<table>
<thead>
<tr>
<th>Course Information</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Course Title</strong></td>
<td>Pediatrics Rehabilitation</td>
</tr>
<tr>
<td><strong>Course Code</strong></td>
<td>OT 324</td>
</tr>
<tr>
<td><strong>Prerequisites</strong></td>
<td>OT112, OT215</td>
</tr>
<tr>
<td><strong>Time</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Place</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Credit Hours</strong></td>
<td>3 (2 theory; 1 lab)</td>
</tr>
<tr>
<td><strong>Course coordinator</strong></td>
<td>Dr. Mohammad S. Nazzal, PhD, OTR/L</td>
</tr>
<tr>
<td><strong>Office Location</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Office Phone #</strong></td>
<td></td>
</tr>
<tr>
<td><strong>E-mail</strong></td>
<td><a href="mailto:msnazzal@just.edu.jo">msnazzal@just.edu.jo</a></td>
</tr>
<tr>
<td><strong>Teaching Assistant(s)</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Course Description</th>
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<tbody>
<tr>
<td>This course aims to familiarize the students with the scope of occupational therapy theory and practice in working with children with special needs. The students will understand normal and abnormal development of children and how it relates to occupational therapy interventions. The course also provides the students with practical training skills in this area (both pre-clinical laboratory and actual OT sessions observations). In the lab section of this course, students will learn how to integrate theory into practice when dealing with children with special needs and their families; specifically, in terms of evaluation and treatment.</td>
</tr>
</tbody>
</table>
Textbook

Title: Occupational Therapy for Children
Author(s): Jane Case-Smith
Publisher: Mosby
Year: 2010
Edition: 6th (5th edition is acceptable, 6th edition is preferable)

Other references
#1: Pediatric skills for Occupational Therapy Assistants (2nd Ed.), J. W. Solomon & J. C. O’Brien

Assessment

<table>
<thead>
<tr>
<th>Assessment</th>
<th>Expected Due Date</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Exam (theory)</td>
<td></td>
<td>20%</td>
</tr>
<tr>
<td>Midterm Lab exam</td>
<td>TBA</td>
<td>20%</td>
</tr>
<tr>
<td>Second exam (theory)</td>
<td></td>
<td>20%</td>
</tr>
<tr>
<td>Final lab exam</td>
<td>TBA</td>
<td>10%</td>
</tr>
<tr>
<td>Final Exam (Theory)</td>
<td>Final week of examinations</td>
<td>30%</td>
</tr>
</tbody>
</table>

Learning Outcomes: Upon successful completion of this course, students will be able to

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>1</td>
<td>Explain how individual systems and the environment contribute to a child’s occupational performance in the first 10 years of life.</td>
</tr>
<tr>
<td>2</td>
<td>Describe the development of postural control systems and the influence of that development on gross and fine motor development.</td>
</tr>
<tr>
<td>3</td>
<td>Identify the dimensions of concern in pediatric occupational therapy evaluation.</td>
</tr>
<tr>
<td>4</td>
<td>Apply occupational therapy frames of reference for the prevention of psychosocial dysfunction in children and adolescents.</td>
</tr>
<tr>
<td>5</td>
<td>Describe general and specific intervention strategies and approaches pertaining to children and occupational therapy.</td>
</tr>
<tr>
<td>6</td>
<td>Describe the incidence, signs and symptoms, causes, and pathologic conditions of common medical diagnoses in children.</td>
</tr>
<tr>
<td>7</td>
<td>Understand and apply principles of occupation-based; family centered practice.</td>
</tr>
<tr>
<td>8</td>
<td>Apply theory and evidence into practice when working with children with special needs.</td>
</tr>
</tbody>
</table>
### Teaching & Learning Methods

- Power point presentations by the course coordinator or invited lecturers. All course material and communications will be conducted via E-learning link (www.just.edu.jo).
- Class discussion
- Laboratory: selected assignments (within university campus and outside).

### Additional Notes

**Statement on Professionalism:** Professional behavior is expected of students at all times. Attitude and professional behavior are a minimum criterion for passing this class. Repeated lack of professional behavior will result in failure of this course. Examples of unprofessional behavior include but are not limited to: missing classes, tardiness, lack of attention for a speaker, talking to others during lecture, passing food during lecture, leaving a lecture prior to its completion without prior authorization of the instructor, working on other class material during class, inappropriate dress for labs, and sleeping during class.

**Communication with instructor:** Electronic-mail is the best way to reach me as I consistently check it. However students still can use the above listed phone number.

**Cell phone and pagers:** Please do not use cell phones or pagers in class. If you are depended upon for anticipated emergencies please put cell phones on vibration mode and answer the phone outside the classroom.

**Attendance:** Attendance will not count for points in this class, however attending the lectures and labs will greatly enhance your grade. The student is responsible for any information discussed in lecture and lab sessions. It is imperative to attend all classes!

**Absences:** All absences will be entered electronically into the University site. According to Student Manual (Item 8: B, C & D), students are not allowed to be absent for more than 10% of lectures without any official excuse (and more than 20% with an official excuse). If a student exceeds either cases, he or she will not be allowed to sit for future course exams and will earn the least possible grade for the course (35%), unless the student had already withdrew from the course (according to item 13: B). Student will be banned from the course after electronic notification from the university through student e-mail.

**Make-up (including assignments) work will be granted for excused absences only:**

- Serious illness (doctor’s note required)
- Official university activities (with proper documentation)
- Extenuating circumstances (PRIOR approval should be obtained or direct contact made with the instructor within 24 hours

Group discussions are highly recommended however it’s crucial for each student to submit individual assignment, unless I indicate otherwise.

