.

As you go through this list, you may say, "Wow, my child has so many of these characteristics/behaviors, he must have a sensory processing disorder!!"

That MAY be true, and I want you to take it very seriously if you find a host of these to be characteristic of your child. But, then use this as a guide to speak with your doctor and an Occupational Therapist so you can clearly explain why you think your child may need help.

Or, you may go through the list and say,

"No big deal, so my child has some of these behaviors/characteristics, doesn't every child?"

Well, this may be true too and your child's behavior may fluctuate from day to day.

What we need to be concerned with is which symptoms your child shows, which category they are having difficulty with, how much it interferes with their or other's lives and what kind of impact it is having on their level of functioning. They may have a lot in one category and none in another or some in all categories. This will help target diagnosis and treatment.

Lastly, you may go through the list and say,

"Oh my gosh, that is what I have been dealing with my whole life".

Then I say, I'm so sorry you never got the help you needed! Perhaps we can start to work on it now.

Identifying and understanding this disorder is HUGE!
Please understand the "Five Caveats" that Carol Stock Kranowitz points out in her book, "The Out-of-Sync Child" (1995), about using a checklist such as this. She writes:

1. "The child with sensory dysfunction does not necessarily exhibit every characteristic. Thus, the child with vestibular dysfunction may have poor balance but good muscle tone."

2. "Sometimes the child will show characteristics of a dysfunction one day but not the next. For instance, the child with proprioceptive problems may trip over every bump in the pavement on Friday yet score every soccer goal on Saturday. Inconsistency is a hallmark of every neurological dysfunction."

3. "The child may exhibit characteristics of a particular dysfunction yet not have that dysfunction. For example, the child who typically withdraws from being touched may seem to be hypersensitive to tactile stimulation but may, instead, have an emotional problem."

4. "The child may be both hypersensitive and hyposensitive. For instance, the child may be extremely sensitive to light touch, jerking away from a soft pat on the shoulder, while being rather indifferent to the deep pain of an inoculation."

5. "Everyone has some sensory integration problems now and then, because no one is well regulated all the time. All kinds of stimuli can temporarily disrupt normal functioning of the brain, either by overloading it with, or by depriving it of, sensory stimulation."

**Tactile Sense**: input from the skin receptors about touch, pressure, temperature, pain, and movement of the hairs on the skin.

**Signs Of Tactile Dysfunction:**

1. **Hypersensitivity To Touch (Tactile Defensiveness)**

   _ becomes fearful, anxious or aggressive with light or unexpected touch
   
   _ as an infant, did/does not like to be held or cuddled; may arch back, cry, and pull away
   
   _ distressed when diaper is being, or needs to be, changed
__ appears fearful of, or avoids standing in close proximity to other people or peers (especially in lines)

__ becomes frightened when touched from behind or by someone/something they can not see (such as under a blanket)

__ complains about having hair brushed; may be very picky about using a particular brush

__ bothered by rough bed sheets (i.e., if old and "bumpy")

__ avoids group situations for fear of the unexpected touch

__ resists friendly or affectionate touch from anyone besides parents or siblings (and sometimes them too!)

__ dislikes kisses, will "wipe off" place where kissed

__ prefers hugs

__ a raindrop, water from the shower, or wind blowing on the skin may feel like torture and produce adverse and avoidance reactions

__ may overreact to minor cuts, scrapes, and or bug bites

__ avoids touching certain textures of material (blankets, rugs, stuffed animals)

__ refuses to wear new or stiff clothes, clothes with rough textures, turtlenecks, jeans, hats, or belts, etc.

__ avoids using hands for play

__ avoids/dislikes/aversive to "messy play", i.e., sand, mud, water, glue, glitter, playdoh, slime, shaving cream/funny foam etc.

