

**PSYCHOMOTOR DEVELOPMENT OF CHILDREN. ASSESSMENT OF PSYCHOMOTOR
DEVELOPMENT OF CHILDREN. PECULIARITIES OF THE NERVOUS SYSTEM DISEASES IN
CHILDREN**

Academic discipline «Pediatric Propedeutics»
Self-study guide for the 3rd year
English medium students

**ПСИХОМОТОРНИЙ РОЗВИТОК ДІТЕЙ. ОЦІНКА ПСИХОМОТОРНОГО
РОЗВИТКУ ДІТЕЙ. ОСОБЛИВОСТІ НЕРВОВОЇ СИСТЕМИ У ДІТЕЙ.**

З дисципліни «Пропедевтика педіатрії»
Методичні вказівки
до самостійної роботи студентів 3-го курсу
медичного факультету

МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
Харківський національний медичний університет

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Затверджено
Вченою радою ХНМУ
Протокол № від

Харків
ХНМУ
2016

Psychomotor development of children. Assessment of the psychomotor development of children. Peculiarities of the nervous system diseases in children: self-study guide for the 3rd year English medium students / compiled by.: V.A Klymenko., T.V. Sirenko, J.V Karpushenko – Kharkiv: KhNMU, 2016. – 16 p.

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Психомоторний розвиток дітей. Оцінка психомоторного розвитку дітей. Особливості нервової системи у дітей: метод. вказ. до самост. роботи студентів 3 курсу медичних факультетів / упор. В.А.Клименко, Т.В. Сіренко, Ю.В.Карпушенко. – Харків, ХНМУ, 2016. – 16 с.

Упорядники: Клименко В.А.
Сіренко Т.В.
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Contents

As biologic maturation progresses there is a concurrent development of behaviors, which increasingly allows the infant to respond to and cope with the environment. These adaptive behaviors can be classified into various categories: motility, statics, sensory reactions, speech, mental development. The acquisition of skill in each area occurs in an orderly sequence, following the usual cephalocaudal-proximodistal laws.

Knowledge of the developmental sequence allows the doctor to assess normal growth as well as minor or abnormal deviations. Knowledge of developmental milestones helps parents to gain realistic expectations of their child's ability and provides guidelines for suitable play and stimulation. Emphasizing the child's developmental age rather than chronologic age strengthens the parent-child relationship by fostering trust and lessening frustration.

Specific goals

- To know the basic criteria and parameters of psychomotor development of children of all ages.
- To explain the features of psychomotor development of newborns.
- To assess psychomotor development of children of the 1st year of life in months.
- To assess psychomotor development of prepreschool children, preschool, young and senior school age
- To identify factors, which could cause changes in psychomotor development

To know:

1. The basic criteria and parameters of psychomotor development of children of all ages
2. The features of psychomotor development of newborns.
3. Psychomotor development of children of the 1st year of life.
4. Psychomotor development of prepreschool children, preschool, young and senior school age.

To be able to:

1. To demonstrate the technique inspection of psychomotor development.
2. To interpret the results of clinical investigation (statics, motility, sensory reactions, speech, mental development).
3. To conduct syndromic diagnosis of the nervous system diseases of children.

1. Basic skills and knowledge, necessary for the topic study (intradiscipline integration)

Name of the previous discipline	Skills
1. Normal human anatomy	Morphofunctional peculiarities of the nervous system of children in different age.
2. Normal physiology	To know the features of functioning of the nervous system of children in different age.
3. Pathophysiology	To identify pathophysiological processes which arise in nervous system in children.
3. Biochemistry	To have knowledge of techniques of carrying out some laboratory investigation at pathology of nervous system.
4. Care for children	Nursing of children with disease of the nervous system.

Graphical structures of individual issues of the topic.

The list of study materials:

Main:

1. Propaedeutics of Paediatrics: Manual for foreign students / V. A. Fjoklin, V. A. Klymenko, O. M. Plakhotna, T. V. Sirenko, A. I. Kojemiaka, O. V. Sharikadze. – Kharkiv: 2010. – 356 p.
2. Kapitan T. Propaedeutics of children's diseases and nursing of the child / T. Kapitan. – The state cartographical factory, 2006. – 734p.

Additional:

1. Nelson textbook of pediatrics.—19th ed./ [edited by] Robert M. Kliegman... [at. ol], p. SM
2. Ghai O.P. Essential pediatrics (fourth edition). – New Delhi, India: Interpint, 1996.—476 p.
3. Gupte S. The short textbook of pediatrics, 8th edition. – New Deli, India.: Iaypee Brthe others. Medical publishers (P) hTD, 1998. – 617 p.
4. Bickley L.S., Hockelman R.A. Physical examination and History Taking. – Philadelphia, New York, Baltimor.: Lippincott, 1999. – 789 p.

Test questions to the class:

1. What the notion of psychomotor development includes?
2. What are the criteria of mental development of children?
3. What features of motility of newborns?

4. What signs of static functions do you know?
5. What permanent reflexes do you know?
6. What groups of transitory reflexes do you know?
7. Name the basic oral reflexes.
8. Name the basic spinal reflexes.
9. Name the basic myeloencephalic reflexes.
10. Assessment of psychomotor development of the child comparatively to the age.

Tests for self-control:

1. The child begins to perform simple actions (hello, by-bye) at the request of an adult at the age of:
 - a) 6 month
 - b) 7 month
 - c) 8 month
 - d) 10 month
 - e) 11 month.

