

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Infant Oral Assessment Checklist © Melissa Cole, MS, IBCLC**

**Lingual and oral assessment (check all that apply)**

Assessment Item	Poor	Moderate	Normal	Notes
Lateralization				
Extension				
Elevation				
Cupping				
Peristalsis				
Lingual strength				
Buccal strength				
Lip tone				
Lip strength				
Jaw tension				
Jaw movement				
Other:				

**Lingual frenulum classification (Corrylos, Genna, Salloum system), check which applies:**

- Type 1: attachment of frenulum to tongue tip
- Type 2: 2-4 mm behind tongue tip
- Type 3: attachment of frenulum to mid tongue
- Type 4: attachment at the base of the tongue

**Maxillary labial frenulum**

Assessment Item	Poor	Moderate	Normal
Ability to flange upwards			
Tension of frenulum with elevation			
Other:			

**Maxillary labial frenulum classification (Kotlow system), check which applies:**

- Type 1: normal attachment
- Type 2: frenum inserts at the zone of the free and attached gingival tissue
- Type 3: frenum inserts at the zone between the area of the future central incisors
- Type 4: frenum inserts at the zone extending into the anterior palatal area

**Misc. frenula assessment notes (buccal, inferior mandibular):**

**Palate notes: (shape, suture ridge buckling, soft palate tone, patency):**

**Facial symmetry notes:**

**Overall structural notes:**

**Feeding notes:**

**Other:**