



IM Pediatric Best Practices Course

POST-TEST ANSWER KEY

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 can 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**