#### SfA Infant Assessment and Intervention

# CHECKLIST 3-6 months: Supine

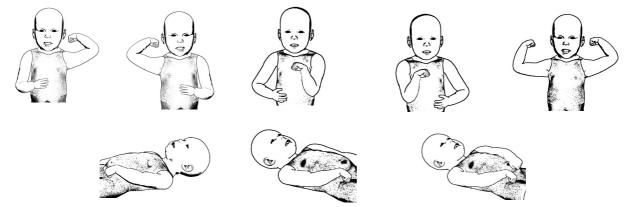
### Posture and movements of the head and and neck

Typical	Observed
Lies with head in midline most of the time	Yes
Head-on-neck flexion present	Yes
Head turned some of the time - especially when looking at an event in the environment	R L
Head position does not influence arm posture	Yes
Atypical	
Maintained midline position of the head not observed	Yes
Head tilted laterally – often associated with neck rotation (torticollis).	R L
Keeps head turned to one side most of the time – associated with neck extension.	R L
Infant's head rotation is strongly associated with fencing posture of the UEs	R L

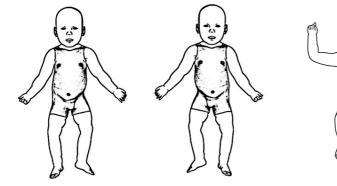
### Posture of the upper extremities during periods of relative quiet

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Typical	Observed
Shoulders are abducted with some degree of lateral rotation and elbows flexed or extended.	R L
Hands lifted to midline	R L
Hands to face and mouth	R L
Fingers are lightly flexed (lightly fisted)	R L
Isolated finger movements and different hand posture observed	R L

Atypical	
S add with upper arm positioned close to the torso, E ext and W flex	R L
S add with E flex, FA pronation, W flex	R L
S abd, lat rot with E flex, FA pronation, W flex	
Hands tightly fisted	R L
Thumb in palm	R L



T.7
Yes
Yes
Yes
Yes
R L
R L







# Lower extremity posture when not actively kicking

Typical		Observed
Hip and knee of one or both LEs may be extended with varying degrees of ankle dorsiflexion/plantar flexion	Yes	}
Hip flexion with knee flexion and the foot on the SS	Yes	1
Flexion of both hips with feet lifted up off the SS with varying degrees of knee extension	Yes	}
Hands to knees	R	L
Hands to feet	R	L
Atypical		
H and K extended with H adduction	R	L
H and K flexed with hip abduction and lateral rotation	R	L







#### Kicking

Typical	Observed
Unilateral single LE kick	R L
Repeated kicking with one LE	R L
Reciprocal kicking actions	Yes
Bilateral kicking with both LEs flexing and extending at more or less the same time.	Yes
Hip extension is associated with a small range of hip abduction.	R L
Atypical	
Kicking movements are not fluent with jerky transitions from flexion to extension	R L
One leg is less active than the other	R L
Extension of the hip is associated with hip adduction.	R L

# Reaching and exploring surfaces

Typical	Observed
One hand reaches towards/grabs interesting object that is within easy reach	R L
Reaches towards/grasps interesting object with both hands when presented in the midline	Yes
Holds object with one hand, uses fingers of other hand to explore object	Yes
Explores body and clothing with hand - rubbing, grasping	R L
Explores surrounding surfaces with hand and fingers – rubbing, grasping	R L
Explores surfaces with foot	R L
Foot play – explores one foot with the other	Yes
Atypical	
One hand moves less than other	R L
Does not initiate reaching or grasping	R L
Hand held fisted, thumb in palm	R L

## Rolling

Typical	Observed
Rolls from supine to side lying	R L
Rolls supine to prone	R L
Initiates by pushing down on one foot	R L
Initiates by reaching across with one hand	R L
Initiates by lifting both LEs	R L
Atypical	
Rolling to side lying not observed	R L
Rolling to prone not observed	R L

# Adaptations to encourage more complex or new behaviors

## Head and trunk support to increase limb movements

Lying on a soft pillow moulded to provide support
Soft roll under head and shoulders
Folded towel under buttocks to encourage posterior pelvic tilt
Adaptations that encourage exploration and engagement
Dangling a toy close to one hand
Different support surfaces – change in texture
Support surface that makes a noise
Bell or bright ribbon attached to hand