2E PARENT WORKSHEET

TECA strongly encourages parents to research and interview potential practitioners before making a commitment to work with them. Just because they appear on the TECA website does not mean they are a good fit for you and/or your child. Before you meet with a professional, develop an understanding of what you want them to do for your child/you/your family. Twice exceptionality is complex by definition and can be challenging to identify. If you get that your child is different and has needs that are not well understood or are not being met, outline your concerns about your child beforehand.

When you talk with the practitioner, ask lots of questions, including follow-up questions. Ask friends if they have worked with the practitioner, look for reviews online, and check out the provider’s website before you decide with whom you want to work. This is a big, and potentially expensive, decision. What works for one family may not work for another.

Before choosing a particular practitioner it is important that the parent identify as best they can what they want to achieve by working with that practitioner. Use this worksheet to help identify the right practitioner for your child.

What type of practitioner are you considering? ________________________________________________

• What are your general concerns about your child? ____________________________________________
  ______________________________________________________________________________________
  ______________________________________________________________________________________

• What concerns do you want this particular provider to address? ______________________________
  ______________________________________________________________________________________
  ______________________________________________________________________________________

• What are your child’s strengths? __________________________________________________________
  ______________________________________________________________________________________
  ______________________________________________________________________________________

• What kinds of academic challenges does your child have? _________________________________
  ______________________________________________________________________________________
  ______________________________________________________________________________________
• What kind of social challenges does your child have? ______________________________________
____________________________________________________________________________________
____________________________________________________________________________________

• Are there certain characteristics you require in a provider (male, female, LBGTQ-friendly/
knowledgeable, location, familiarity with a particular disorder, etc.)? ________________________
____________________________________________________________________________________
____________________________________________________________________________________

• What sensory issues, if any, does your child have? ______________________________________
____________________________________________________________________________________
____________________________________________________________________________________

• Does your child have any phobias/trauma, particularly in relation to visiting a doctor? _________
____________________________________________________________________________________
____________________________________________________________________________________

• Is your child old enough to self-advocate or do you need to speak on your child’s behalf? _________
____________________________________________________________________________________
____________________________________________________________________________________

• Does your child fear/resist treatment? If so, why? ________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

• What helps your child feel more comfortable during a doctor visit (previewing, meeting the doctor
in the waiting room/consultation room, having the doctor show any instruments they will be using, etc.)
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

✓ Be sure to have information on your child’s medical history, including, if possible, details on when
your child reached basic developmental milestones.