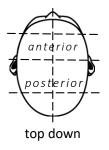
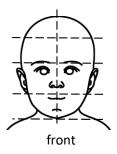
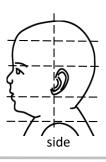
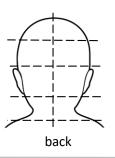
## Screen for head, face, and neck symmetry (visualize; measure with calipers)

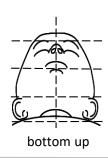
- 1. PROPORTION Cranial Index (CI) Width + Length x 100; also called Cephalic Ratio
- 2. ALIGNMENT Cranial Vault Asymmetry (CVA) also called Diagonal Difference







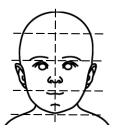


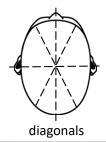


Note: illustrations do not depict all possible combinations of asymmetry.

## **Normocephaly**

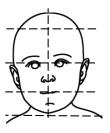
- CI: >76% to <90%; proportion within normal limits (WNL);</li>
  skull quadrants are relatively equal
- CVA: 0mm to 5mm; diagonal difference WNL;
  cranial and facial landmarks appear even, aligned

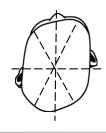




## **Plagiocephaly**

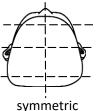
- CI: >76% to <90%; CVA: >5mm; severe >10mm
- skull flattening in one area (anterior or posterior)
  with a compensatory bulge (bossing) in another area
- rule out craniosynostosis, facial bone or neck muscle involvement

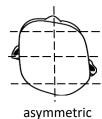




# **Brachycephaly**

- **CI**: >90%; disproportional; short wide skull; may include occipital flattening; parietal/temporal widening
- may be symmetric (CVA WNL), or asymmetric (CVA >5mm)
- rule out suture synostosis (coronal, lambdoid)

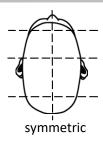


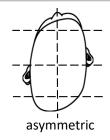


asymmetri

## **Dolichocephaly** (called scaphocephaly before ICD-10)

- CI: <76%; disproportional; elongated, narrow skull
- may be symmetric (CVA WNL), or asymmetric (CVA >5mm)
- rule out suture synostosis (metopic, sagittal)





## Torticollis, or neck muscle asymmetry

- neck muscle shortened, tightened from injury (congenital or acquired)
- often involves sternocleidomastoid muscle (SCM) or trapezius muscle
- highly correlated with plagiocephaly; usually treated with exercise
- may include weak neck muscles; limited range of motion; head tilt; positional preference; shoulder hike on involved side; face rotation to uninvolved side

