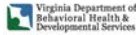


April 7, 2020 • Talks on Tuesdays Webinar

Early Intervention and Feeding: When to Seek a Specialist PART I

PRESENTED BY

Kim Geissinger,
OTR/L



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TODAY'S PRESENTER



Kim Geissinger, OTR/L

PART 2 PRESENTERS

Jessica

Stephanie



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EARLY INTERVENTION

...”supports and services to infants and toddlers from birth through age 2 who are not developing as expected or who have a medical condition that can delay normal development. Early Intervention supports and services focus on increasing the child’s participation in family and community activities that are important to the family. In addition, supports and services focus on helping parents and other caregivers know how to find ways to help the child learn during everyday activities...”

HOW?

COACHING

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 Pull out your handouts.

Early Intervention and Feeding: When to Seek a Specialist - PART I

BIRTH-6 MONTHS

Typical Feeding	Atypical Feeding
Breast/bottle feeding average ~30 oz/day	Grotesque off-behavior
Efficient coordination (SIB)	Disorganized suck/SIB: coughing/choking
Age-appropriate growth	Poor weight gain/FTT
Responsive parenting/Good bonding	Archers, Cries, or refusal to feed
Breast/bottle feeding w/added punter ~6 months	Trouble latching during after feeding
Reflexes become integrated	>30 minutes to complete feeding
Happy spitter	Drinks better when asleep
Volume varies at different times in a day	Excessive anterior leakage
Drink more during growth spurts (8-8 weeks, 4 months)	Excessive vomiting

TIP Take away tip for children Birth - 6 months
Infants exclusively breastfed may need supplemental iron ~6 months

How can you help?
Encourage breastfeeding and/or bottle feeding 30 ounces per day

6 MONTHS-1 YEAR

Typical Feeding	Atypical Feeding
SIB resolved	Difficulty in SIB coordination
~30 ounces BM/formula per day	Poor postural control (adaptive seating)
Accept punter food by spoon	Delayed gross/fine motor skills
Begin self-feeding	Persistent gagging/choking
Bottle feeding independently	Drinking <10 ounces per day
Begin soft solid foods (~10 months)	Delayed transition to punter/soft solid foods
Exposure to a variety of healthy foods	Eating only when distracted
Expandable mealtimes	Crying/laughing/abnormal distortion
Become part of family meal	Excessive spit-up/refusal at mealtimes

TIP Take away tip for infants 6 months-1 year
Puners/soft solid foods should not be a means of nutrition; this should be supplemental to BM/formula

How can you help?

- Support breastfeeding/bottle feeding 30 ounces per day
- Embrace exploration/curiosity
- 2 small fun meals per day to introduce variety of fruits, vegetables, grains, carbohydrates
- 1 snack time meal to encourage self-feeding
- Turn off distraction

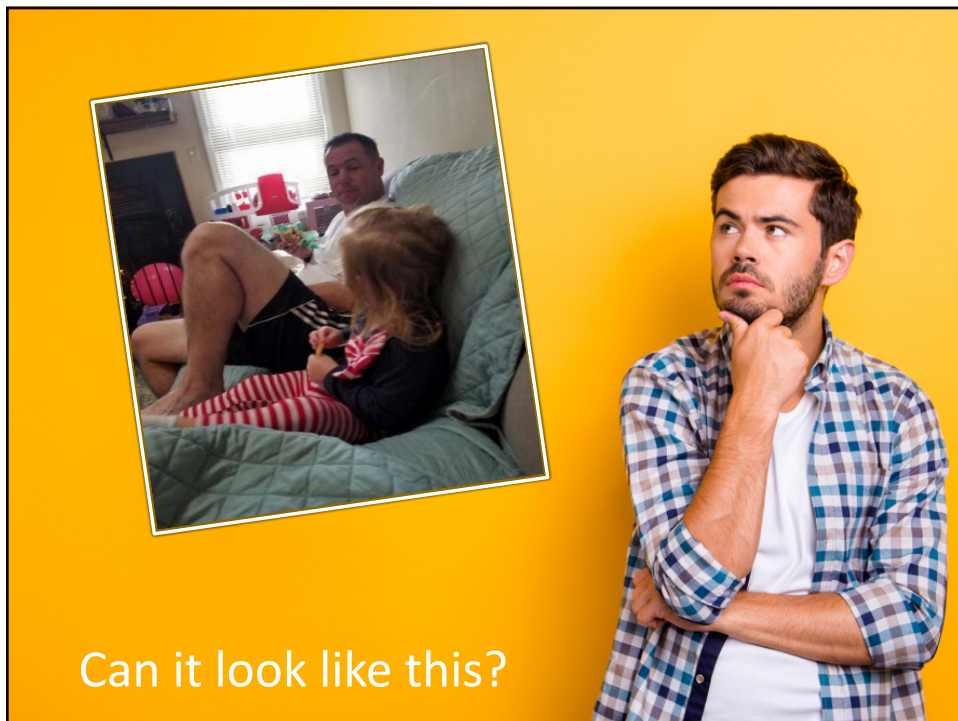
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What does feeding look like to you?

