

# **SAMPLE of a Sensory Diet**

**This MUST be personalized for each child**

**This is a sensory diet for \_\_\_\_\_**

**This was developed by \_\_\_\_\_**

## **Sensory Diet**

### WHAT IS A SENSORY DIET?

A sensory diet is a group of activities that are specifically scheduled into a child's day to assist with attention, arousal and adaptive responses. The activities are chosen for that child's needs based on sensory integration theory. The use of specific types of input; proprioceptive, tactile, visual auditory, vestibular, gustatory, and oral motor are introduced during various times of the day and assist the brain in regulating attention and an appropriate level of arousal. These different types of input cause a release of neuro-chemicals that can last up to two hours, depending on the type of input and intensity. A sensory diet is designed to keep a flow of these neuro-chemicals steady in the brain throughout the day for improved learning.

A sensory diet is prescribed only by an Occupational Therapist or a Certified Occupational Therapy Assistant and is monitored by them, but it is a plan that should be carried out on a daily basis by a person trained on specific techniques by an OT or COTA. If you have any questions regarding this sensory diet, please talk to the child's therapist listed at the top of this page.

These activities are designed to produce a positive effect on a child. If at anytime the child reacts negatively to the input, the activity should be stopped. **NO ACTIVITY SHOULD EVER BE FORCED ON A CHILD.** Please only do the activities that have been checked off.

## PROPRIOCEPTIVE / HEAVY MUSCLE WORK:

- \_\_\_\_\_ carrying a weighted book bag or books to the office and back
- \_\_\_\_\_ rolling a large ball on a child that is lying on the floor (can pretend to make a pizza and roll out the dough, etc.)
- \_\_\_\_\_ pushing the wall
- \_\_\_\_\_ wall or chair push-ups
- \_\_\_\_\_ pushing a vacuum, wheelbarrow, or large trash can down the hall
- \_\_\_\_\_ playing on monkey bars, climbing activities
- \_\_\_\_\_ rolling up in a blanket (regular or weighted)
- \_\_\_\_\_ jumping on a trampoline
- \_\_\_\_\_ jumping jacks, running in place with heavy stomping
- \_\_\_\_\_ wheelbarrow walking
- \_\_\_\_\_ tug of war games
- \_\_\_\_\_ cleaning or erasing chalkboards
- \_\_\_\_\_ pushing self on scooter (seated or on stomach)
- \_\_\_\_\_ pushing self across floor on carpet square while seated or in kneeling
- \_\_\_\_\_ deep pressure downward with hands on top of shoulders
- \_\_\_\_\_ big bear hugs
- \_\_\_\_\_ activities lying on stomach while propped up on elbows
- \_\_\_\_\_ weighted vest or compression vest (20 minutes on 20 minutes off unless otherwise directed)
- \_\_\_\_\_ weighted lap pad for sit down activities
- \_\_\_\_\_ rearranging desks in room
- \_\_\_\_\_ clapping games
- \_\_\_\_\_ have child's palms on your palms and push, vice-versa
- \_\_\_\_\_ stacking chairs
- \_\_\_\_\_ pushing self in toy or tricycle
- \_\_\_\_\_ drumming, banging on ball
- \_\_\_\_\_ pushing on a ball
- \_\_\_\_\_ rolling/pushing against a ball up a wall

## ORAL MOTOR:

- \_\_\_\_\_ chewy, crunchy foods to alert and increase attention (raw fruits and vegetables, licorice, gummy snacks, pretzel rods, gum, etc.)
- \_\_\_\_\_ food with intense flavors (extreme sour)
- \_\_\_\_\_ whistles, blowing activities, (blowing cotton balls across a paper, making bubbles with a straw in water, blowing bubbles)
- \_\_\_\_\_ provide things to chew on (therapist will give you such as chew tubes, etc.)
- \_\_\_\_\_ sucking (use water bottle at desk also increases hydration which increases concentration)

## TACTILE (Touch):

- \_\_\_\_\_ play in tubs of rice, beans, macaroni, etc. hands or feet
- \_\_\_\_\_ play in textured materials such as shaving cream, play-doh, cornstarch and water, etc. Can practice letters in these mediums
- \_\_\_\_\_ brushing protocol if tactile defensive (requires one on one training with OT or COTA)

## VESTIBULAR (Movement):

**\*Use caution with these activities, watch for changes in skin color, signs of nausea, changes in heart rate or breathing. Stop immediately if these occur.**

- \_\_\_\_\_ swinging (no spinning) – child directed
- \_\_\_\_\_ wind mills, head shoulders knees and toes songs (any songs that require change of head position)
- \_\_\_\_\_ jumping activities
- \_\_\_\_\_ log rolling
- \_\_\_\_\_ somersaults (if safe doing them, head tucked) - \*Do not do with children with Downs Syndrome
- \_\_\_\_\_ riding hippity hop
- \_\_\_\_\_ scooter board (on stomach or seated)
- \_\_\_\_\_ riding bike, etc.

## ALERTING:

These activities are specifically designed to alert a child that is having a difficult time staying aroused. Please consult with OT or COTA before using these activities to make sure that the child is truly under aroused and not in a shut down state. Some signs of under stimulation are:

- Lethargic/falling asleep
- Slumped posture
- Decreased attention
- Slow moving
- Decreased ability to follow directions
- Drooling or open mouth posture

\_\_\_\_\_gently wiping face and cool cloth

\_\_\_\_\_use bright lighting

\_\_\_\_\_drinking cold water from a water bottle or fountain

\_\_\_\_\_loud, fast paced music

\_\_\_\_\_irrhymthical swinging (need to be shown by OT)

\_\_\_\_\_vigorously rubbing arms and back (not if tactile defensive)

\_\_\_\_\_running in place

\_\_\_\_\_jumping in place

\_\_\_\_\_high knee stepping