Early Intervention Center

for Autism and Developmental Disorders



مركـز التـدخـل الـمبـكــر للتـوحّد واضطرابـات الـنـمـــو

Director's Report on Developmental Progress Assessment

Date of Visit: 20-04-2025 Child's Name: Hema Rasul Date of Birth: 20-09-2020

Overview:

Hema Rasul was reassessed in person at our center for a follow-up developmental evaluation. Since beginning the first step of the protocol, **Hema has shown great improvement**. The child continues to experience **information processing delays and developmental delays**, which are linked to **underlying genetic variants affecting autophagy and mitochondrial function**. These physiological factors have led to **acquired features of autism**, though Hema's case shows strong responsiveness to intervention and remains open to further developmental gains.

Recommended Plan:

1. Development Protocol for Information Processing

- Continue the personalized development protocol with focus on improving cognitive processing
- Maintain this plan for 4 months, after which the child should be reassessed in person
- Adjust the protocol based on updated clinical observations and baseline progress

2. Recommended Tests through Neurazon Canada:

- Neuronal Growth Factors Absorption Analysis
 - o Sample Type: Hair
 - o **Estimated Result Time:** ~2 months (business days)
 - o **Purpose:** To evaluate the child's ability to absorb and utilize key neurological and nutritional components critical for brain development
 - Repetition: Every 6–12 months, depending on progress
- Functional Urine Analysis
 - Sample Type: Urine
 - o **Estimated Result Time:** ~2 months (business days)
 - o **Purpose:** To analyze metabolic and mitochondrial pathway functionality, especially related to detoxification, oxidative stress, and nutrient metabolism
 - o **Repetition:** Every 6–12 months as clinically indicated

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3. Recommended Therapy:

- Neuroplasticity Rehabilitation Therapy (Intensive Format)
 - Aimed at strengthening neural communication, supporting executive function, and improving sensory-cognitive integration

Conclusion:

Hema's progress on the initial intervention demonstrates high potential for continued improvement. The child's presentation does not reflect a fixed or classical autism diagnosis, but rather **acquired features driven by modifiable biochemical and neurological factors**. Ongoing monitoring and therapy remain essential, and the assessment is open to positive change based on developmental response.



Signature:

EICADD Center Director

