OT Mastery

Motor Coordination: Midline Crossing and Bilateral Coordination

1. How is motor coordination defined?

A. The interrelated movement of multiple body parts as required for certain actions.
B. Gross and fine motor movements that happen occasionally to afford someone steady gait
C. Gross motor movements that are intended to help with dressing
D. Fine motor movements that help someone write and cut smoothly

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2. What is NOT a reason why someone might experience impaired motor coordination?

A. Cerebral palsy
B. High blood pressure
C. Dyspraxia
D. Tumors

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3. At what age do typically developing children usually achieve the ability to cross midline with their upper extremities?

A. Between 2 and 3 months
B. Between 8 and 12 months
C. Between 18 and 24 months
D. Between 3 and 4 years

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4. Which of the following activities is an example of alternating bilateral coordination?

A. Climbing a ladder
B. Clapping both hands together
C. Rolling dough with a rolling pin
D. Catching a ball with two hands

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5. What is an example of a compensatory strategy that involves both motor coordination skills: midline crossing and bilateral coordination?

A. Using both hands for a task that may only require the use of one hand
B. Using a dressing stick
C. Squeezing a bottle of paint with one hand toward the right side of the body
D. Changing the position of objects during tasks (e.g. placing a piece of paper vertically instead of horizontally when writing on it or reading from it)

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6. Which of the following is considered an adverse outcome of children with poorer motor coordination skills?

A. Enhanced communication to request help with motor tasks
B. Poorer academic performance
C. Need for a full-time caregiver to help with dressing
D. Improved math skills

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7. At what age should a baby be able to push up from a prone position with straight arms?

A. 4 months
B. 12 months
C. 6 months
D. 8 months

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8. At what age are a child's sensory systems typically fully developed, supporting the development of bilateral integration and independent skill acquisition?

A. 8-10 years old
B. 6-8 years old
C. 2-4 years old
D. 4-6 years old

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9. What is not an example of an assessment that can be used to evaluate someone's bilateral integration skills?

A. Modified Barthel Index
B. Fugl-Meyer Assessment of Motor Recovery
C. Bruininks-Oseretsky Test of Motor Proficiency
D. Alternating Hand Movements Test

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10. If a 5-year-old child presents with poor bilateral coordination skills, what activity might a therapist include in an obstacle course to address this deficit?

A. Filling a pill organizer
B. Sewing a patch onto a shirt
C. Shuffling and dealing cards
D. Air biking

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11. If a therapist wanted a single therapeutic activity to address both midline crossing and bilateral integration, what activity would they NOT choose?

A. Pushing a weighted laundry basket in a straight line
B. Using a knife and a fork to cut through a large/long piece of play-doh

C. Weaving paper or string together to form a pattern
D. Remaining in one spot while tossing rings onto one of 5 stakes positioned in a line

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12. Which of the following terms refers to a clinical condition characterized by motor incoordination that may result from various developmental, neurological, or systemic causes?

A. Dysphagia
B. Apraxia
C. Ataxia
D. Hemiplegia

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13. Which of the following methods allows a therapist to informally assess a patient's bilateral coordination skills?

A. Administering a standardized balance assessment
B. Observing the patient during functional activities such as dressing or playing catch
C. Measuring range of motion with a goniometer
D. Performing manual muscle testing

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14. Which of the following standardized assessments can be used to evaluate a person's ability to cross midline?

A. Berg Balance Scale
B. Nine-Hole Peg Test
C. Bishop's Card Reaching Task
D. Purdue Pegboard Test

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15. Which strategy could help a patient who had a stroke and now has residual hemiplegia and impaired bilateral coordination complete functional tasks?

A. Performing repetitive range-of-motion exercises with both arms simultaneously
B. Adjusting the position of objects during tasks, such as placing paper vertically instead of horizontally
C. Practicing tandem walking to improve balance
D. Completing progressive resistance training for the unaffected limb

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16. What is an example of an assistive device a therapist might recommend for a patient with midline crossing or bilateral coordination deficits that impacts meal preparation?

A. One-handed cutting board with attachments
B. Tandem walking poles
C. Supine straight leg raise strap
D. Only use the affected hand for functional tasks

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17. What piece of adaptive equipment can help someone with bilateral coordination deficits while driving?

A. Lumbar cushion for driver's seat
B. Scoop plate with handles
C. Tri-pin for the steering wheel
D. Automated steering

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18. Which of the following best describes why occupational therapists monitor for compensatory behaviors in patients?

A. To allow patients to continue using habits that may limit recovery
B. To identify adaptations that can help patients function despite deficits
C. To immediately discontinue therapy interventions
D. To assess only physical strength improvements

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19. What is a common motor strategy that can help someone with impaired midline crossing to engage in functional tasks?

A. Only using the dominant hand to complete all functional tasks
B. Having someone perform the second half of tasks for them once it becomes difficult
C. Laying down and completing tasks in a supine or prone position
D. Changing the position of objects in front of them during tasks so they are more accessible

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20. What body motion can help someone compensate for difficulty with midline crossing?

A. Elbow extension
B. Trunk rotation
C. Shoulder flexion
D. Forearm supination

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