### Eye movement
- Eyes jerk, flutter, or roll up unexpectedly and repeatedly (brain damage, possible epilepsy—p. 233)
- One eye looks in a different direction or moves differently from the other (possible brain injury)

**Move finger or toy in front of eyes from side to side and up and down.**
- Eyes follow smoothly (typical)
- Eyes follow in jumps or jerks (possible brain injury)

### Eye to hand coordination
- Moves finger from nose to object and back again almost without error—with eyes open, and also closed (typical)
- Misses or has difficulty with eyes open (poor coordination, poor balance, or loss of position sense)
- Has much more difficulty with eyes closed (loss of position sense)

### Body movements
- Awkwardness or difficulty in controlling movements
- Sudden or rhythmic uncontrolled movements
- Parts of body twist or move strangely when child tries to move, reach, walk, speak, or do certain things

(All these may be signs of brain injury; see Chapter 9.)

### Seizures of different kinds (see Chapter 29)
- Sudden loss of consciousness with strange movements,
- Brief periods of strange movements or positions,
- Blank stares; eye fluttering, twitching.

### Developmental delay: Is the child unable to do many different things that others her age can do? Which? (see Chapter 34)
- Head control
- Use of hands
- Rolling
- Creeping and crawling
- Sitting
- Standing and walking
- Sucking
- Eating
- Playing
- Communication or speech
- Behavior
- Self-care activities

### Balance
- With the child in a sitting or standing position, gently rock or push him off balance.
- Child does not try to keep from falling (poor balance—sign of brain injury in child over 1 year)
- Child tries not to fall by putting out his hands (fair balance)
- Child keeps from falling by correcting body position (good balance)

### Balance test for the older, more stable child
- Have child stand with feet together.
- Balance difficulty with eyes open—may be brain injury (or muscle-joint problem)
- Balance difficulty much greater with eyes closed (probably nervous system injury)

### Knee jerks and other “muscle jump” reflexes
- With the leg relaxed and partly bent, tap the cord just below the knee cap.

  **Typical**
  - The knee jumps a little.

  **Reduced**
  - The leg moves very little or not at all. Typical of polio, muscular dystrophy, and other floppy paralyses.

  **Over active**
  - A slight tap causes a big jump. Typical of spasticity from cerebral palsy, spinal cord injury, and other brain or spinal cord injury.

  **Keeps jumping**
  - One tap causes the limb to jerk many times. Happens with spinal cord injury and some cerebral palsy.

### Great toe reflex
- Stroke the foot toward the toe with a somewhat pointed object (like a pen).

  **Typical**
  - Toes bend down

  **Not typical**
  - Toes bend up and spread

  This is a sign of brain or spinal cord injury (Babinski’s sign). May occur in any child under 2 years.