FOR PARENTS & CARERS

Before You See the GP

A checklist of what to gather before you ask for an FASD referral, so your GP has what they need.

FASD Compass · fasdcompass.co.uk/gp-checklist/

A GP cannot diagnose FASD, but they can refer your child for an assessment. National guidance says a referral should be made when a child has **significant difficulties** and there is **probable alcohol exposure in pregnancy** (NICE QS204 Statement 3). This checklist helps you show both.

You do not need everything on this list. Bring what you have. Tick items off as you gather them, then print the page or take it with you on your phone.

1. Alcohol in Pregnancy

📚 This is the most important part. SIGN 156 and NICE QS204 accept these kinds of evidence (SIGN 156, NICE QS204).

🍷 What counts as evidence

- [ ] **The birth mother's own account.** If this is you, it is fine to say you drank before you knew you were pregnant. Honest information helps your child get the right support.
- [ ] **A report from someone reliable** who knew about drinking during the pregnancy, such as a partner, relative or professional.
- [ ] **Maternity or hospital notes** that mention alcohol, including any positive blood alcohol tests.
- [ ] **Records of alcohol treatment**, or of social, legal or medical problems linked to drinking during the pregnancy.
- [ ] **For adopted, fostered or kinship children:** adoption or care records, such as the Child Permanence Report and adoption medical reports. Ask your social worker or adoption agency for copies.

💬 If you have no information

That is common, especially in adoption. Tell the GP what you know and what you do not know. Clear photos of your child's face are still useful, because in a small number of children the facial features alone can allow a diagnosis (National FASD).

2. Health Records

📕 From birth onwards

- [ ] Birth details: date of birth, weight, length and head size if you have it
- [ ] The **Red Book** (personal child health record), with growth, weight and height
- [ ] Medical history: illnesses, operations, hearing or vision problems
- [ ] A list of current medicines
- [ ] Any genetic tests already done

📷 Photos

- [ ] Clear photos of your child's face at different ages, taken from the front
- [ ] If you can, include some where they are not smiling, as smiling changes the shape of the eyes and lips

3. School and Other Reports

🏫 School and nursery

- [ ] School reports and any concerns raised by teachers
- [ ] SEN support plans, individual education plans or an EHCP (Education, Health and Care Plan)
- [ ] Records of exclusions, reduced timetables or incidents, if any

📋 Earlier assessments

- [ ] Speech and language therapy reports
- [ ] Occupational therapy or physiotherapy reports
- [ ] Educational psychology reports
- [ ] CAMHS letters, and any diagnosis such as ADHD or autism
- [ ] Hearing and vision test results

4. Your Notes on Daily Life

📚 NICE describes difficulties as significant when they disrupt the ability of the child or family to manage everyday life (NICE QS204). Two or three recent, real examples are more powerful than a long list.

✍️ Write a few lines on each area that worries you

- [ ] **Learning and memory:** forgetting things learnt yesterday, finding maths or reading hard
- [ ] **Attention:** staying focused, being easily distracted
- [ ] **Planning and self-control:** acting without thinking, following instructions, coping with change
- [ ] **Language:** understanding what is said, following conversations
- [ ] **Movement:** coordination, balance, handwriting
- [ ] **Emotions:** meltdowns, anxiety, low mood
- [ ] **Friendships:** getting on with other children, reading social situations
- [ ] **Everyday skills:** dressing, staying safe, understanding money and time
- [ ] **Sleep, eating and senses:** noise, touch, food
- [ ] **Strengths:** what your child is good at and enjoys

My notes and examples

5. At the Appointment

🗣️ What to say

You could say: **"I would like my child referred for an assessment that considers alcohol exposure in pregnancy as a possible cause of their difficulties, as set out in NICE quality standard QS204."**

✅ Before you leave

- [ ] Give the GP the **one-page guide for GPs**
- [ ] Ask where the referral will go and how long the wait is likely to be
- [ ] Ask for a copy of the referral letter
- [ ] Ask what support can start while you wait, for example through the school SENCO
- [ ] Ask for a longer appointment when you book, if your practice offers one
- [ ] Take a friend or relative for support if that helps you

📞 More help

The **National FASD diagnosis guide** explains the process in more detail, and SIGN has a free **leaflet for families on FASD assessment**. The National FASD helpline is 0208 458 5951.

Sources: NICE QS204 Statement 3: nice.org.uk/guidance/qs204 · SIGN 156: sign.ac.uk/media/1092/sign156.pdf · National FASD: nationalfasd.org.uk/about-fasd/getting-a-diagnosis · SIGN family leaflet: sign.ac.uk/media/1443/information_on_fasd_assessment.pdf

Last reviewed: November 2026 by Dr Inyang Takon, Consultant Neurodevelopmental Paediatrician. For information only. This page does not replace advice from your own doctor.