General Movements Assessment video instructions

CLINICAL FACT SHEET

Behavioural

- Video in active wakefulness States 4 or 5
- Don't video when crying or fussing or State 1 sleep (regular respirations)
- Provide support and calm as required
- Time video to coincide with wakeful times e.g. feeding or baths. Liaise with parents and nurses
- Read the child's cues to ensure optimal state regulation – be careful of yawning
- Avoid videoing when child has prolonged hiccuping.

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Environment (optimally)

Avoid:

- Interference by observer (keep away from the child, don't interact with parents)
- Noisy surrounds limit discussions
- Toys and distractions
- Parent in field of vision
- Colourful blankets
- Mirrors
- Distractions on clothing e.g. staff ID badge
- Dummy in mouth.

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Timing

- In the 'writhing' period: 5–15 minutes (may need to record up to 15 minutes of video)
- In the 'fidgety' period: 3-5 minutes of optimal recording
- Avoid videoing in the first days after birth, especially if the child was born extreme premature.

Adapted with permission from: Novak et al 2017. Early, Accurate Diagnosis and Early Intervention in Cerebral Palsy. *JAMA Pediatr.* 2017;171(9):897-907. doi:10.1001/jamapediatrics.2017.1689 Available from: http://jamanetwork.com/journals/jamapediatrics/article-abstract/2636588

STATE	DESCRIPTION	BEHAVIOUR
State 1	Deep sleep	Lies quietly without moving
State 2	Light sleep	Moves while sleeping; startles at noises
State 3	Drowsiness	Eyes start to close; may doze
State 4	Quiet alert	Eyes open wide, face is bright; body is quiet
State 5	Active alert	Face and body move actively
State 6	Crying	Cries, perhaps screams; body moves in very disorganised ways

STANDARDISED

MOTOR

