

## IM PEDIATRIC BEST PRACTICES SELF STUDY POST-TEST

1. What is the recommended timeframe for IM interventions with a pediatric client?
  - a. 12 weeks
  - b. 15 weeks
  - c. 12-15 weeks
  - d. It varies, dependent upon the individual treatment plan
2. True or False : An infant of 18 months is too young to participate in a modified IM program
3. What signs would indicate distress during IM activities?
  - a. oral-motor overflow, focused attention, sweating, breath-holding
  - b. increased fidgeting, sweating, pacing, improved articulation
  - c. oral-motor overflow, sweating, decreased attention, increased verbal agitation
  - d. increased fidgeting, decreased attention, improved breath control, skin pallor
4. True or False : You may introduce IM tasks gradually, then build up a routine so that the child comes to expect IM as part of their session - just as they would any other of your discipline-specific activities.
5. True or False: Group treatments may be used for all IM students
6. The following may be used as motivational strategies with the pediatric population:
  - a. verbal praise; stickers; preferred activities
  - b. bubbles; high five; rest breaks
  - c. turn taking; edible treats; control choices
  - d. all of the above
7. The following are good choices to help calm a student:
  - a. decreased volume
  - b. a large work space
  - c. light pressure during activities
  - d. bright lighting
8. True or False: Multiple triggers can be a useful tool for IM modifications.
9. Which of the following can you incorporate into your IM sessions?
  - a. music
  - b. whole body movements/rhythm experiences
  - c. auditory processing games
  - d. all of the above
10. Adding specialized (pediatric) IM programs to your practice can offer you:
  - a. increased referral base
  - b. teaching opportunities
  - c. career development
  - d. all of the above