The student has one week from the time any test, assignment, or lab summary is returned to the class to appeal the grade.
The instructor reserves the right to make changes in the above syllabus at any time. The student has the right to be informed of any changes.

Feedback:
Concerns or complaints should be expressed in the first instance to the course instructor. If no resolution is forthcoming then the issue should be brought to the attention of the Department Chair and if still unresolved to the Dean. Questions about the material covered in the lecture, notes on the content of the course, its teaching and assessment methods can be also sent by e-mail to the following address msnazzal@just.edu.jo.

<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Title of the Lecture</th>
<th>Resources for the lecture</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>Introduction to the course&lt;br&gt; An overview of occupational therapy for children</td>
<td>Handouts</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>An overview of children’s normal development</td>
<td>5&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#4&lt;br&gt; 6&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#3</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>An overview of children’s normal and abnormal reflexes.&lt;br&gt; Development of postural control and developmental theory of mobility</td>
<td>5&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#9&lt;br&gt; 6&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#9</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>Theory of Sensory Integration (SI)</td>
<td>5&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#11&lt;br&gt; 6&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#11</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>Theory of Sensory Integration (SI) - continued</td>
<td>5&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#11&lt;br&gt; 6&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#11</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>An overview of visual perception among children</td>
<td>5&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#12&lt;br&gt; 6&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#12</td>
</tr>
<tr>
<td>7</td>
<td></td>
<td><strong>FIRST EXAM (same time and place as lecture)</strong>&lt;br&gt; Development of Hand Skills</td>
<td>5&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#10+17&lt;br&gt; 6&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#10+19</td>
</tr>
<tr>
<td>8</td>
<td></td>
<td>Prewriting and handwriting skills</td>
<td>5&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#10+17&lt;br&gt; 6&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#10+19</td>
</tr>
<tr>
<td>9</td>
<td></td>
<td>Feeding interventions</td>
<td>5&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#14&lt;br&gt; 6&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#15</td>
</tr>
<tr>
<td>10</td>
<td></td>
<td>Play and Playfulness</td>
<td>5&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#16&lt;br&gt; 6&lt;sup&gt;th&lt;/sup&gt; Ed. : ch#18</td>
</tr>
</tbody>
</table>
Most common pediatric conditions: Cerebral Palsy, Spina bifida, Brachial plexus injuries, Arthrogryposis, Juvenile Rheumatoid Arthritis, Torticollis, Autism, learning disabilities, shaken baby syndrome, SIDS

Laboratory Plan Schedule

<table>
<thead>
<tr>
<th>Week</th>
<th>Title of the lab</th>
<th>Lecturer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Introduction to the course</td>
<td>Dr. Nazzal</td>
</tr>
<tr>
<td>2</td>
<td>children’s normal developmental milestone</td>
<td>Dr. Nazzal</td>
</tr>
<tr>
<td>3</td>
<td>Normal and abnormal reflexes. Postural control</td>
<td>Dr. Nazzal</td>
</tr>
<tr>
<td>4</td>
<td>Theory of Sensory Integration (SI)- video</td>
<td>Dr. Nazzal</td>
</tr>
<tr>
<td>5</td>
<td>Theory of Sensory Integration (SI) - exercises</td>
<td>Dr. Nazzal</td>
</tr>
<tr>
<td>6</td>
<td>Visual perceptual skills</td>
<td>Dr. Nazzal</td>
</tr>
<tr>
<td>7</td>
<td>Prewriting and hand writing skills</td>
<td>Dr. Nazzal</td>
</tr>
<tr>
<td>8</td>
<td>Hand functional assessments</td>
<td>Dr. Nazzal</td>
</tr>
<tr>
<td>9</td>
<td>Feeding interventions- exercises</td>
<td>Dr. Nazzal</td>
</tr>
<tr>
<td>10</td>
<td>Assessment of play and Playfulness</td>
<td>Dr. Nazzal</td>
</tr>
<tr>
<td>11</td>
<td>Mid EXAM (same time and place as lab)</td>
<td>Dr. Nazzal</td>
</tr>
<tr>
<td>12</td>
<td>Labor Day Holiday</td>
<td>Dr. Nazzal</td>
</tr>
<tr>
<td>13</td>
<td>Presentations</td>
<td>Dr. Nazzal</td>
</tr>
<tr>
<td>14</td>
<td>Presentations</td>
<td>Dr. Nazzal</td>
</tr>
<tr>
<td>15</td>
<td>Week of final lab Examination</td>
<td>Dr. Nazzal</td>
</tr>
</tbody>
</table>
Occupational therapy (OT) treatment focuses on helping people with a physical, sensory, or cognitive disability be as independent as possible in all areas of their lives. OT can help kids with various needs improve their cognitive, physical, sensory, and motor skills and enhance their self-esteem and sense of accomplishment. Some people may think that occupational therapy is only for adults; kids, after all, do not have occupations. But a child's main job is playing and learning, and occupational therapists can evaluate kids' skills for playing, school performance, and daily activities. Occupational therapy (OT) for cerebral palsy focuses on the development of skills necessary for the performance of daily living. The aim of this systematic review was to determine whether OT interventions improve outcome for children with cerebral palsy (CP). An extensive search in MEDLINE, CINAHL, EMBASE, AMED and SCISEARCH was performed. Studies with controlled and uncontrolled designs were included.