

Cerebral Palsy Screening: Outpatient



Children's Mercy
KANSAS CITY

Evidence Based Practice



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Exclusion Criteria

- Known progressive abnormal brain condition
- Developmental regression
- Previous diagnosis of CP and care plan is established

Risk Factors for CP

ANY of the following:

- Motor delay:
 - Persistent hand fisting or head lag > 4 months
 - Delayed sitting without support > 9 months
 - Early handedness < 12 months
 - Concern from PT or OT
- Any asymmetry in posture or movement
- Hypoxic ischemic encephalopathy
- Abnormal brain imaging
- Seizures requiring daily medication for control
- Intrauterine drug exposure
- Known or suspected traumatic or non-traumatic brain injury that occurred < 24 months of age
 - Refer to [Suspected Abusive Head Trauma Clinical Pathway](#) if concerned for abuse
- Prematurity < 28 weeks estimated gestational age

Consider risk for:

- Prematurity 28 - 32 weeks estimated gestational age
- Birth weight < 1499 grams

Appropriate PT/OT includes neurospecific therapies which may include:

- Functional vision screening
- Vibration therapy
- Neuromuscular electrical stimulation (NMES)
- Constraint Induced Movement Therapy (CIMT)

HINE Exclusion Criteria

If patient has **ANY** of the following, the HINE is not appropriate:

- < 3 months or > 24 months adjusted age
- Musculoskeletal abnormalities that may impact results (e.g., limb loss or congenital contractures)

HINE may not be appropriate for pts with exclusion criteria above but does not exclude the risk of CP

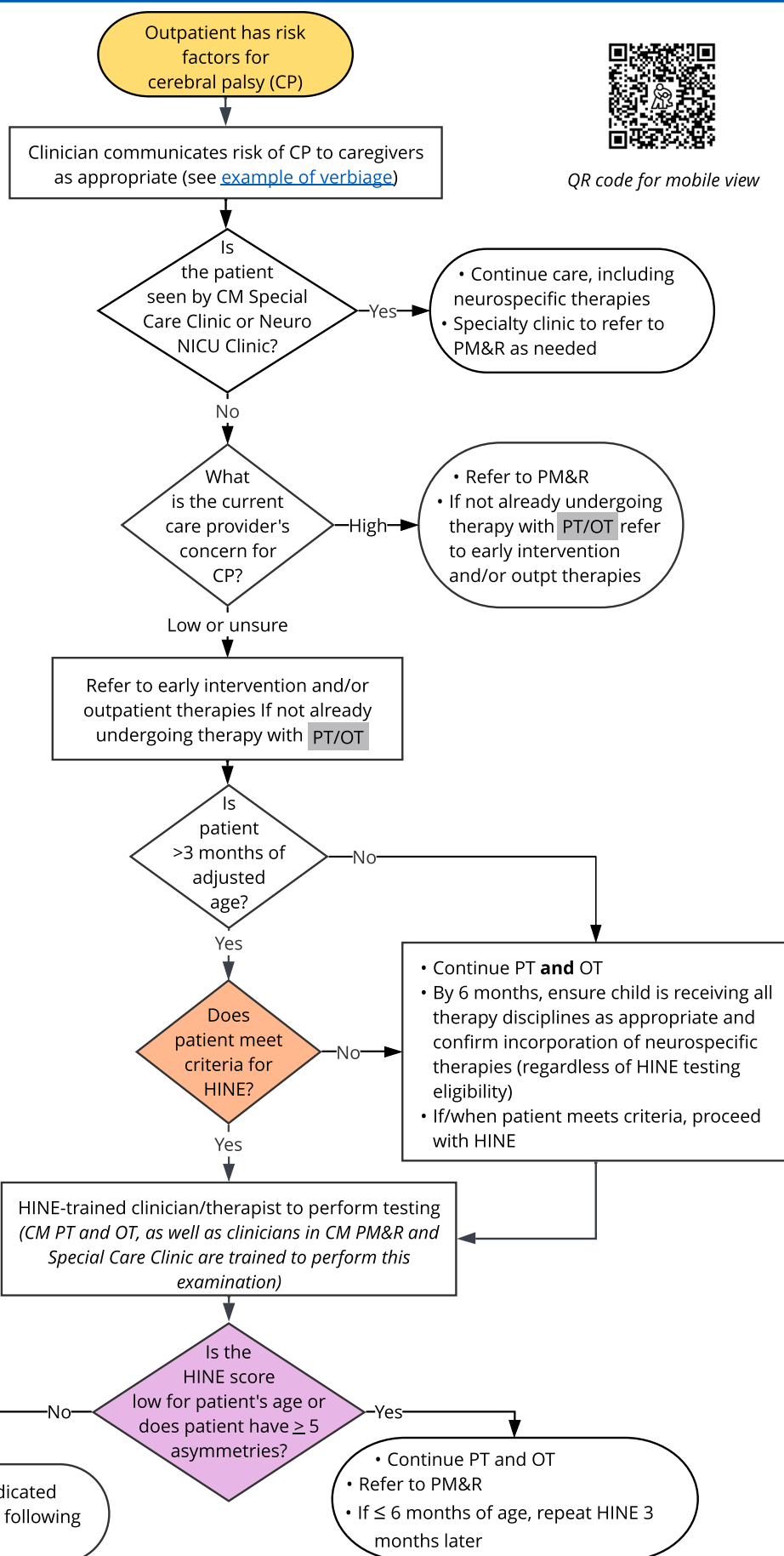
Age-Based HINE Scores

Adjusted age	HINE score cutoff
3 months	< 56
6 months	< 59
9 months	< 62
12 months	< 65

*The HINE was only validated at specific ages. Use clinical judgement if the patient is between the ages listed above. (Romeo et al., 2007)

Abbreviations:

PT = Physical therapy
OT = Occupational therapy
PM&R = Physical Medicine & Rehabilitation
HINE = Hammersmith Infant Neurological Examination



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Link to: [synopsis and references](#)

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This clinical pathway is meant as a guide for physicians and healthcare providers. It does not establish a standard of care, and is not a substitute for medical judgment which should be applied based upon the individual circumstances and clinical condition of the patient. Printing of Clinical Pathways is not recommended as these documents are updated regularly. Copyright © The Children's Mercy Hospital 2025. All rights reserved.