

OT PRE-REFERRAL FORM: INTERVENTION STRATEGIES

Compiled by Claudia Ginsberg-Brown, MS, OTR and Theresa Schmotzer, OTR

Student name : _____
 School of attendance : _____
 Grade and Placement : _____

Current support services : _____
 Form completed by : _____

Please mark an X in the box corresponding to the interventions that you have implemented consistently for a period of 6 weeks. Feedback about the outcome of using interventions can be written in the COMMENTS box following each section.



POOR POSTURE/ FALLS OUT OF CHAIR/ SLUMPS SIGNIFICANTLY (all ages)

It is important that students that present with this type of problem have maximal opportunities to engage in physical gross motor play and activities that promote strength and endurance (climbing, swimming, tumbling, martial arts, etc).

	<p>Proper positioning: adjusted the seat and table height as follows:</p> <ul style="list-style-type: none"> • Soles of the feet should touch the ground: can adjust the height of the table legs or place a phone book wrapped in packing tape/duct tape and using Velcro to secure to the floor. • Desk height should be placed 2" above elbow position when child's arms are at his/her side.
	<p>Allowed student to use an alternatives to conventional seating such as:</p> <ol style="list-style-type: none"> 1. Standing to do work. 2. Sitting on a therapy ball with a stand (should be closely supervised). 3. Using a "sit n' move cushion (inexpensive alternatives with a similar effect include a camping cushion or a partially inflated beach ball).
	<p>Facilitated upright posture by having the child work on a slanted surface such as an easel or slant board (can be made by using a 3" binder or cardboard box cut at angles with non-skid material underneath). <i>*OT Department can provide a sample or written instructions on how to make this slant board.</i></p>
<p>COMMENTS:</p>	