# **Early Intervention Center**

for Autism and Developmental Disorders



**مركـز التـدخــل الـمبـكــر** للتـوحـّد واضطرابـات الـنـمــو

**Director's Report on Developmental Progress Assessment** 

**Date of Visit:** May 1st, 2025 **Child's Name:** Abdulkadir Bourfoun **Date of Birth:** March 21st, 2012

#### **Assessment:**

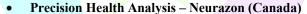
Abdulkadir was assessed in person and exhibits **Information Processing Delays**. However, he **does not score as a case of Autism or ADHD/ADD** based on our current criteria and observation. The child requires further analysis to explore potential underlying causes and guide future intervention strategies.

### **Recommended Plan:**

# 1) Development Protocol for the Information Processing:

- Continue with the non-medicinal development protocol for 4 months
- Reassess the child in person after the protocol period
- Reevaluate the therapeutic baseline and adjust the plan accordingly
- Maintain structured sessions during the intervention phase

# 2) Recommended Tests (through Neurazon, Canada):



- Saliva sample
- o 4 months business days turnaround
- o In-depth analysis of metabolic, genetic, and neurological pathways
- Neuronal Growth Factors Absorption Analysis Neurazon (Canada)
  - Hair sample
  - o 2 months business days turnaround
  - o Repeated every 6–12 months
  - o Focused on absorption efficiency and nutrient-related brain support markers

# 3) Recommended Therapy:

- At this stage, no specific therapy is assigned
- Therapy recommendations will be revisited after the next evaluation, based on progress and test outcomes

## **Conclusion:**

This report is a **rehabilitation assessment**, not a final diagnosis. Abdulkadir is showing signs that warrant further exploration but does **not meet criteria for Autism or ADD/ADHD**. Continued structured support and testing will clarify his developmental profile and optimize his cognitive outcomes.





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This document is provided for **developmental assessment and planning purposes only** and does not serve as a final medical diagnosis as the child is capable of improving.

**Signature:** 

**EICADD Center Director** 