__ will be distressed by dirty hands and want to wipe or wash them frequently

__ excessively ticklish

__ distressed by seams in socks and may refuse to wear them

__ distressed by clothes rubbing on skin; may want to wear shorts and short sleeves year round, toddlers may prefer to be naked and pull diapers and clothes off constantly

__ or, may want to wear long sleeve shirts and long pants year round to avoid having skin exposed

__ distressed about having face washed
distressed about having hair, toenails, or fingernails cut
resists brushing teeth and is extremely fearful of the dentist
is a picky eater, only eating certain tastes and textures; mixed textures tend to be avoided as well as hot or cold foods; resists trying new foods
may refuse to walk barefoot on grass or sand
may walk on toes only

2. Hyposensitivity To Touch (Under-Responsive):

may crave touch, needs to touch everything and everyone
is not aware of being touched/bumped unless done with extreme force or intensity
is not bothered by injuries, like cuts and bruises, and shows no distress with shots (may even say they love getting shots!)
may not be aware that hands or face are dirty or feel his/her nose running
may be self-abusive; pinching, biting, or banging his own head
mouths objects excessively
frequently hurts other children or pets while playing
repeatedly touches surfaces or objects that are soothing (i.e., blanket)
seeks out surfaces and textures that provide strong tactile feedback
thoroughly enjoys and seeks out messy play
craves vibrating or strong sensory input
has a preference and craving for excessively spicy, sweet, sour, or salty foods
3. Poor Tactile Perception And Discrimination:

__ has difficulty with fine motor tasks such as buttoning, zipping, and fastening clothes

__ may not be able to identify which part of their body was touched if they were not looking

__ may be afraid of the dark

__ may be a messy dresser; looks disheveled, does not notice pants are twisted, shirt is half un tucked, shoes are untied, one pant leg is up and one is down, etc.

__ has difficulty using scissors, crayons, or silverware

__ continues to mouth objects to explore them even after age two

__ has difficulty figuring out physical characteristics of objects; shape, size, texture, temperature, weight, etc.

__ may not be able to identify objects by feel, uses vision to help; such as, reaching into backpack or desk to retrieve an item

Vestibular Sense: input from the inner ear about equilibrium, gravitational changes, movement experiences, and position in space.

Signs Of Vestibular Dysfunction:

1. Hypersensitivity To Movement (Over-Responsive):

__ avoids/dislikes playground equipment; i.e., swings, ladders, slides, or merry-go-rounds

__ prefers sedentary tasks, moves slowly and cautiously, avoids taking risks, and may appear "wimpy"

__ avoids/dislikes elevators and escalators; may prefer sitting while they are on them
or, actually get motion sickness from them

__ may physically cling to an adult they trust

__ may appear terrified of falling even when there is no real risk of it

__ afraid of heights, even the height of a curb or step

__ fearful of feet leaving the ground

__ fearful of going up or down stairs or walking on uneven surfaces

__ afraid of being tipped upside down, sideways or backwards; will strongly resist getting hair washed over the sink

__ startles if someone else moves them; i.e., pushing his/her chair closer to the table

__ as an infant, may never have liked baby swings or jumpers

__ may be fearful of, and have difficulty riding a bike, jumping, hopping, or balancing on one foot (especially if eyes are closed)

__ may have disliked being placed on stomach as an infant

__ loses balance easily and may appear clumsy

__ fearful of activities which require good balance

__ avoids rapid or rotating movements

2. Hyposensitivity To Movement (Under-Responsive):

__ in constant motion, can't seem to sit still

__ craves fast, spinning, and/or intense movement experiences

__ loves being tossed in the air

__ could spin for hours and never appear to be dizzy

__ loves the fast, intense, and/or scary rides at amusement parks

__ always jumping on furniture, trampolines, spinning in a swivel chair, or getting into upside down positions
loves to swing as high as possible and for long periods of time

is a "thrill-seeker"; dangerous at times

always running, jumping, hopping etc. instead of walking

rocks body, shakes leg, or head while sitting

likes sudden or quick movements, such as, going over a big bump in the car or on a bike

3. Poor Muscle Tone And/Or Coordination:

has a limp, "floppy" body

frequently slumps, lies down, and/or leans head on hand or arm while working at his/her desk

difficulty simultaneously lifting head, arms, and legs off the floor while lying on stomach ("superman" position)

often sits in a "W sit" position on the floor to stabilize body

fatigues easily!

