

Children's Healthcare of Atlanta Plagiocephaly Severity ScaleSM

Level	Clinical Presentation	Recommendation*	CVAI
1	All symmetry within normal limits	No treatment required	< 3.5
2	Minimal asymmetry in one posterior quadrantNo secondary changes	Repositioning program	3.5 to 6.25
3	 Two quadrant involvement Moderate to severe posterior quadrant flattening Minimal ear shift and/or anterior involvement 	Conservative treatment: • Repositioning • Cranial remolding orthosis (based on age and history)	6.25 to 8.75
4	 Two or three quadrant involvement Severe posterior quadrant flattening Moderate ear shift Anterior involvement including noticeable orbit asymmetry 	Conservative treatment: • Cranial remolding orthosis	8.75 to 11.0
5	 Three or four quadrant involvement Severe posterior quadrant flattening Severe ear shift Anterior involvement including orbit and cheek asymmetry 	Conservative treatment: • Cranial remolding orthosis	> 11.0

^{*} This evaluation tool is provided to assist medical professionals in determining the appropriate course of treatment for their patients. Individual cases may vary. Recommendations are included as examples and should not be considered a substitute for individual evaluation, diagnosis and treatment decisions made by a medical professional.

Age: birth to 4 months

- A documented two-month period of repositioning is highly recommended prior to referring patient for cranial remolding orthosis evaluation. This conservative step is typically required by third-party payors before authorizing a cranial remolding orthosis.
- Tummy Time Tools: parent handout that provides repositioning activities
 - Download at www.choa.org/tummytimetools
- If torticollis is suspected, early referral to physical therapy is recommended.

Age: 5 months and older

Assess for further treatment when any of these secondary skull characteristics are observed:

PLAGIOCEPHALY

Clinical presentation

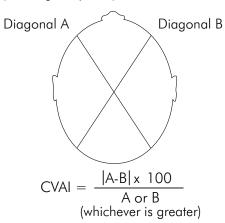
- Ipsilateral ear shift
- Ipsilateral frontal bossing
- Contralateral frontal flattening

Clinical documentation

- Measure the longest and shortest diagonal from the forehead to the posterior skull using calipers
- Calculate CVAI

Cranial Vault Asymmetry Index (CVAI)

Measure in millimeters (mm) at 30° from center of nose (outer edge of eyebrow).



BRACHYCEPHALY

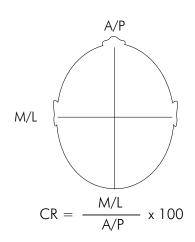
Clinical presentation

- Bilateral forehead bossing
- Increased posterior vault
- Bilateral protrusion of parietal bone above ears

Clinical documentation

- Measure the M/L and A/P lengths of the skull using calipers
- Calculate cephalic ratio (CR)
- If CR > 90, orthotic evaluation recommended

Cephalic Ratio (CR)



For concerns about possible synostosis, contact a neurosurgeon.