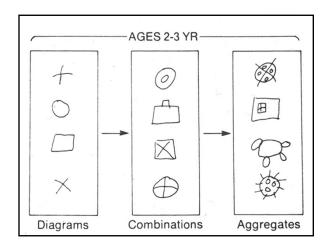
Pediatrics for the Practitioner June 13-15, 2014 University of Texas Health Science Center Santa Rosa Children's Hospital San Antonio Military Medical Center Family Drawings in Office Practice What We Can Learn?

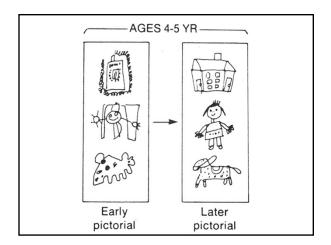
Martin T. Stein, MD University of California San Diego Rady Children's Hospital San Diego

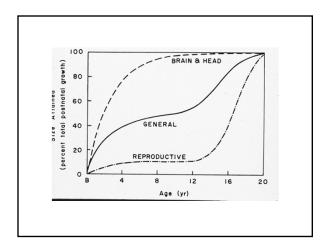
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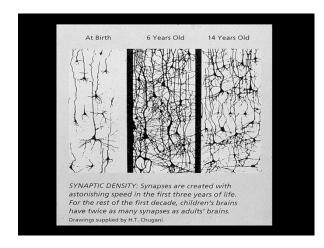
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—EARLY TODDLERHOOD—				
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	Ð		Best	
	Basic	,	Placement	•
	scribbles		patterns	



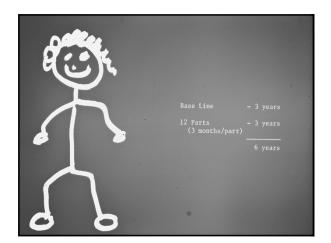






Cognitive Assessment of Visual-Motor Skills

Ability to copy: Age:
Circle 3 years
Cross 4 years
Square 5 years
Triangle 6 years
Diamond 7 years





Kinetic Family Drawing **Clinical Observations**

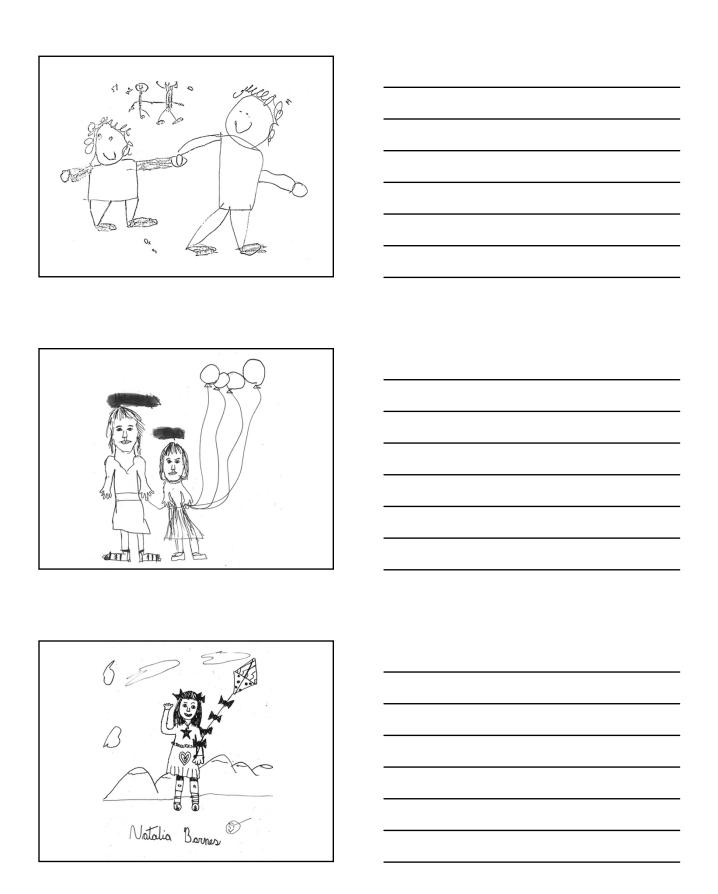
- Placement of Individuals
- · Size of Individuals
- Distortions
- Omissions
- Nurturing vs. Threatening Parent
- "Cookie-Cutter" Figures
- Anger / Depression

