

Director's Report on Developmental Progress Assessment

Date of Visit: 13-05-2025

Child's Name: Abdullah Alrifaa

Date of Birth: 25-06-2009

Age: 15 years, 10 months

Gender: Male

Guardian: Hosam

Overview:

Abdullah Alrifaa was assessed at our center for concerns related to learning and development. The evaluation revealed that the child presents with information processing delays and acquired features of intellectual developmental delay. In addition, due to the extent and persistence of these developmental delays, he is exhibiting features commonly associated with Autism Spectrum Disorder (ASD). However, it is important to clarify that these features appear to be acquired as a consequence of his delays and not representative of classical or primary autism.

Recommended Plan:

1. Development Protocol for Information Processing:

- Continue the tailored intervention protocol for 4 months.
- A follow-up evaluation is recommended, preferably conducted in person, to reassess the child's developmental baseline and measure progress.
- The current plan should be adjusted based on findings from the reevaluation.

2. Recommended Tests through Neurazon (Canada) (Please refer to their report as these are not done at our center)

- **Precision Health Analysis – Neurazon (Canada)**
 - Saliva sample
 - Estimated turnaround: 4 months (business days)
 - This test will provide an in-depth look into the possible underlying genetic, environmental, or physiological factors contributing to the child's developmental profile.
- **Neuronal Growth Factors Analysis – Neurazon (Canada)**
 - Hair sample
 - Estimated turnaround: 2 months (business days)
 - This screening evaluates the child's absorption of key nutrients essential for brain development and information processing.

3. Recommended Therapy:

- Neuroplasticity rehabilitation therapy (2–3 sessions per week) is recommended to support cognitive recovery, information processing abilities, and developmental growth.

Conclusion:

Abdullah Alrifaa is exhibiting signs of developmental vulnerability that have led to acquired cognitive and behavioral features resembling ASD. With continued intervention and follow-up testing, there is a strong potential for improvement. This assessment does not constitute a final diagnosis. Rather, it is a developmental evaluation subject to change as the child responds to therapy and as further data becomes available.

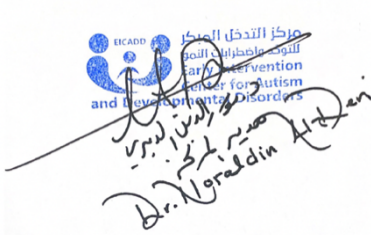
Center's Leading Staff:

Speech Therapist: Ms. Amira Alomari

Occupational Therapist: Ms. Malak Jaber

Psychologist and behaviour therapist: Ms. Asmaa Alshanawi

EICADD Center Director



Dr. Noraldin Al-Dan

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