

Letters to the Teacher Series

Preschool

Information about E.

We are very excited by the prospect of E. moving up to the primary room, and have been preparing E. for this transition as well.

E. has a diagnosis of right hemiplegia, most probably caused by a stroke before she was born. While we are keeping a close eye on her development, it does appear that she is only mildly affected physically at this point. As a result, some of the muscles on her right side are very tight, and others are very weak.

E. currently attends physical and occupational therapy twice a week, Monday and Thursday, from 8-9 am, and arrives at Montessori at approximately 9:15 on these days. She has been in therapy since she was six months old, and will have to continue therapy for the foreseeable future. Since this will interfere with group time on these days, we would like to come up with a solution that works best for everyone. We can change her therapy appointments, however, this may take some time, as our therapists seem to stay booked. We can also wait until 9:30 to bring her to class. Our concern is that if E. misses the group time twice a week, she will not get the full benefit of the Montessori curriculum. I would very much appreciate your input as to which you feel is the best option when we get together, hopefully later this week.

E. currently wears an AFO (ankle-foot-orthotic, or brace) during the day to give her a little extra stability and to keep her foot in a good position. She should generally keep it on throughout the day, however during activities where the children are taking their shoes off, her AFO should also be removed (this will have to be done for her). When E. comes inside from playing, please take a quick look to make sure that no pebbles or pieces of mulch have fallen down inside her AFO, as this might create a sore spot that she will not feel right away.

We are also using kinesiotape on E.'s arm and leg. She calls the tape her band-aid. This tape is a new method of treating muscle spasms and the results so far have been positive. Kinesiotape is waterproof, so don't worry about it getting wet. Since it is designed to work on the deep muscle tissue, the tape can't be pulled off (this really hurts). If you notice a ragged end, please trim it with scissors.

Balance is still an issue for E. She tends to fall more easily than other children, but should be allowed to get back up on her own. She needs to have her right hand held when navigating steps (including the curb in the parking lot), ramps, or uneven ground. When a railing is available, she needs to hold on with her left hand.

Children with hemiplegia often have an intensified startle reflex, and E. is no exception. Loud, sudden noises scare her, and may cause her to lose her balance. She also has an aversion to high-pitched motor noises (such as an ice cream churn or a blender). We have found that the best way to overcome this is to explain the noise to her in advance, and then invite her to help control it if possible by letting her switch it on.

E.'s right hand and arm are quite a bit weaker than her left. Although she does use her right hand as a "helper" in bilateral activities, she will need to be reminded to do so at times (verbal cues to "use both hands" work the best, but we do try to intersperse those with some physical cues, such as lightly tapping or brushing her hand or arm, so as not to continually draw public attention to her). She will need to be reminded to use her right hand to hold the paper on the table while using her left to color or write. While we encourage E. to use her right hand as much as possible, realistically, we also need to make certain adaptations to avoid unnecessary frustration and accidents. Utensils, cups, and whatever tools are being used for a particular activity should be placed on her left hand side. We are working with E. on daily living skills, but she does still need help with things like zippers, pulling her pants up and down, putting her coat on, etc. She can clear her plate from the table, but should be closely watched doing so.

Generally, E. has adapted very well to being left-handed in a right-handed world. Sometimes she has a harder time than others, especially during growth spurts and when it is cold, as both of these can make her muscles tighten up. Should you ever have any questions or concerns, please don't hesitate to call us.