

Occupational Therapy Services

Fine and Gross Motor Skills Development:

- Fine motor strengthening (ex. pencil grasping, scissors use and handwriting)
- Neurodevelopmental Facilitation Techniques
- Bilateral Coordination Skills and Balance
- Activities of daily living: dressing, feeding, grooming, fastener manipulation, utensil use
- Visual Motor Integration/Visual Perceptual Skills: Ocular Motility Skills/Vision Therapy

Sensory Integration Techniques:

- Attention and Organizational Skills
- Motor Planning and Praxis•Body Perception/Awareness in Space
- Frustration Tolerance/Coping Strategies/Emotional Regulation
- Sensory Defensiveness-Auditory/Tactile Sensitivities

Every child responds best to a unique, carefully-crafted treatment plan which the therapist creates. Pediatric therapists also teach children and their families about safety and home exercises, since improving physical function often requires daily practice. Providing expert consultation to school and daycare staff is often needed as well. These professionals support the family and child by coordinating care with other health care professionals and providing advocacy and social assistance when necessary.

At Kitsap Physical Therapy we have 6 locations with therapists who are certified and trained in treating a variety of pediatric services.

To schedule an appointment with one of our pediatric specialists, contact:

*Port Orchard (360) 895-9090
Miranda Morgan, PT, DPT*

*Poulsbo-North Kitsap (360) 779-3764
Megan Milyard, OTR/L
Brandon Escobar, MOTR/L*

*Silverdale (360) 613-1834
Katy Wingard, PT, DPT*

Pelvic Health Specialists

*Port Orchard (360) 895-9090
Megan Morris, PT, DPT, PHC*

*Poulsbo-Village (360) 779-3777
Kara Stadshaug, PT, DPT, CCT, PHC*

Post-Concussion Specialists

*Bremerton (360) 792-1015
Jennifer Edwards, PT, DPT, CSRS, AIB-VR/CON
Erin Jackson, MOTR/L, CSRS, AIB-VR/CON*

*Poulsbo-North Kitsap (360) 779-3764
Megan Milyard, OTR/L, AIB-VR/CON
Jackie Gfeller, PT, DPT, CGS, AIB-VR/CON*

kitsap
physical
therapy
AND SPORTS CLINICS

Pediatric Programs

*Neurology
Bed Wetting
Constipation
Post-Concussion
Sensory Integration
Fine and Gross Motor Skills*

Treatment

Pediatric physical and occupational therapists know the profound joy of helping children and their families achieve greater happiness under challenging circumstances. Therapists work to strengthen and promote a child's independence and integration at home, in school and in the broader community. Pediatric therapists have an impressive array of techniques to treat musculoskeletal problems and improve the mobility of children facing numerous health conditions such as:

- **Developmental Delay**
- **Sensory Integration Dysfunction**
- **Sensory Processing Disorders**
- **Autism Spectrum Disorders**
- **Cerebral Palsy and Neuromuscular Disorders**
- **Down Syndrome**
- **Learning Disabilities/Dysgraphia**
- **Infant Torticollis**
- **Toe Walking**
- **Post-surgical Issues**
- **Brain Injury**
- **Concussion**
- **Spina Bifida**
- **Post Cancer Treatment**
- **Scoliosis**

Therapy begins with an interview of the child and his/her family and a physical exam to diagnose the source of the child's movement difficulties. From there, the therapist guides and individualizes a treatment regimen. Physical and occupational therapists work together to improve the child's strength, range of motion, endurance, balance, coordination, gait, heart and lung endurance, and motor development.

Pelvic Health

TOILETING PROBLEMS

Toileting problems can lead to embarrassment and anxiety for both parent and child. Millions of children struggle with wetting accidents, and are often not getting the right help. Physical therapy is a positive, non-invasive treatment that can help your child gain control of and independence with bowel and bladder function.

DID YOU KNOW?

- 15-22% of children are affected by nighttime bedwetting (nocturnal enuresis).
- Children should have full bladder control by age 5.
- After age 5, healthy toileting frequency is between 3 and 8 times per day.
- Straining, painful urination, holding urine, and abnormal urinary urgency or frequency are common signs of toileting problems that can be treated by our pelvic specialists.

PLAY, TRAIN, IMPROVE!

Our goal is to make your child feel safe and have fun while at physical therapy. Treatment for toileting issues often includes:

- Biofeedback
- Muscle strengthening and/or stretching
- Muscle relaxation techniques
- Behavioral and diet modification
- Home exercise programs

COMMON PROBLEMS AND DIAGNOSES

- Bedwetting (nocturnal enuresis)
- Urinary incontinence (enuresis)
- Urinary retention
- Urinary frequency / urgency
- Vesicoureteral reflux
- Chronic constipation
- Bowel incontinence and/or inability to empty bowel (encopresis)

Post-Concussion

Most children recover from concussions, however, some children will have a delayed recovery. Our certified clinicians will work with patients to help improve function and return to normal activities.

Post-Concussion Treatment includes a comprehensive assessment of:

- Neuro-cognitive functioning, including:
 - Attention
 - Memory/working memory
 - Executive function
 - Visuospatial ability
 - Language/communication
 - Orientation
 - Motor/sensory functions
- Vestibular Assessment, including:
 - Special tests to help identify the cause of dizziness/vertigo symptoms
 - Ability to tolerate movement
 - Balance

Treatment will involve evidence-based interventions, conducted one-on-one with a certified clinician, and will include, as appropriate:

- Treatment of Benign Paroxysmal Positional Vertigo (repositioning of the otoconia (inner ear "crystals") in the canals)
- Balance training
- Cognitive training
- Aerobic exercise (studies have shown efficacy in treatment of symptoms (including cognitive deficits) with properly dosed aerobic activity)
- American Institute of Balance Vestibular-Cognitive Integration protocol
 - An integrated approach that addresses both vestibular and concussion management simultaneously, and includes longitudinal assessment as well as providing an objective measurement to assist in return to activity decisions
- Individualized home program similar to clinician-directed program that is safe for the patient to complete independently
- Frequent reassessment and adjustment of treatment plan as needed