## Communication Recovery after TBI

## Assessment Overview: Speech Pathology

Participant ID: 047WDBA03

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **3 months** |  | **6 months** |  | **9 months** |  | **12 months** |  | **2 years** |  | **3 years** |  |
| Discourse  (TBIBank) | 9 | Discourse  (TBIBank) | 2 | Discourse  (TBIBank) | 2 | Discourse  (TBIBank) | Y | Discourse  (TBIBank) | 10 | Discourse  (TBIBank) |  |
| Verb Naming  (TBIBank) | **1** | Verb Naming  (TBIBank) | 3 | Verb Naming  (TBIBank) | 3 | Verb Naming  (TBIBank) | Y | Verb Naming  (TBIBank) | 2 | Verb Naming  (TBIBank) |  |
|  | x | \*FAVRES | 1/10 | \*FAVRES | NR | FAVRES | Y | FAVRES | 4 | FAVRES |  |
| Conversation (CP) | 8 | Conversation (CP) | 11 | Conversation (CP) | 1 | Conversation (CP) | Y | Conversation (CP) | 9 | Conversation (CP) |  |
| LCQ(SO) | 10 | LCQ(SO) | 12 | LCQ(SO) | ? | LCQ(SO) | Y | LCQ(SO) | 7 | LCQ(SO) |  |
| SPRS (SO) | 11 | SPRS (SO) | 13 | SPRS (SO) | ? | SPRS (SO) | Y | SPRS (SO) | 8 | SPRS (SO) |  |
| LCQ (P) | 6 | LCQ (P) | 4 | LCQ (P) | 5 | LCQ (P) | Y | LCQ (P) | 5 | LCQ (P) |  |
| SPRS (P) | 7 | SPRS (P) | 5 | SPRS (P) | 4 | SPRS (P) | Y | SPRS (P) | 6 | SPRS (P) |  |
| Repetition  (TBIBank) | 2 | Repetition  (TBIBank) | 6 | Repetition  (TBIBank) | 6 | Repetition  (TBIBank) | Y | Repetition  (TBIBank) | 1 | Repetition  (TBIBank) |  |
| Frenchay-2 | 5 | Frenchay-2 | 7 | Frenchay-2 | 7 | Frenchay-2 | Y | Frenchay-2 | 3 | Frenchay-2 |  |
| Boston-2 | 4 | Boston-2 | 8 | Boston-2 | 8 | Boston-2 | NR | Boston-2 | NR | Boston-2 |  |
| WAB-R | 3 | WAB-R | 9 | WAB-R | 9 | WAB-R | NR | WAB-R | NR | WAB-R |  |
| **\***ABA  \*If indicated | x | **\***ABA | NR | \*ABA | NR | \*ABA | NR | \*ABA | NR | \*ABA |  |  |  | FAVRES |

Coding: ✓ = Completed by researcher ; 🗹 Completed by treating SP, — = Not required, x = Attempted, not completed, O = Partially completed

## Reasons/Comments

e.g. ↑ fatigue; ↓ participation; factors that may impact upon responses, Repeat; Name of administrator

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| 3 months |
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|  |
| 6 months |
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|  |
| 9 months |
| Awaiting return of forms from mother |
|  |
|  |
| 12 months |
|  |
|  |
|  |
| 2 years |
| Participant reviewed at home, completed all assessments. Fatigue noted on tasks 3-4 of FAVRES. Mother completed questionnaires and conversation |
|  |
|  |
| 3 years |
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