compensates for "looseness" by grasping objects tightly

difficulty turning doorknobs, handles, opening and closing items

difficulty catching him/her self if falling

difficulty getting dressed and doing fasteners, zippers, and buttons

may have never crawled as an baby

has poor body awareness; bumps into things, knocks things over, trips, and/or appears clumsy

poor gross motor skills; jumping, catching a ball, jumping jacks, climbing a ladder etc.

poor fine motor skills; difficulty using "tools", such as pencils, silverware, combs, scissors etc.
may appear ambidextrous, frequently switching hands for coloring, cutting, writing etc.; does not have an established hand preference/dominance by 4 or 5 years old

has difficulty licking an ice cream cone

seems to be unsure about how to move body during movement, for example, stepping over something

difficulty learning exercise or dance steps

**Proprioceptive Sense:** input from the muscles and joints about body position, weight, pressure, stretch, movement, and changes in position in space.

**Signs Of Proprioceptive Dysfunction:**

1. **Sensory Seeking Behaviors:**

   seeks out jumping, bumping, and crashing activities

   stomps feet when walking

   kicks his/her feet on floor or chair while sitting at desk/table

   bites or sucks on fingers and/or frequently cracks his/her knuckles

   loves to be tightly wrapped in many or weighted blankets, especially at bedtime

   prefers clothes (and belts, hoods, shoelaces) to be as tight as possible

   loves/seeks out "squishing" activities

   enjoys bear hugs

   excessive banging on/with toys and objects

   loves "roughhousing" and tackling/wrestling games

   frequently falls on floor intentionally
__ would jump on a trampoline for hours on end
__ grinds his/her teeth throughout the day
__ loves pushing/pulling/dragging objects
__ loves jumping off furniture or from high places
__ frequently hits, bumps or pushes other children
__ chews on pens, straws, shirt sleeves etc.

2. Difficulty With "Grading Of Movement":

__ misjudges how much to flex and extend muscles during tasks/activities (i.e., putting arms into sleeves or climbing)
__ difficulty regulating pressure when writing/drawing; may be too light to see or so hard the tip of writing utensil breaks
__ written work is messy and he/she often rips the paper when erasing
__ always seems to be breaking objects and toys
__ misjudges the weight of an object, such as a glass of juice, picking it up with too much force sending it flying or spilling, or with too little force and complaining about objects being too heavy
__ may not understand the idea of "heavy" or "light"; would not be able to hold two objects and tell you which weighs more
__ seems to do everything with too much force; i.e., walking, slamming doors, pressing things too hard, slamming objects down
__ plays with animals with too much force, often hurting them

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**Signs Of Auditory Dysfunction: (no diagnosed hearing problem)**

1. **Hypersensitivity To Sounds (Auditory Defensiveness):**
__ distracted by sounds not normally noticed by others; i.e., humming of lights or refrigerators, fans, heaters, or clocks ticking

__ fearful of the sound of a flushing toilet (especially in public bathrooms), vacuum, hairdryer, squeaky shoes, or a dog barking

__ started with or distracted by loud or unexpected sounds

__ bothered/distracted by background environmental sounds; i.e., lawn mowing or outside construction

__ frequently asks people to be quiet; i.e., stop making noise, talking, or singing

__ runs away, cries, and/or covers ears with loud or unexpected sounds

__ may refuse to go to movie theaters, parades, skating rinks, musical concerts etc.

__ may decide whether they like certain people by the sound of their voice


2. Hyposensitivity To Sounds (Under-Registers):

__ often does not respond to verbal cues or to name being called

__ appears to "make noise for noise's sake"

__ loves excessively loud music or TV

__ seems to have difficulty understanding or remembering what was said

__ appears oblivious to certain sounds

__ appears confused about where a sound is coming from

__ talks self through a task, often out loud

__ had little or no vocalizing or babbling as an infant

__ needs directions repeated often, or will say, "What?" frequently
Signs Of Oral Input Dysfunction:

1. Hypersensitivity To Oral Input (Oral Defensiveness):

__ picky eater, often with extreme food preferences; i.e., limited repertoire of foods, picky about brands, resistive to trying new foods or restaurants, and may not eat at other people's houses)

