



# Physiotherapy referral information for children 4 to 8 years

## Child Development Service

Child's Name: \_\_\_\_\_ Child's Date of Birth: \_\_\_\_\_

Date form completed: \_\_\_\_\_

This checklist is designed to provide additional information to support a referral to Physiotherapy at the metropolitan Child Development Service (CDS). It should be completed by a health or education professional with knowledge of a child obtained through direct observation over a period of time. This checklist should be accompanied by a [CDS referral form](#).

### 1) Gross Motor Skills

- Difficulties running
- Difficulties with jumping
- Difficulties with hopping
- Difficulties with activities requiring rhythm and co-ordination eg galloping, skipping (4 years) star jumps, hopscotch (6 years)
- Difficulties with ball skills eg throwing/catching/kicking large and small balls
- Difficulties with using two hands together in play
- Movements seem shaky
- Movements seem stiff
- Movements seem floppy
- Avoidance of physical activities/tasks
- Difficulty moving under/over/around and through equipment
- Difficulty copying body positions from physical demonstration

### 2) Balance

- Unable to stand on one leg for 10 seconds
- Is fearful above the ground on a beam or frame
- Needs to use hands regularly to assist and stabilise
- Frequently bumps into items when moving around the classroom
- Frequently trips over
- Dislikes rocking, swaying, swinging or spinning, dislikes 'moving' playground equipment e.g. swings/trampoline



### 3) Posture

- Poor standing posture
- Feet or legs appear turned inwards, causing tripping when walking
- Slumped sitting posture, increased reliance on arms for support (e.g. propping)
- Habitually walking on toes

### 4) Independence, Play Skills and Community Activities

- Appears unfit, unable to keep up with peers
- Difficulties climbing up and down stairs with alternate strides
- Difficulties negotiating playground equipment (monkey bars ~ 6 years)
- Difficulties cycling a bicycle with (4 years) or without (6 years) training wheels
- Difficulties organising balance/position to dress or undress independently

### 5) Additional information regarding the child's strengths or areas of difficulty in physical activities:

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Name: \_\_\_\_\_

Agency/School: \_\_\_\_\_

Agency/School address: \_\_\_\_\_

Agency/School phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Please return this checklist and CDS referral form to [childdevelopmentsservice@health.wa.gov.au](mailto:childdevelopmentsservice@health.wa.gov.au)

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Contact a qualified healthcare professional for any medical advice needed.