Kinetic Family Drawing in Pediatric Practice

An opportunity to open new lines of communication with parents and children

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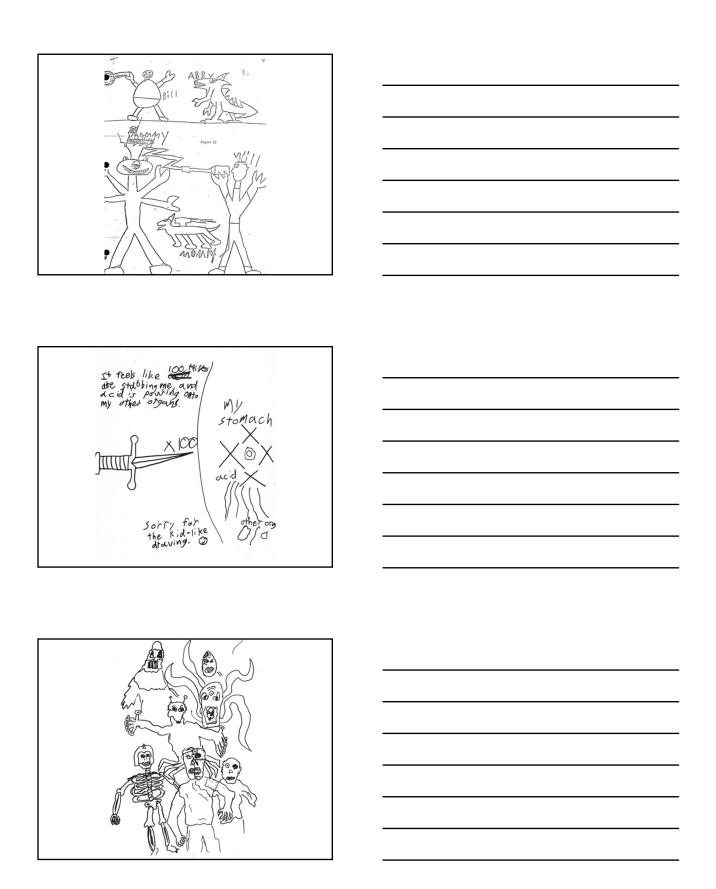


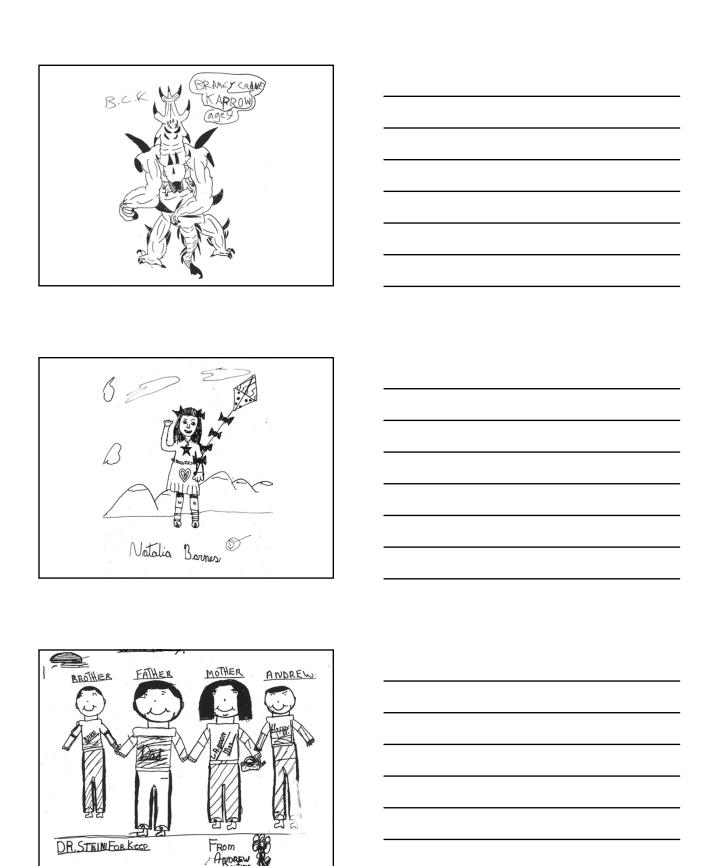
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Children's drawings in the diagnosis of headache 226 children (4-19 yrs) were seen consecutively for headache evaluation in a pediatric neurology clinic. Prior to a medical history, they were asked to draw a picture of themselves having a headache. "Where is your pain? What does your pain feel like? Are there any other symptoms (before or after the headache) that you can show in the pricture?" They were asked to explain the drawing and their interpretation was recorded. Features in the drawings consistent with migraine included pounding pain, nausea/vomiting desire to lie down periorbital pain, photophobia visual scotoma. Sadness, crying or band-like pain did not differentiate migraine from nonmigraine headaches. neadactics. Sensitivity 93.1%; specificity of 82.7%. Drawings promote the opportunity to express their symptoms and feelings and may afford greater insight into their pain. Stafstrom, CE et al. The usefulness of children's drawings in the diagnosis of headache. Pediatrics~(2002)109:460-472.

