## Infant Primitive Reflexes Lab Worksheet and Study Guide

## OTH 705

| Reflex Name | Onset                 | Integration | Test Stimulus and Response  | Implications  |
|-------------|-----------------------|-------------|---|---|
| ATNR        | Birth                 | 6 Months    | Turn head<br>(passively or<br>activity is supine)<br>R: extensor tone<br>on face side and<br>flexor on skull side   | Persistence indicates CNS dysfunction, affects rolling  |
| STNR        | 6 Months              | 8 Months    | Stimulus: position child in prone with passive or active neck extension Response: Upper extremity extension with neck extension with flexor tone in lower or reverse  | Interferes with crawling (rabbit creep  |
| TLR         | Birth                 | 6 Months    | Stimulus: Hold infant in prone position with slight clockwise rotation or prone with slight counter-clockwise rotation (see figures) Response: In prone, body and extremities tend to be dominated by extensor tone or flexor tone based on head movement | Tummy time will be difficult, need reflex to clear airway, if not integrated, a dominant posture persists dissociation from head/body will be limited |
| Galant      | 30 Weeks<br>gestation | 2 months    | Stimulus-Suspend<br>ed in prone,<br>stroke infant's skin<br>along one side of   | Significance with children sitting in their chairs when older   |

|                             |                                  |          | spine from<br>shoulder to hip<br>Response-lateral<br>flexion of trunk to<br>side of stimulus   |  |
|-----------------------------|----------------------------------|----------|--|--|
| MORO                        | 28 weeks<br>gestation            | 5 months | Stimulus-hold baby in semi reclined position and suddenly drop head into extension Response-abducti on of arms with fingers open with quick adduction of arms across trunk in adduction. | This reflex breaks flexion posture. Look for asymmetry. Implications with swaddling (why babies like to be swaddled) |
| Palmar Grasp                | Birth                            | 4 Months | Mild pressure<br>ulnar side of palm<br>Fingers curl<br>around stimulus   | Develops hand<br>ROM   |
| Plantar Grasp               | 8weeks gestation                 | 9 months | Mild pressure to<br>base of toes on<br>sole of foot.<br>Toes curl around<br>stimulus   | Needed for standing  |
| Positive<br>Supporting      | 35 weeks<br>gestation            | 2 months | Hold infant in vertical position. Stiffening legs and trunk into extension   | Absence could indicate muscle weakness or hypotonia  |
| Primary<br>Walking/Stepping | 38 weeks<br>gestation            | 2 months | Hold infant in vertical position. Reciprocal flexion/extension of legs and stepping  | Precursor to walking   |
| Rooting Reflex              | 28 weeks                         | 3 months | Stroke face<br>starting at the<br>corner of mouth.<br>Mouth opens and<br>turns toward<br>stimulus.   | For feeding  |
| Equilibrium<br>Responses    | Prone-4-6 months Supine-8 months | life     | With slight push, body adjusts to  | Absence could indicate   |

|                         | Sitting 8 months<br>Upright 10-12<br>months                                  |      | change in orientation in space | sensorimotor<br>system challenges  |
|-------------------------|--|------|--------------------------------|------------------------------------|
| Protective<br>Responses | Each side in sitting<br>and forward-6-8<br>months<br>Backward-9-11<br>months | LIFE | Arms catch before falling      | Very important for protecting head |