__ may only eat "soft" or pureed foods past 24 months of age

__ may gag with textured foods

__ has difficulty with sucking, chewing, and swallowing; may choke or have a fear of choking

__ resists/refuses/extremely fearful of going to the dentist or having dental work done

__ may only eat hot or cold foods

__ refuses to lick envelopes, stamps, or stickers because of their taste

__ dislikes or complains about toothpaste and mouthwash

__ avoids seasoned, spicy, sweet, sour or salty foods; prefers bland foods

2. Hyposensitivity To Oral Input (Under-Registers)

__ may lick, taste, or chew on inedible objects

__ prefers foods with intense flavor; i.e., excessively spicy, sweet, sour, or salty

__ excessive drooling past the teething stage

__ frequently chews on hair, shirt, or fingers

__ constantly putting objects in mouth past the toddler years

__ acts as if all foods taste the same

__ can never get enough condiments or seasonings on his/her food
__ loves vibrating toothbrushes and even trips to the dentist

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**Signs Of Olfactory Dysfunction (Smells):**

1. **Hypersensitivity To Smells (Over-Responsive):**

   __ reacts negatively to, or dislikes smells which do not usually bother, or get noticed, by other people
   
   __ tells other people (or talks about) how bad or funny they smell
   
   __ refuses to eat certain foods because of their smell
   
   __ offended and/or nauseated by bathroom odors or personal hygiene smells
   
   __ bothered/irritated by smell of perfume or cologne
   
   __ bothered by household or cooking smells
   
   __ may refuse to play at someone's house because of the way it smells
   
   __ decides whether he/she likes someone or some place by the way it smells

2. **Hyposensitivity To Smells (Under-Responsive):**

   __ has difficulty discriminating unpleasant odors
   
   __ may drink or eat things that are poisonous because they do not notice the noxious smell
   
   __ unable to identify smells from scratch 'n sniff stickers
   
   __ does not notice odors that others usually complain about
   
   __ fails to notice or ignores unpleasant odors
   
   __ makes excessive use of smelling when introduced to objects, people, or places
Signs Of Visual Input Dysfunction (No Diagnosed Visual Deficit):

1. Hypersensitivity To Visual Input (Over-Responsiveness)

__ uses smell to interact with objects

__ sensitive to bright lights; will squint, cover eyes, cry and/or get headaches from the light

__ has difficulty keeping eyes focused on task/activity he/she is working on for an appropriate amount of time

__ easily distracted by other visual stimuli in the room; i.e., movement, decorations, toys, windows, doorways etc.

__ has difficulty in bright colorful rooms or a dimly lit room

__ rubs his/her eyes, has watery eyes or gets headaches after reading or watching TV

__ avoids eye contact

__ enjoys playing in the dark

2. Hyposensitivity To Visual Input (Under-Responsive Or Difficulty With Tracking, Discrimination, Or Perception):

__ has difficulty telling the difference between similar printed letters or figures; i.e., p & q, b & d, + and x, or square and rectangle

__ has a hard time seeing the "big picture"; i.e., focuses on the details or patterns within the picture

__ has difficulty locating items among other items; i.e., papers on a desk, clothes in a drawer, items on a grocery shelf, or toys in a bin/toy box

__ often loses place when copying from a book or the chalkboard
difficulty controlling eye movement to track and follow moving objects
has difficulty telling the difference between different colors, shapes, and sizes
often loses his/her place while reading or doing math problems
makes reversals in words or letters when copying, or reads words backwards; i.e., "was" for "saw" and "no" for "on" after first grade
complains about "seeing double"
difficulty finding differences in pictures, words, symbols, or objects
difficulty with consistent spacing and size of letters during writing and/or lining up numbers in math problems
difficulty with jigsaw puzzles, copying shapes, and/or cutting/tracing along a line	
tends to write at a slant (up or down hill) on a page
confuses left and right
fatigues easily with schoolwork
difficulty judging spatial relationships in the environment; i.e., bumps into objects/people or missteps on curbs and stairs

