

Superintendência de Relações Intersetoriais Coordenadoria de Assistência Farmacêutica Assistência Farmacêutica Especializada

The Ch	ildren's H osp	ital <i>of</i> P hiladelp	hia In fant Te st of N eu	romuscul	ar D iso	rders
		СНО	OP INTEND			
Name:		Diagnos	is: Ge	stational a	ge:	_weeks
Medical Re	cord Number: _	Date of I	Birth: Ag	e	_	
Date of Eva	aluation:/_	_/ Time of e	evaluation: Tir	ne since las	st feeding	g:
Current hea	lth: Good health	URI Oth	er illness 🗀: Rec	cent surger	y 🗀:	
Feeding sup	pport: None	☐ Nasogas	stric Tube Gastrosto	my Tube		
Respiratory	support: None	☐ BiPAP☐ fo	or hours/dayTim	e off BiPA	P at testi	ng
	Position	Test Procedure	Graded Response		Score	
1	Supine	Observe throughout	Antigravity shoulder movemen	t 4	L	Best side:
Spontaneous		testing	(achieves elbow off surface) Antigravity elbow movement	3		
movement		May unweight limb or	(achieves hand and forearm off sur	24 60		Brazelton
(Upper extremity)		stimulate infant to	Wrist movement	2	R	State:
		facilitate response	Finger movement	1		
			No movement of limbs	0		
2	Supine	Observe throughout	Antigravity hip movement	4	L	Best side:
Santonoma		testing	(achieves feet and knees off surfa	ice)		
Spontaneous			Antigravity hip adduction/internal re	otation 3		
(Lower		May unweight limb or	(knees off surface)			Brazelton
extremity)		stimulate infant to	Active gravity eliminated knee moven	nent 2	R	State:
		***	Ankle movement	1		
			No movement of limbs	0		
3	Supine	Grip strength: place	Maintains hand grip with shoulder of	STATE OF THE STATE	L	Best side:
213		finger in palm and lift	Maintains grip with elbow off sur (shoulders on surface)	face 3		
Hand grip		until shoulder comes	Maintains grip with forearm off su (elbow supported on surface)	rface 2	R	Brazelton
		off surface observe	Maintains grip only with no tract	ion 1		State:
		when infant looses	No attempt to maintain grasp	0		
		grasp				
		May use toy of similar				
		diameter for older				
		children				
4	Supine head midline	Visual stimulation is	Rotates from maximum rotation to n	nidline 4	L>R	Best side:
-		given with toy.	Turns head part way back to mid			
Head in		If head is maintained	Maintains midline for 5 or more se	conds 2	D. I	Brazelton State:
midline with		in midline for 5	Maintains midline, less than 5 sec	1	R>L	0000000
visual		seconds: Place head in	Head falls to side, no attempts to re midline	egain O		
stimulation*		maximum available				
		rotation and provide				
		visual stimulation to				
		encourage midline				

5 Supin	Supine, no diaper	Hips flexed and	Keeps knee off surface of bed > 5 sec or lifts foot off surface	4	L	Best side: Brazelton State:
		adducted	Keeps knees off surface of bed 1-5 sec	2		
		Feet hip width apart and thighs parallel, knees slightly apart	No attempt to maintain knees off surface	0	R	

Rolling: elicited from legs*	Supine lower the carms at side and known the carms at side	Holding infant's lower thigh, flex hip	When traction is applied at the end of the maneuver, rolls to prone with lateral head righting	4	To R	Best side:
		and knee and adduct	lateral head righting, clears weight-bearing arm to complete roll Pelvis, trunk and arm lift from support surface, head turns and rolls onto side, arm comes thru	3		Brazelton
		across midline bringing pelvis vertical				
	5 - 0.0 m or - 0.0 m o			1		State:
	Side tested	maintain traction and	Pelvis lifted passively off support surface.	0		
		pause in this position.2. If infant rolls to side				
		apply traction at a 45°				
		diagonal to body and pause to allow infant to				
		attempt to derotate				
		body				
7		1. Hold infant at the	Rolls to prone with lateral head righting	4	To R	Best side:
Rolling:	Supine		Rolls into prone without lateral head righting; must clear weight-bearing arm completely to finish roll	3		
elicited from arms*	(arms at side) Keep side tested up	opposite shoulder maintain traction on	Rolls onto side, leg comes thru and adducts, bringing the pelvis vertical	2	To L	Brazelton
	roll away from the	limb and pause with	Head turns to side and shoulder and trunk lift from surface Head turns to side; body remains limp or	1	- 10 L	State:
	Side tested	the shoulders vertical	shoulder lifts passively	0		
		allow infant to derotate				
		2.if the pelvis achieves vertical continue to				
		provide traction				

