south dakota BIRTH TO THREE
The first three years build a lifetime

Suggested Informed Clinical Opinion

Child's Name_____ Date of Birth____/____/_____

Parent/Guardian Name _____

Address _____ Zip _____ Phone _____

Date of Meeting ___/___/___

The multidisciplinary team **must** document the following:

1. Explain why the evaluation standards and procedures, which are used with the majority of children, did not adequately measure the child's abilities.

2. Indicate what objective data was used to conclude that the child has a developmental delay and is in need of early intervention services. Data may include test scores; parent input; childcare provider comments; observations of the child in his/her daily routine; use of behavior checklists or criteria-referenced measures; and other developmental data including current health status and medical history.

3. Indicate which data had the greatest importance relative to the eligibility decision.

4. Multidisciplinary team must sign-off agreeing to the use of informed clinical opinion. If one or more team members disagree with the decision, include a statement of why they disagree, signed by those members.

5.

Multidisciplinary team members:

Name	Title	Agree w/Decision
_____	_____	___ Yes ___ No (attach statement)
_____	_____	___ Yes ___ No (attach statement)
_____	_____	___ Yes ___ No (attach statement)
_____	_____	___ Yes ___ No (attach statement)
_____	_____	___ Yes ___ No (attach statement)
_____	_____	___ Yes ___ No (attach statement)
_____	_____	___ Yes ___ No (attach statement)
_____	_____	___ Yes ___ No (attach statement)