Share your response in the chat box.



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Can it look like this?

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QUESTION #1

A body's **FIRST** priority is feeding.



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QUESTION #1

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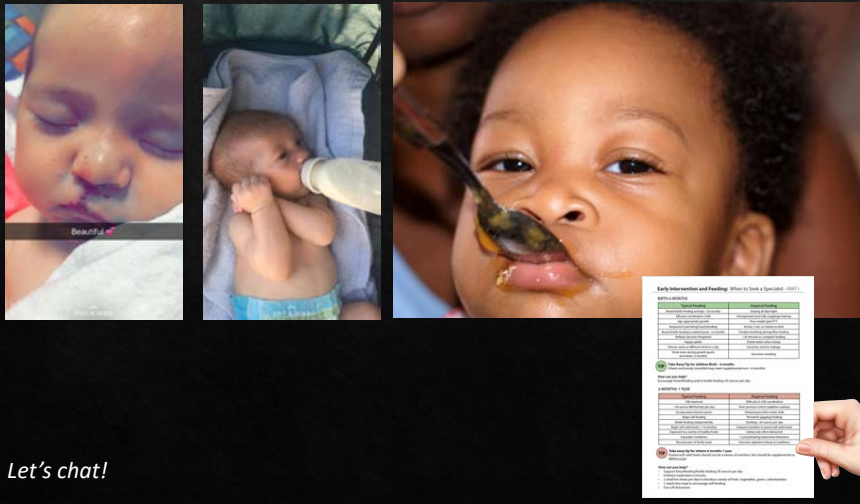
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What is **TYPICAL**?

BIRTH-6 MONTHS




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ATYPICAL

BIRTH-6 MONTHS



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ATYPICAL

BIRTH-6 MONTHS



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QUESTION #2

As an infant approaches
6 months, iron in breastmilk may
not be nutritionally sufficient.



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QUESTION #2

As an infant approaches
6 months, Iron in breastmilk may
not be nutritionally sufficient?



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[illegible]

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QUESTION #3

If a child is hungry enough,
he **will** eat.



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QUESTION #3

If a child is hungry enough,
he **will** eat.



