



In-Tuned®

Occupational Performance Evaluation

Student: [REDACTED] **DOB:** [REDACTED] **Age:** 10 years
Grade: 4th
School: PATH
Parent(s)/Caregiver(s): [REDACTED], mother
Evaluator: Julia Grover-Barrey, OTR/L AZ License #1050

Student History and Present Narrative:

[REDACTED] lives with adoptive mother and father and has a younger sister. [REDACTED] was reported to have been adopted at birth, with a family history of ADHD and dyslexia. Current diagnoses: ADHD – combined type, dyslexia, dysgraphia and dyscalculia. He is taking a low dose of Adderall and guanfacine for his ADHD. He is currently taking magnesium and omega 3 fatty acid supplements. He is currently physically healthy. As a younger child Josiah had chronic strep throat, and has a history of tonsillectomy and adenoidectomy at age 4 ½ years.

[REDACTED] has a history of sleep issues; however, this has improved with magnesium supplementation, and he occasionally takes melatonin. He is a picky eater with appetitive issues. He is reported to have no auditory hypersensitivity, but some tactile seeking for soothing. He plays well with friends and is reported to have a sweet disposition, but has “big emotion”, although he recovers quickly.

[REDACTED] is reported to have difficulties with learning, ie. reading, writing and maths. He has been working with a dyslexia specialist. It was

reported he is currently reading at a 1st grade level. He has had vision therapy in the past.

██████ reported he enjoys playing outside with his animals. Despite learning it is reported he really enjoys school.

Family Objectives: For learning to become easier and for ██████ to achieve some self-regulation.

Occupational Performance Systems Review

Social Engagement/Communication: The social engagement system performance evaluation refers to how well a student is able to participate in a back-and-forth exchange of information with another person. How the student uses words and their body to communicate, establish personal boundaries, actively listen and actively filter are important aspects of navigating social encounters.

██████ *is very social, easily engaged in reciprocal style communication. Very appropriate social skills for his age.*

Motor Skills: Motor performance criteria will be based on what is age typical and developmental in nature. Does the student present with archetypal movement patterns and abilities, with integrated primitive reflexes and developed protective reflexes? Is the student able to isolate and coordinate their body parts and senses, as well as sustain effort for successful completion of age-appropriate motor tasks. Command of the physical body is essential for mental focus, optimal learning, and the ability to self-regulate.

Dominance —

(Brain hemisphere dominance is determined by hand dominance. Hemispheric dominance is the opposite side of the dominant hand. For instance, if someone is R hand dominant, they are L hemisphere dominant. It is preferable to have senses processed in the dominant hemisphere for ease of processing and ease of skill production. If senses are processed in the nondominant hemisphere there is lag time to process and act on information, thus we want to see a solid hand and hemisphere dominance emerging. Ideally dominance of hand, foot, eye, and ear should be on the same side, otherwise the student may have mixed dominance pattern putting them at a disadvantage for optimal learning.)

██████ *has solid L hemisphere dominance with R hand, R foot and R eye dominance. Validated in several different ways. Ear dominance not tested secondary to validity issues.*

Reflexes –

(Retained primitive reflexes get in the way of progression towards command of the physical body and production of age-appropriate skills. Retained primitive reflexes and undeveloped protective reflexes block readiness for higher cognitive demand, especially academics and self-regulation. Reflex development and integration are objective signs of overall neurological maturity of the student.)

All developmental protective hand reflexes for grasping, supporting, and pulling were all observed to be working for [REDACTED]. He demonstrated a mild retained (+) ATNR – asymmetrical tonic neck reflex and mild retained (+) STNR – symmetrical tonic neck reflex. All other primitive reflexes were observed to be integrated.

Gross Motor Skills –

(Muscle tone and activation, posture, stability in standing and sitting impact the student's ability to sustain and successfully complete tasks.)

