Assure
the Best
for your Baby’s
Physical Development

Pathways Awareness®
Parents’ Stories

Birth
Abby was born full term and had difficulty with feeding, low muscle tone and head control. At our first visit with our family physician, she was diagnosed with a chromosomal abnormality and referred immediately for physical and speech therapy. Abby improved dramatically in her movement and speech skills. Now, at age 16, she is a happy, active teenager. We are so grateful to our family physician for the early referral to pediatric physical and speech therapy.

James and Brenda A.

2-3 Months
Jeffrey was born at 42 weeks following an uneventful pregnancy. At three months, he could not push up on his arms and had difficulty holding his head up when placed on his tummy. We shared our concerns with our pediatrician who referred us to a developmental-behavioral pediatrician. Jeffrey is now 10 months old and although he does not have a definite diagnosis, he can push up on his arms from tummy lying and get on his hands and knees. We know that he is getting the help he needs.

Robert and Cindy P.

4-5 Months
Rachel was a breech baby and experienced meconium aspiration at birth. By age four months she was not holding her head up or using her hands. Our pediatrician referred us to our state’s Early Intervention program so Rachel could learn better physical movement. Now at age four and a half, she is learning to walk, attends our neighborhood school and is maximizing her potential.

Frank and Jenni S.

6-7 Months
Jason, who was eight weeks premature, was always difficult to diaper. His legs were stiff and difficult to get apart. At six months of age, he arched backward whenever we tried to place him in sitting. At eight months, he could still not sit by himself. Our pediatrician referred him to an Early Intervention program that includes physical therapy. Jason is now learning to walk by himself.

Larry and Pam R.

8-9 Months
Matt, the second of twins, refused to be placed on his tummy. He also would not take any weight on his feet, even at nine months of age, while his twin brother was walking around furniture in our living room. Our pediatrician referred us to a developmental-behavioral pediatrician and Early Intervention services. Matt began physical therapy at nine months of age. He took his first steps at fifteen months. He may no longer need treatment by his second birthday.

Mike and Terry S.

10-12 Months
Christopher was born five weeks early and was in the hospital two weeks before coming home. During his first year of life, we began to notice that he did not use his right hand as often as his left. As he began to pull to stand, his right leg lagged behind. In standing he leaned toward the left side and dragged the right leg when walking around furniture. At eleven months, our pediatrician prescribed physical and occupational therapy. Now, at three years of age, Christopher is walking.

Bob and Sue D.
**Typical Speech Development***

**BY 3 MONTHS**
- Sucks and swallows well during feeding
- Quiets or smiles in response to sound or voice
- Coos or vocalizes other than crying
- Turns head toward direction of sound

**BY 6 MONTHS**
- Begins to use consonant sounds in babbling, e.g. "dada"
- Uses babbling to get attention
- Begins to eat cereals and pureed foods

**BY 9 MONTHS**
- Increases variety of sounds and syllable combinations in babbling
- Looks at familiar objects and people when named
- Begins to eat junior and mashed table foods

**BY 12 MONTHS**
- Meaningfully uses “mama” or “dada”
- Responds to simple commands, e.g. “come here”
- Produces long strings of gibberish (jargoning) in social communication
- Begins to use an open cup

**BY 15 MONTHS**
- Vocabulary consists of 5-10 words
- Imitates new less familiar words
- Understands 50 words
- Increases variety of coarsely chopped table foods

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***Remember to correct your child’s age for prematurity.***

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**Typical Physical Development***

While lying on their back...
- Visually tracks a moving toy from side to side
- Attempts to reach for a rattle held above their chest
- Keeps head in the middle to watch faces or toys

- Pushes up on arms
- Lifts and holds head up

- Uses hands to support self in sitting
- Rolls from back to tummy
- While standing with support, accepts entire weight with legs

- Sits and reaches for toys without falling
- Moves from tummy or back into sitting
- Creeps on hands and knees with alternate arm and leg movement

- Pulls to stand and cruises along furniture
- Stands alone and takes several independent steps

- Walks independently and seldom falls
- Squats to pick up toy

**Typical Play Development***

While lying on their back...
- Visually tracks a moving toy from side to side
- Attempts to reach for a rattle held above their chest
- Keeps head in the middle to watch faces or toys

- Reaches for a nearby toy while on their tummy

While lying on their back...
- Transfers a toy from one hand to the other
- Reaches both hands to play with feet

- In a high chair, holds and drinks from a bottle
- Explores and examines an object using both hands
- Turns several pages of a chunky (board) book at once
- In simple play imitates others

- Finger feeds self
- Releases objects into a container with a large opening
- Uses thumb and pointer finger to pick up tiny objects

- Stacks two objects or blocks
- Helps with getting undressed
- Holds and drinks from a cup

* Remember to correct your child's age for prematurity.
Signs to Watch for in Physical Development*

- Difficulty lifting head
- Stifflegs with little or no movement

- Pushes back with head
- Keeps hands fisted and lacks arm movement

- Rounded back
- Unable to lift head up
- Poor head control

- Difficult to bring arms forward to reach out
- Arches back and stiffens legs

- Uses one hand predominately
- Rounded back
- Poor use of arms in sitting

- Difficulty crawling
- Uses only one side of body to move

- Difficulty getting to stand because of stifflegs and pointed toes
- Only uses arms to pull up to standing

- Sits with weight to one side
- Strongly flexed or stiffly extended arms
- Needs to use hand to maintain sitting

- Unable to take steps independently
- Poor standing balance, falls frequently
- Walks on toes

* Remember to correct your child's age for prematurity.
What Every Parent Should Know
It is important for you to track your child’s physical and speech development. Our unique chart allows you to do just that. Remember to trust your instincts. You know your child best. If you feel your baby is developing at a different pace, seek help. All children can learn. Early detection is the BEST prevention.

About Pathways Awareness
Established in 1988, Pathways Awareness is a national program of the Pathways Foundation, a 501 (c) (3) Not-For-Profit Public Foundation. Pathways is dedicated to raising awareness about the gift of early detection and the benefit of early therapy for infants and children with early motor delays to assure their best. Our activities are based upon the Pathways Awareness Medical Round Table, leading physicians, clinicians, nurse practitioners, and lay advisors.

Pathways Awareness
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John F. Sarwark, M.D., FAAP, FAACPDM, FAAOS
Committee
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Questions? Please call our “parentanswered” toll-free number, or email us. We will send you more information and refer you to therapists in your area.

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1-800-955-CHILD (2445)
TTY 800-326-8154
e-mail: friends@pathwaysawareness.org
www.pathwaysawareness.org

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