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**Auditory-Language Processing Dysfunction:**

unable to locate the source of a sound
difficulty identifying people's voices
difficulty discriminating between sounds/words; i.e., "dare" and "dear"
difficulty filtering out other sounds while trying to pay attention to one person talking
bothered by loud, sudden, metallic, or high-pitched sounds
difficulty attending to, understanding, and remembering what is said or read; often asks for directions to be repeated and may only be able to understand or follow two sequential directions at a time
looks at others to/for reassurance before answering

difficulty putting ideas into words (written or verbal)

often talks out of turn or "off topic"

if not understood, has difficulty re-phrasing; may get frustrated, angry, and give up

difficulty reading, especially out loud (may also be dyslexic)

difficulty articulating and speaking clearly

ability to speak often improves after intense movement

Social, Emotional, Play, And Self-Regulation Dysfunction:

Social:

difficulty getting along with peers

prefers playing by self with objects or toys rather than with people

does not interact reciprocally with peers or adults; hard to have a "meaningful" two-way conversation

self-abusive or abusive to others

others have a hard time interpreting child's cues, needs, or emotions

does not seek out connections with familiar people

Emotional:

difficulty accepting changes in routine (to the point of tantrums)

gets easily frustrated

often impulsive
functions best in small group or individually
variable and quickly changing moods; prone to outbursts and tantrums
prefers to play on the outside, away from groups, or just be an observer
avoids eye contact
difficulty appropriately making needs known

Play:

difficulty with imitative play (over 10 months)
wanders aimlessly without purposeful play or exploration (over 15 months)
needs adult guidance to play, difficulty playing independently (over 18 months)
participates in repetitive play for hours; i.e., lining up toys cars, blocks, watching one movie over and over etc.

Self-Regulation:

excessive irritability, fussiness or colic as an infant
can't calm or soothe self through pacifier, comfort object, or caregiver
can't go from sleeping to awake without distress
requires excessive help from caregiver to fall asleep; i.e., rubbing back or head, rocking, long walks, or car rides

Internal Regulation (The Interoceptive Sense):

becoming too hot or too cold sooner than others in the same environments; may not appear to ever get cold/hot, may not be able to maintain body temperature effectively
difficulty in extreme temperatures or going from one extreme to another (i.e.,
winter, summer, going from air conditioning to outside heat, a heated house to the cold
outside)

c. respiration that is too fast, too slow, or cannot switch from one to the other easily as
the body demands an appropriate respiratory response

d. heart rate that speeds up or slows down too fast or too slow based on the demands
imposed on it

e. respiration and heart rate that takes longer than what is expected to slow down
during or after exertion or fear

f. severe/several mood swings throughout the day (angry to happy in short periods of
time, perhaps without visible cause)

g. unpredictable state of arousal or inability to control arousal level (hyper to
lethargic, quickly, vacillating between the two; over stimulated to under stimulated,
within hours or days, depending on activity and setting, etc.)

h. frequent constipation or diarrhea, or mixed during the same day or over a few days

difficulty with potty training; does not seem to know when he/she has to go (i.e.,
cannot feel the necessary sensation that bowel or bladder are full

i. unable to regulate thirst; always thirsty, never thirsty, or oscillates back and forth

j. unable to regulate hunger; eats all the time, won't eat at all, unable to feel
full/hungry

k. unable to regulate appetite; has little to no appetite and/or will be "starving" one
minute then full two bites later, then back to hungry again (prone to eating disorders
and/or failure to thrive)

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So you just found out your child may have SPD (Sensory Processing Disorder). Where do you begin? Right here with the Step-By-Step Guide For SPD Parents!
Top SPD Resources

Related Resources

The SPD Store - A Complete One stop source for SPD products

Adult SDP Checklist - Find out signs and symptoms of Sensory Processing Disorder with the adolescent and adult SPD checklist.

SPD Symptom Checklist For Infants And Toddlers - Signs and symptoms of sensory processing disorder for babies is here with the SPD symptom checklist for infants and toddlers. Come find out if THIS explains your baby's behavior.

Child Developmental Checklist - Use this child developmental checklist for children ages 0-3 to find out whether your child is in need of an early intervention/developmental therapy referral.

Fine Motor Development Chart - Use this easy-to-understand fine motor development chart (ages 0-5) to see if YOUR child is delayed in his fine motor skills. Find out if an early intervention or OT referral is needed.