



## CHILDREN'S PHYSIOTHERAPY GUIDANCE 2018 (for pre-school age)

Bow Legs	Physiotherapy NOT INDICATED, exercise does not correct the problem	If severe / painful / asymmetrical see GP to check for other diagnoses
		Staheli leaflet - What parents should know
Curly Toes	Physiotherapy Referral NOT INDICATED Normal variant that should resolve,	Staheli leaflet - What parents should know
		If causing symptoms refer to Podiatry
Flat Feet	ASYMPTOMATIC- referral NOT INDICATED	Refer to podiatry only if over 4 years and has pain in feet or lower limbs
		Or blistering or stiffness in feet
		Give APCP Flat Feet leaflet
In Toeing / Out toeing	ASYMPTOMATIC- referral NOT INDICATED	Staheli leaflet - What Parents should know
	Generally resolves spontaneously as gait matures (by age 8)	Refer to physiotherapy if child has walked for 6 months but still has an asymmetrical style
	During first 6 months of walking gait may be asymmetrical	
Knock Knees	Physiotherapy NOT INDICATED, normal variant -exercise does not correct the problem	If severe / painful / asymmetrical see GP (Refer on to Orthopaedics)
		Staheli leaflet - What parents should know
Pes Cavus	Where arch of foot is very high, it is rare but could be related to neurological pathology	Refer to Paediatrician or Orthopaedics
Tip Toe Walking	Intermittent tip-toes:	Refer to physiotherapy if unable to stand with heels down and fee
	Give BHC tip-toe leaflet for under 5's	flat, if asymmetrical, or if associated with developmental delay
	Consider referral to paediatrician re: neuro-developmental concerns	

Hypermobility	Asymptomatic - referral NOT INDICATED	APCP Hypermobility leaflet
		Symptoms – such as joint pain or significant delayed motor development - YES REFER
Gross Motor Delay	Advise against baby walkers / door bouncers	Refer to physiotherapy if :
	Use a rolled up towel under the chest for supervised tummy time	<ul> <li>Poor head control at 3 months</li> </ul>
	Put a mat on the floor if hard flooring	<ul> <li>Not sitting securely at 10 ths</li> </ul>
		<ul> <li>Not pulling self to stand 15 mths</li> </ul>
		<ul> <li>Not walking indep at 20 months</li> </ul>
		<ul> <li>Has poor motor sequencing</li> </ul>
		<ul> <li>Has asymmetrical movements</li> </ul>
		<ul> <li>Older child with delayed skills compared to peers</li> </ul>
Positional Talipes	Both feet move freely but might posture inwards / outwards	Give BHC Positional Talipes leaflet
		If not resolving after 6-8 weeks refer to physiotherapy for assessment
Structural Talipes	Fixed foot deformity, not correctable	GP to refer to King's College Hospital for Ponsetti clinic via Orthopaedic team
Obstetric Brachial Plexus Palsy	Yes – refer for assessment ASAP	Specialist advice needed from Physiotherapy
Plagiocephaly /	Referral NOT INDICATED unless combined with torticollis-	APCP Tummy time leaflet
Moulded Head	restricted neck movement	GOSH Plagiocephaly leaflet
Torticollis	Restricted neck movement/ persistent head tilt	Refer promptly to physiotherapy
		Encourage neck movements to the other side
		Give tummy time leaflet

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