8	Side-lying with	Prompt reach for a toy	Clears hand from surface with antigravity arm movement	4	L	Best side
Shoulder and	upper arm at 30° of	presented at arms	Able to flex shoulder to 45 degrees, without antigravity arm movement	3		
	shoulder extension	length at shoulder level	Flexes elbow after arm comes off body	2		Brazelton
elbow flexion	and elbow flexion	(may provide	Able to get arm off body	1	R	State:
And horizonta abduction	and supported on body (restrain lower arm if	stimulation and observe spontaneous movement)	No attempt	0		
	needed)					
9		Present stimulus at	Abducts or flexes shoulder to 60 degrees	4		
,	Sitting in lap or on	midline and at	Abducts or flexes shoulder to 30 degrees	3	1	
Shoulder			Any shoulder flexion or abduction	2	1	
	mat with head and	shoulder level at arms	Flexes elbow only	1	1	Best side
flexion	trunk support (20°	length	No attempt to lift arm	0	L	
& Elbow flexion	recline)	(may provide stimulation and observe spontaneous movement)			R	Brazeltoi State:
10	Sitting in lap or	Tickle plantar surface	Extends knee to > 45 degrees	4		Best side
10	over edge of mat	of foot	Extends knee 15 to 45 degrees	2	L	
	with head and trunk	Or gently pinch toe	Any visible knee extension	1	1 -	
	support (20° recline) thigh horizontal to ground		No visible knee extension	0	R	Brazelto State:
11	Hold infant against your	Stroke the foot or	Hip flexion or knee flexion > 30 ⁰	4		1
11	body with legs free, facing	pinch the toe	Any hip flexion or knee flexion	3		
Uin flavion and	outward. Support at the	pinen the toe	Ankle dorsiflexion only	2	L	Best side
Hip flexion and	abdomen with the child's	_			L	
foot dorsiflexion	head resting between your arm and thorax		No active hip, knee or ankle motion	0	R	Brazeltor State:
12		Place the infant in ring	Attains head upright from flexion and turns head side to side	4		
New York	Sitting with support	sit with head erect and	Maintains head upright for >15 sec (for bobbing head control score a 2)	3]	
Head control*	at the shoulders and	assistance given at the	Maintains head in midline for >5 sec. with the head	2	1	Score:
	trunk erect	shoulders (front and	tipped in up to 30° of forward flexion or extension Actively lifts or rotates head twice from flexion within 15 seconds	1		
		back).	(do not credit if movement is in time with breathing) No response, head hangs	0	_	Brazeltor State:
		(may delay scoring a				
		grade of 1 and 4 until end of test)				
13	Supine	Traction response:	Flexes elbow	4		1
		pull to sit extend arms	Visible biceps contraction without elbow flexion	2		Best side
Elbow flexion Score with item		at 45 degree angle, to	No visible contraction	0	L	Brazeltor State:
		point of nearly lifting			R	
14		head off surface				

14	Supine	Traction response: hold	Lifts head off bed	4		
100		in neutral proximal to	Visible muscle contraction of SCM	2		Score:
Neck Flexion Score with item		wrist and shoulder at 45°, to point of nearly lifting head off surface	No muscle contraction	0		Brazelton State:
15	Ventral suspension:	Stroke along the spine from	Extends head to horizontal plane or above	4		
	Prone, held in one	neck to sacrum. The	Extends head partially, but not to horizontal	2	1	Score:
Head/Neck Extension (Landau)	hand upper abdomen	coronal axis of the head when parallel to the bed surface = 0 degrees (horizontal)	No head extension	0		Brazelton State:
16		Stroke Right then Left	Twists pelvis towards stimulus off axis	4	L	Best side
177,071		throacolumbar paraspinals	Visible paraspinal muscle contraction	2		
Spinal Incurvation (Galant)	Ventral suspension: Prone, held in one hand upper abdomen	or tickle abdomen or foot or tilt in infants with integrated Galant For infant over 10 kg knees and head may touch	No response	0	R	Brazelton State: