

How Do I Know if My Child Needs an Occupational Therapist to Help With Feeding?



Hello! If your kiddo is struggling to eat, don't fret, Occupational Therapy can help! My name is Melissa, I'm a pediatric Occupational Therapist. I love working with kids! I graduated in 2003 with my Master's in Occupational Therapy from the University of North Dakota. I have

a very broad approach to treat the whole child and their family. One of my favorite things to help with is feeding and helping kids move from being tube fed to eating by mouth. I'm passionate about Occupational Therapy and love adapting things to fit the needs of the children and families I work with.

All Access Therapy is here to help if you had a baby who came earlier than planned and maybe had a stay in the



NICU. We work with infants and children that struggle to eat. Sometimes, these kids are not able to eat and have been fed through tubes. Other times, they are just really picky, and mealtimes are stressful, but they don't have to be. This download is going to give you tips and tricks to

get your kiddo eating and thriving!

Often kids we see have a scary medical history and parent can feel lost on how to wean babies and children from eating through an NG tube or Gtube to eating table foods. Other times we see kids that extremely picky about types of foods and textures. We can help with that too!

A pediatric feeding disorder is an impaired oral intake that is not age-appropriate and is associated with a medical, nutritional, feeding skill, and/or psychosocial dysfunction.

Here are 12 Red Flags That May Indicate Your Child Needs an Occupational Therapy Evaluation

1. Feeling stress and worry about whether your child is eating appropriately or growing well.
 - a. Is your baby gaining weight? Are you changing enough wet diapers?

2. If your child is crying or fussy at mealtimes.
 - a. There are a few reasons why a child could be fussy at mealtimes, are they being feed on the right schedule? Are there any food allergies? Is your child having regular bowel movements?



3. Frequent vomiting or spitting up with arching.

a. Sometimes babies spit up if they are getting an air bubble stuck, more frequent burping can help with this. Other times, it can be a food allergy. Or this can be caused if the nipple flow is too fast. Constipation can cause more frequent vomiting as well.



4. Coughing, gagging, or increased congestion with eating or drinking.

a. Sometimes children can aspirate on liquids.

You would want to watch for coughing, gagging, watering eyes,

arching away from the bottle.

This can be scary, but there are positioning techniques that can make eating safer. Feeding your baby in elevated side lying



allows them to pool extra liquid in their cheek. Other times, your baby will need a swallow study to determine what your child can eat safely.



5. Taking longer than 30 minutes to eat.

a. After 30 minutes of eating your child is burning more calories eating than they are getting eating. This is the opposite of what we want to do.

6. Difficulty breathing during eating.

a. Some babies need help with pacing and their suck, swallow, and breath pattern.

7. Falling asleep during eating.

a. Sometimes if eating becomes too much work and sucking is too hard, babies will often fall asleep before they have taken enough nutrition. This may indicate the nipple flow is too slow. Or your child may be weak in their oral motor skills and could benefit from strengthening. Often the first strengthening technique is a binky pull to progress strength of suck in an infant.



8. Frequently spitting out food or liquid.

- a. This may be due to unfamiliar texture, non-preferred foods, poor oral motor control or too fast of flow from the nipple.



9. Pocketing food or overstuffing mouth with food.

- a. Sometimes kids that struggle with chewing will leave partially chewed food in their cheeks because they just get too tired to keep chewing. Other times kids will keep taking bites even through they haven't finished chewing, this can be a dangerous choking hazard, we recommend limiting the amount of food that is placed on the tray if this is a concern. There are a lot of fun way to strengthen their mouths so that they can eat easier.



10. Eating a limited diet.
 - a. Sometimes kids just only like a few foods, this can make mealtime very difficult and nearly impossible to enjoy going out to eat or eating away from home. We have seen this a lot and have great success with expanding diets.

Call All Access Therapy for Additional Help if Needed

I know these strategies will make your life easier. However, if it's not quite enough please reach out to us at All Access Therapy at 208-428-6079, we'd love to help you and your child. Email: info@allaccesstherapyid.com

Thanks for reading! In the coming weeks, I'll be sending you even more tips and advice the best that they can be and realize their full potential. I hope this is the beginning of a great long-term relationship when myself and my colleagues become the source of leading edge health advice to make a real difference in your lives.