THE ORAL-MOTOR PIECE MOST SPECIALISTS MISS

For GI, Allergy & ENT Physicians

Making food fun
Foodology

A 2-minute screen you can run during the visit you're already doing. **Check what applies — 3 or more checked, or 1 severe item, is a referral.**

ORAL-MOTOR & AIRWAY

- ◯ Mouth breathing at rest
- ◯ Snoring or noisy breathing
- ◯ Long face or recessed jaw
- ◯ Tongue visible between teeth at rest
- ◯ History of tongue-tie or lip-tie
- ◯ Persistent S, TH, or R errors
- ◯ Chews with mouth open
- ◯ Tires or gives up mid-meal
- ◯ Chews on one side only
- ◯ Still on purées/soft foods past 18 months

SENSORY MARKERS

- ◯ Bothered by tags, seams, or clothing textures
- ◯ Sensitive to loud noise or bright light
- ◯ Avoids certain food textures, not just tastes
- ◯ Refuses whole categories — all wet, all crunchy
- ◯ Meltdowns or rigidity around mealtime
- ◯ Can't sit through a meal without constant movement

GI & MEDICAL MARKERS

- ◯ Constipation
- ◯ Reflux
- ◯ Bloating or excess gas
- ◯ Frequent stomachaches
- ◯ Frequent illness / low immune resilience
- ◯ Growth faltering despite adequate intake

3+ **checked → refer for a feeding evaluation.**
Even 1 severe item on its own is enough to refer.

FOR ALLERGISTS

A long allergy list ≠ a feeding issue — but refusal that continues after a passed food challenge is a referral, not more allergy workup.

FOR GI

A clean workup doesn't rule out sensory-driven refusal. It's assessed through a completely different lens than yours.

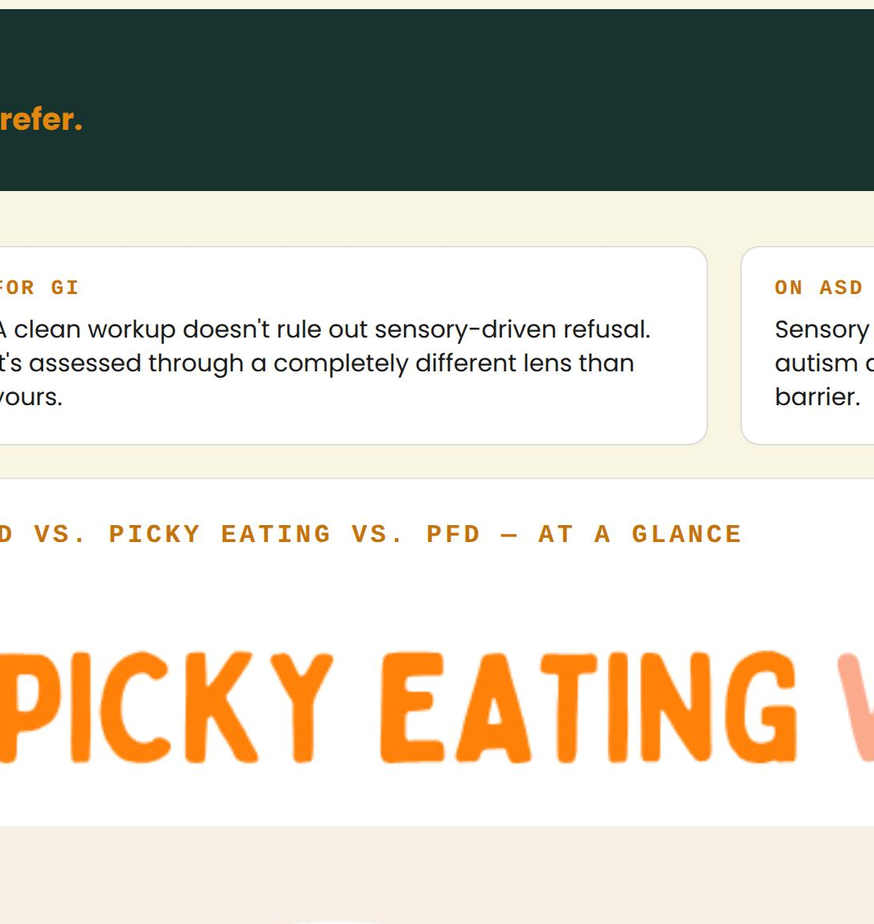
ON ASD

Sensory over-responsivity isn't autism-specific, and autism doesn't explain refusal away. It's still a treatable barrier.

ARFID VS. PICKY EATING VS. PFD — AT A GLANCE

ARFID VS. PICKY EATING VS. PFD

- Preference for foods
- Willing to try foods or accepts variation with time & exposure
- Eats across several food groups
- Occurs during normal phases of development
- No major stress of anxiety around eating for the child



Foodology
Making food fun

- May appear suddenly after illness or medical event
- Suddenly drops many or all foods
- Previously no food issues
- No physical difficulty chewing
- Fear or anxiety leads to refusal—even if they want to eat
- Usually affects nutrition and weight
- Unrelated to body image
- May still have gut or sensory issues

- Ongoing feeding issues from infancy/early childhood
- Involves oral motor, sensory, medical, and/or nutritional challenges- even if child is still growing
- May eliminate entire food groups
- Parents report a history of stressful mealtimes
- Becomes more restrictive over time, dropping foods
- Frequently has gut issues (like constipation, history of reflux)

Tel: 516-561-9952 Email: hello@foodologyfeeding.com Website: www.foodologyfeedingtherapy.com

We help kids go from fearful to foodies —
and we guide parents every step of the way.