All gross motor skills were noted to be age appropriate. No tonal abnormalities demonstrated. [REDACTED] was noted to have a slouched seated postural and had mild difficulties fully achieving postural extension pose but had no difficulty with postural flexion pose. Center of gravity was noted to be in anatomic position. [REDACTED] demonstrated functional activity tolerance and brought appropriate arousal to activity performance during this evaluation.

Motor Coordination and Balance –

(The ability to move in 3D patterns, crossing from one side of the body to the other and moving in an automated fashion are important for skills production, fluidity of movement and mental flexibility.)

Functional seated and standing balance. Able to hold static positions on one foot. He demonstrated ability to cross midlines with hands and feet. He had slight difficulty with finger to nose coordination but was able to perform accurate fingertip approximation. He had slight difficulties with reciprocal hand movement patterns but was able to synchronize bilateral finger tapping and synchronizing arm and leg patterns. Ball skills were excellent for homologous and homolateral patterns.

Fine Motor Skills –

(Handedness is the biggest determinant of hemispheric dominance and hand use plays a significant role in how we express ourselves. Skilled use of our hands leads to successful and accurate completion of tasks which positively fuel our motivations, but if age-appropriate manual skills are lacking frustration and avoidance patterns ensue.)

Solid R hand dominance noted. Changed grasp while performing writing or drawing tasks, however full mature prehensile grasp was observed. Reduced fluidity to handwriting, although consistent with size and spacing. He consistently reverses “b” “d”, as well as 9’s and 5’s. Reduced accuracy for geometric forms. Had difficulty completing inverted triangle. He is consistent with using R hand for fine motor tasks and demonstrated ability to use both hands cooperatively at the midline of the body. [REDACTED] had difficulty drawing consistent sized circles to the L of the midline, but increased ease with more accuracy on the R hand side of the page.

Ocular Motor Skills –

(Movement and focus of the eyes support the work of the hands, as well the student's ability to sustain attention to task. The eyes need to work together, tracking across all midlines and to all quadrants smoothly, as well as move independently from the head.)

All ocular motor skills were observed, however slight eye teaming deficit observed.

Visual Perceptual Skills: These skills reflect the brain's ability to make sense of and process visual input from the environment. Poor visual perception hinders independence in self-care activities, proficiency in reading and writing, and limits creative abilities.

Eye teaming deficit and perceptual motor difficulties may interfere with fully developed visual perceptual skills.

Sensory Processing Skills: These skills are related to how the brain organizes and acts upon sensory information coming in from the environment. If sensory processing is happening in typical fashion student will have typical responses, but if the brain is unable to make sense of incoming sensations and organize them, output will be atypical. These atypical outputs are observable, replicable and predictable.

██████ did not demonstrate any difficulties during the evaluation leading to objective evidence of sensory processing difficulties, however tactile seeking reported during intake interview and Dx of ADHD would be indicators of this being so.

Executive Functions: Are a collection of cortical skills requiring top-down control. These skills consist of working memory, mental flexibility, problem solving, meeting the demands of the environment, sustaining focus, and resisting temptations there to sidetrack us.

██████ demonstrated appropriate arousal and activity level for meeting the demands of the testing. He demonstrated appropriate visual attention, working memory and visual memory during task performance. He was able to complete RAN (rapid automated naming) for letters and numbers well, however, was very slow during RAN for objects. During RAN for lower case letters he consistently named "d" "b". ██████ stayed in testing positions without need for prompting or support.

Summary of Findings:

██████ is presenting with mild ocular motor, mild perceptual motor, and mild retention of primitive developmental reflexes, which all interfere with automation of reading and writing. RAN for objects was low and reversals

of letters was consistent. Lack of full tactile development is suspected based on reports, diagnoses and history.

Recommendation(s):

- 1. Use of sound project soundscapes for temporal lobe synchronization and regulation during reading and or other homework 5 days per week for a minimum of 20 minutes. Further discussion pending.*
 - 2. Once weekly In-Tuned® lessons for a minimum of 8 weeks is recommended to work on tactile development, visual perceptual skills, eye teaming, integration of retained reflexes, fluidity and automation of reading and writing skills.*
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February 8th, 2024

Date

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