## Communication Recovery after TBI

## Assessment Overview: Speech Pathology

Participant ID: 001WGHA

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **3 months 3 x 1hr** |  | **6 months** |  | **9 months** |  | **12 months** |  | **2 years** |  | **3 years** |  |
| Discourse  (TBIBank) | 1 | Discourse  (TBIBank) | 4 | Discourse  (TBIBank) | 8 | Discourse  (TBIBank) | 6 | Discourse  (TBIBank) | 3 | Discourse  (TBIBank) |  |
| Verb Naming  (TBIBank) | 1 | Verb Naming  (TBIBank) | 6 | Verb Naming  (TBIBank) | 5 | Verb Naming  (TBIBank) | 5 | Verb Naming  (TBIBank) | 4 | Verb Naming  (TBIBank) |  |
| \*FAVRES  Once in 12 mths | 3 | \*FAVRES | - | \*FAVRES | - | FAVRES | 8 | FAVRES | 1/8 | FAVRES |  |
| Conversation (CP) | 1 | Conversation (CP) | 3 | Conversation (CP) | 9 | Conversation (CP) | 7 | Conversation (CP) | 2 | Conversation (CP) |  |
| LCQ(SO) | 1 | LCQ(SO) | 1 | LCQ(SO) | A | LCQ(SO) | ✓ | LCQ(SO) | Y | LCQ(SO) |  |
| SPRS (SO) | 1 | SPRS (SO) | 2 | SPRS (SO) | B | SPRS (SO) | ✓ | SPRS (SO) | Y | SPRS (SO) |  |
| LCQ (P) | 3 | LCQ (P) | 10 | LCQ (P) | 7 | LCQ (P) | ✓ | LCQ (P) | Y | LCQ (P) |  |
| SPRS (P) | 3 | SPRS (P) | 9 | SPRS (P) | 3 | SPRS (P) | ✓ | SPRS (P) | Y | SPRS (P) |  |
| Repetition  (TBIBank) | 2 | Repetition  (TBIBank) | 7 | Repetition  (TBIBank) | 6 | Repetition  (TBIBank) | 1 | Repetition  (TBIBank) | 5 | Repetition  (TBIBank) |  |
| Frenchay-2 | 2 | Frenchay-2 | 8 | Frenchay-2 | 4 | Frenchay-2 | 2 | Frenchay-2 | 6 | Frenchay-2 |  |
| Boston-2 | 2 | Boston-2 | 5 | Boston-2 | 2 | Boston-2 | 3 | Boston-2 | NR | Boston-2 |  |
| WAB-R | 1 | WAB-R | 11 | WAB-R | 1 | WAB-R | 4 | WAB-R | 7 | WAB-R |  |
| **\***ABA  \*If indicated | - | **\***ABA | - | \*ABA | - | \*ABA | - | \*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 - EB |
| Required 3 x 1 hr sessions due to limited time allowed seated due to pressure area and fatigue |
| Short form of Boston as prior to change in protocol |
|  |
| 6 months – EB 11.30-1.30 |
| Unable to complete front page of SPRS self due to time limitations |
|  |
|  |
| 9 months – EB10.30-12.30 |
|  |
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|  |
| 12 months EB 10-1 |
| Unable to complete FAVRES fully as pt unwell and not enough time to complete. Rural participant. |
| LCQ and SPRS completed prior to appointment |
|  |
| 2 years |
|  |
| LCQ and SPRS completed prior to appt |
|  |
| 3 years |
|  |
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