



Director's Report on Developmental Progress Assessment

Date of Visit: May 1st, 2025

Child's Name: Narwerz Ahmed Bij

Date of Birth: 2021-06-29

Assessment:

Narwerz was assessed in person and has shown **great improvement** on the first step of the developmental protocols. However, the child continues to present with **Information Processing Delays** and **Developmental Delays**, which have contributed to **acquired features of autism**. There is also a **risk of developing PANS/PANDAS**, and further observation and intervention are recommended to prevent complications, and therefore we recommend following up with a pediatrician to do the necessary.

Recommended Plan:

1) Development Protocol for the Information Processing:

- Continue the current development plan for **3 to 4 months**.
- Reassess in person to measure progress and adjust the strategy accordingly.
- Complete full sessions of individualized therapy during this period.

2) Recommended Tests (via Neurazon Canada):

- **Precision Health Analysis – Neurazon (Canada)**
 - Saliva sample
 - Turnaround: 4 months (business days)
 - Provides a more detailed analysis of causative genetic, immune, and biochemical pathways
- **Neuronal Growth Factors Absorption Analysis – Neurazon (Canada)**
 - Hair sample
 - Turnaround: 2 months (business days)
 - Repeated every 6–12 months
 - Assesses absorption and nutrient availability relevant to brain and gut function

3) Recommended Therapy:

- **Speech Therapy (ST):** 2 sessions weekly
- **Occupational Therapy (OT):** 1–2 sessions weekly
- Therapy should be focused on cognitive regulation, behavior management, and sensory integration.





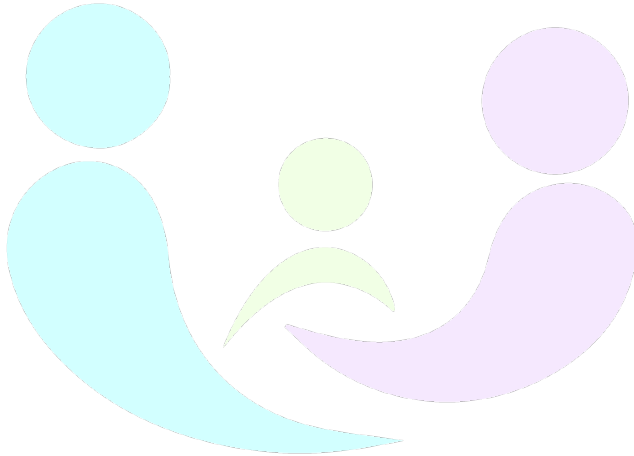
Conclusion:

This report is a **developmental rehabilitation assessment** and not a final diagnosis. The child is capable of continued improvement. However, close monitoring is warranted due to the **risk of PANS/PANDAS**, and testing as well as consistent therapy are essential in the coming months to ensure proper neurodevelopment.

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



EICADD

This is a **rehabilitation assessment, not a final medical diagnosis**. The children are highly capable of improvement and reclassification, and early structured intervention can result in significant developmental gains. We recommend continued reassessment every 4 months to ensure optimal developmental tracking and adjustment of therapeutic strategies.

Director

Date: 01-05-2025

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