2. Physiological hypertonia of the legs flexors disappears at the age:
 - a) 1 month
 - b) 2 month
 - c) 4 month
 - d) 6 month
 - e) 8 month

3. Which of the following reflexes may be accompanied by involuntary urination and defecation?
 - a) Robinson's reflex
 - b) Bauer's reflex
 - c) Moro's reflex
 - d) Peres's reflex
 - e) Kussmaul's reflex

4. What is characteristic of the emotional status of a newborn?
 - a) Positive emotions
 - b) Indifference
 - c) Negative emotions
 - d) Aggression
 - e) Passivity

5. Moro reflex disappears to the
 - a) 2nd month

- b) 4nd month
 - c) 6nd month
 - d) 8nd month
 - e) 10nd month
6. What the child of 6 months age should be able to do?
- a) Stand without supporting
 - b) Walk with supporting
 - c) Good crawl
 - d) Well sit
 - e) Try to sit
- 7 . The development of what analyzer to the three months age has already completed ?
- a) Taste
 - b) Vestibular
 - c) Olfactory
 - d) Optic
 - e) Hearing
8. What is typical for a newborn baby?
- a) loud sounds speech
 - b) “revival” complex
 - c) absence of hypertonia of flexors
 - d) visual concentration
 - e) chaotic movements of limbs
9. What is the food transitory reflex?
- a) Robinson’s
 - b) Bauer’s
 - c) Babkin’s
 - d) Swallowing
 - e) Galant’s
10. Formation of the grasping reaction begins at
- a) newborn period
 - b) the 6 month age
 - c) the 4 month age
 - d) the 2 month age
 - e) the 3 month age
- 11 . Kernig’s reflex disappear to the age
- a) 2 month
 - b) 3 month

- c) 4 month
- d) 6 month
- e) 7 month

12. At what age a child takes the toy itself and keeps it?

- a) 2 month
- b) 3 month
- c) 4 month
- d) 5 month
- e) 7 month

13. In 2 months the child is able to

- a) to find the object anywhere by itself
- b) briefly sounds (u-u-u, a-a-a)
- c) laugh loudly
- d) sit
- e) crawl

14. To what age after the birth the "emrbrionic pose" a child will continue to?

- a) 3 month
- b) 1 month
- c) 2-3 weeks
- d) 1st week
- e) 6 month

15. Specify the age when a child appears babble

- a) at the 1st week of life
- b) at he 1st month of life
- c) after 3rd month
- d) after 8 th month
- e) after 4rd month

16. Motility of the newborn has the following features

- a) flexors muscle tone is increased
- b) muscle tone is reduced
- c) chaotic movements
- d) purposeful movement
- e) spasm of muscles

17. Physiological nystagmus disappear at the age of:

- a) 2 weeks
- b) 2,5 month
- c) 1,5 month

- d) 2 month
- e) 1 month

18. Upper Landau reflex appears to

- a) 2-3 month
- b) 4-5 month
- c) 6-7 month
- d) 8-9 month
- e) 10-12 month

19. The child turned on his abdomen at the age of

- a) 2 month
- b) 4 month
- c) 5 month
- d) 6 month
- e) after 6 month

20. The child begins to walk without supporting at the age of

- a) 10 month
- b) 11 month
- c) about 1 year
- d) 15 month
- e) 2 years

Tasks for individual work of students:

Work at the bedside, collection of complaints, medical case history, clinical examination of the patient.

Standards of responses to tests:

1-E; 2- A; 3-D; 4-B; 5- B; 6-D; 7- A; 8- E; 9- C; 10- E; 11- C; 12- C; 13- B; 14- B; 15- B; 16- C; 17- A; 18- B; 19- C; 20- C.

The **maximum number of points** which may be consequently obtained by students is 200 points; this includes 120 points for current educational activity and 80 points for the final lesson. *Current educational activity of students* is controlled during practical classes according to specific goals in the course of each practical class as well as during self-training in the hospital department. It is recommended to apply the following means of diagnostics of the students' level of readiness: control of practical skills, solving cases and test control of theoretical knowledge.

The current assessment of students on respective topics is conducted in the traditional 4-point grade scale ("excellent", "good", "satisfactory" and "unsatisfactory") with further conversion into a multiscore scale.

The grade "Excellent" is given when the student knows the program in toto, illustrating the answers with various examples; gives clear and comprehensive answers without any hints; delivers the material without any inaccuracies or errors; performs practical tasks of a different degree of complexity.

The grade "Good" is given when the student knows the whole program and understands it well, gives correct, consistent and structured but not completely comprehensive answers to questions, although he is able to answer additional questions without mistakes; solves all cases and performs practical tasks experiencing difficulties only in the most complex situations.

The grade "Satisfactory" is given to the student based on his satisfactory level of knowledge and understanding of the entire subject. The student is able to solve modified tasks with the help of hints; solves cases and applies practical skills experiencing difficulties in simple cases; is unable to deliver a consistent answer, but answers direct questions correctly.

The mark "Unsatisfactory" is given when the student's knowledge and skills do not meet the requirements of the grade "satisfactory".

Given the number of practical classes the grades are converted into the multiscore scale as follows:

The mark "Excellent" – 72-80 scores

The mark "Good" – 60-71 scores

The mark "Satisfactory" – 50-59 scores

The mark "Unsatisfactory" – 0 scores

Навчальне видання

**Анатомо-фізіологічні особливості, методи обстеження та семіотика захворювань
нервової системи у дітей**

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Відповідальний за випуск: Клименко В.А.

Комп'ютерна верстка

Ум. друк. арк. ____. Тираж _____ прим. Зам. № ____.

Graphological structure to the topic “Psychomotor development of children. Assessment of the psychomotor development of children”.

