



STANDARDIZED TESTS & OUTCOME MEASURES

Pediatric Population

Why use standardized tests?

- Contributes to an evidence-based approach
- Allows OTs to quantify observations using an objective assessment
- Assess, measure and compare changes in motor and sensory skill status over time
- Document scores, percentile rank and normative values
- Facilitates goal writing, baseline measures, developmentally appropriate interventions and data collection
- Tracks performance and/or progress on functional tasks in the educational setting

Considerations in selecting an Outcome Measure in Pediatrics:

- Age, skill level of child, administration time
- Reason: justification for treatment; measure or track progress
- Criterion Referenced vs. Norm Referenced

Sample tests to consider:

Bruininks-Oseretsky Test of Motor Proficiency, 2nd Edition (BOT-2)	Age: 4-21 years	Fine Manual Control, Manual Coordination, Body Coordination and Strength and Agility
Pediatric Evaluation of Development Inventory (PEDI)	Age: 0-20 years	Measures ADL's, mobility, IADL's
School Function Assessment (SFA)	Age: K-6 grades	Measures performance on functional tasks in the academic setting
Developmental Assessment of Young Children (DAYC-2)	Age: 0-5.11 years	Measures fine and gross motor skills
Peabody Developmental Motor Scales (PDMS-2)	Age: up to 72 months	Measures fine and gross motor skills
Miller Function and Participation Scales (M-FUN)	Age: 2-7.11 years	Measures performance on functional tasks in the academic setting
Beery-Buktenica Developmental Test of Visual-Motor Integration, 6th Edition (VMI)	Age: 2-99:11 years	Visual motor skills
Sensory Processing Measure, 2nd Edition (SPM-2)	Age: 4 mos-87 years	Sensory processing skills
Sensory Profile 2 (SP-2)	Age: Birth-14:11 years	Sensory processing skills