

Case Study: #10 Tony

Child's age, weight, height

5 Year-old male, 28 pounds, 37 inches

Medical Diagnosis/condition

Scoliosis. Tony recently had surgery to stabilize his cervical spine and he is now required to wear a halo traction brace. This brace will help keep his cervical spine stable during the healing process

Reason for referral

Tony's physician referred him to the occupational therapist on staff to find a restraint system that would accommodate the halo traction brace.

Current child safety restraint

Forward facing, 5 point harness, conventional car seat

Other child passengers and restraints

None

Vehicle Year, Make and Model

2001, Pontiac Bonneville

Child's Seating Position in Vehicle D=Driver

D		
		Tony



Vehicle Issues

None

Evaluation

Tony's own child safety seat was not wide enough at the head area to accommodate the halo traction. It also could only be used forward facing. A rear-facing car seat is recommended if the child fits within the weight and height recommendations for the child safety restraint. With a rear facing car seat you can install the car seat and then remove the shoulder straps from the splitter plate to move the child in and out of the car seat.

Outcome

After trialing different car seats offered through the Riley Hospital car seat program, the Britax Hippo was issued for Tony. This car seat can be used rear facing to 33 pounds and had adequate head room to fit the width of the halo. (Although the Hippo is typically used for children in hip casts, it was the widest seat with a high rear-facing weight limit available at Riley.)

The OT educated the family on the process of routing the shoulder straps through the halo and over his shoulders as this would be required every time he is taken in and out of the car seat. It was also advised to keep an eye on the position of his head in the seat and to turn him forward facing when he had less than an inch between the top of his head and the top of the seat. In the event he would have to travel forward facing, the difficulties with getting him in and out of the seat and reinstalling it every time were discussed. The occupational therapist recommended the family contact her to explore other options such as the Y-harness as he outgrew the rear-facing limits of the Hippo.