Assessment of Neonatal Sucking Patterns:
Normal, Disorganized, and Dysfunctional

Day 1 of the NOMAS® Certification Course

Presented by Marjorie Meyer Palmer, M.A.
Speech Pathologist
NOMAS® Instructor

Goals and Objectives:

At the end of this one day presentation the participant will:

1) Describe the anatomy and physiology of the oral mechanism in the term infant;

2) Explain the changing anatomy and physiology of the oral mechanism from birth to six months and its impact on oral feeding development;

3) Outline the relationship between non-nutritive and nutritive sucking;

4) Differentiate the oral-motor characteristics of the disorganized from the dysfunctional nutritive suck in the neonate.
Developmental Readiness to Feed: Anatomic and Physiologic Considerations

Presented by Marjorie Meyer Palmer, M.A.
Neonatal and Pediatric Feeding Specialist

Emergence of Primitive Oral Reflexes:

- Gag reflex - 32 weeks
- Rooting reaction - mouth opening at 32 weeks; sequence of four closer to term
- Transverse tongue reflex - 28 weeks
- Phasic bite - 28 weeks
- Non-nutritive suck - in utero
- Nutritive suck - immature pattern; mature pattern

3-6 Months

- Volitional suck
- Bilabial closure
- Tongue tip elevation
- Quiet jaw

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THE MOUTH AND PHARYNX OF THE NEWBORN
(saggital section)

- nasal conchae
- hard palate
- maxilla
- tongue
- mandible
- hyoid cartilage
- thyroid cartilage
- opening of eustachian tube
- pharyngeal tonsil (adenoids)
- nasopharynx
- soft palate (velum)
- vallecula
- epiglottis
- pharyngeal wall
- false vocal fold
- true vocal fold
- cricoid cartilage
- esophagus
- trachea
- larynx
THE MOUTH AND PHARYNX OF THE ADULT
(sagittal section)

nasal conchae
hard palate
maxilla
tongue
mandible

hyoid bone
thyroid cartilage

pharyngeal tonsil (adenoids)
opening of eustachian tube
nasopharynx
soft palate (velum)
vallecula
epiglottis
pharyngeal wall
false vocal fold
true vocal fold
larynx
cricoid cartilage
esophagus
trachea
Anatomy and Physiology of the Infant Oral and Pharyngeal Mechanism

Bibliography


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