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TYPICAL
1 - 2 YEARS



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ATYPICAL

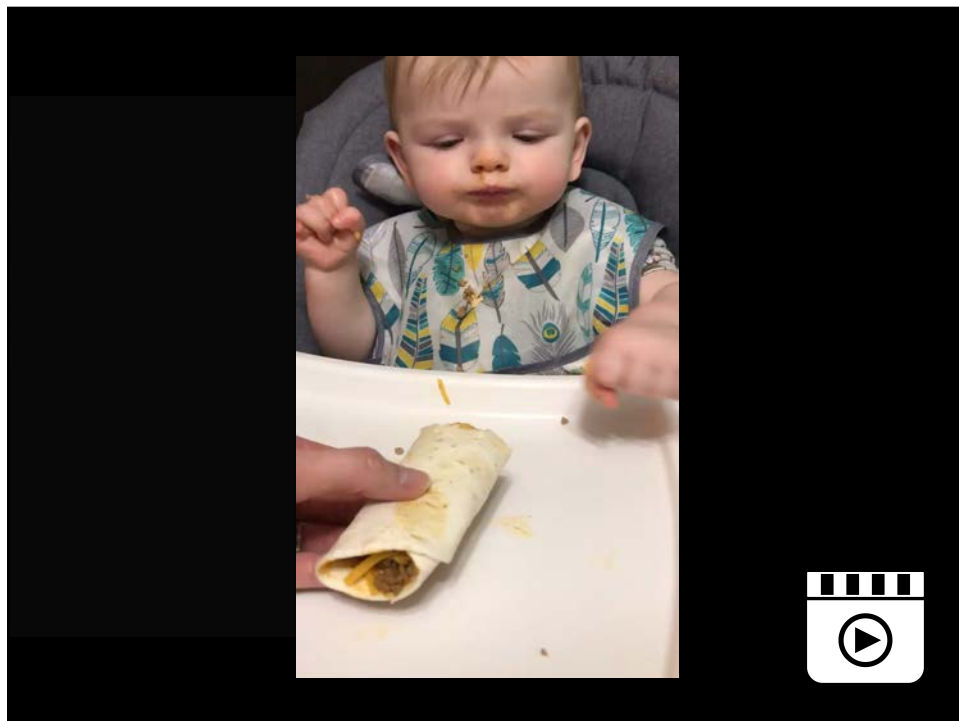
1 - 2 YEARS



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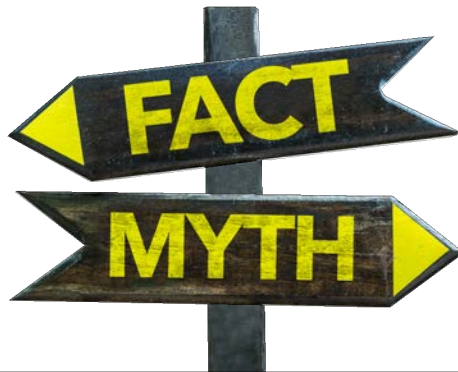
TYPICAL 2 – 3 YEARS



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QUESTION #4

If a child rejects a food,
he doesn't like it.



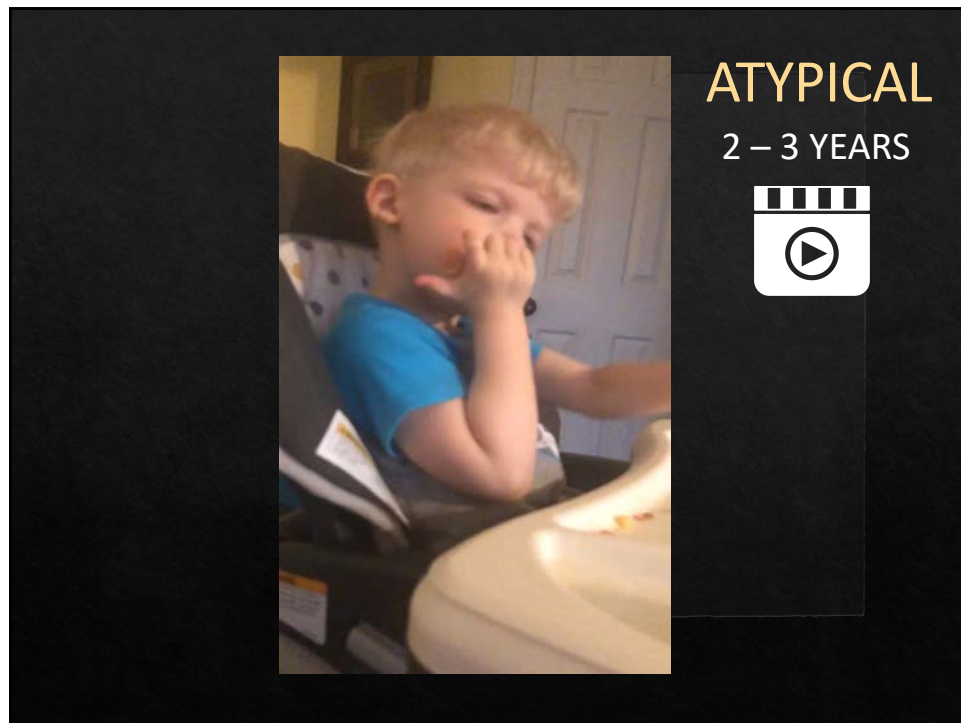
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QUESTION #4

If a child rejects a food,
he doesn't like it.



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What else is out there for feeding therapy?

Out-patient
Therapy

Inpatient
Feeding
Program

*Use your stamp tool to
make your selection.*

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Family Lead Goals



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JOIN US FOR PART 2 ON **MAY 5TH!**



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