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Treatment of Adult Speech and Language Disorders Part 2: Outpatient Rehabilitation

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Treatment of Adult Speech and Language Disorders Part 2: Outpatient Rehabilitation

Gabrielle Zimmer, M.S., CCC-SLP, CBIS
Kessler Institute for Rehabilitation
West Orange, New Jersey
Outpatient Therapy
Learner Outcomes:
1. Identify and define deficits in individuals related to language and motor speech.
2. Generate treatment goals to plan functional outpatient therapy treatment sessions when working with adults.
3. List 3-4 treatment tasks to utilize when targeting speech and language goals in the outpatient rehabilitation setting.
4. Describe 2 unique case studies in adult outpatient rehabilitation.

Overview
- Inpatient vs. Outpatient Rehabilitation
- Two case studies
  - Overview of diagnosis and deficits
  - Video samples of assessment
  - Goal writing
  - Video samples of treatment
  - Treatment planning
- Materials
- Summary/Questions

Inpatient vs. Outpatient

<table>
<thead>
<tr>
<th>Inpatient</th>
<th>Outpatient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spontaneous recovery</td>
<td>Prior speech therapy</td>
</tr>
<tr>
<td>Shorter length of stay</td>
<td>Prior recovery</td>
</tr>
<tr>
<td>Basic functionality</td>
<td>Self-identified goals</td>
</tr>
<tr>
<td>Next level of care</td>
<td>Community-based goals</td>
</tr>
<tr>
<td>Initial education</td>
<td>Ongoing care/support</td>
</tr>
</tbody>
</table>
Assessment

- Boston Diagnostic Aphasia Evaluation (BDAE-4)
- Boston Naming Test (BNT)
- Western Aphasia Battery (WAB)
- Expressive One Word Picture Vocabulary Test (EOWPVT-4)
- Apraxia Battery for Adults (ABA-2)
- Reading Comprehension Battery for Adults (RCBA-2)
- Receptive One Word Picture Vocabulary Test (ROWPVT-4)
- Ross Information Processing Assessment (RIPA-2)
- Behavioural Assessment of the Dysexecutive Syndrome (BADS)
- Measure of Cognitive Linguistic Abilities (MCLA)
- Frenchay Dysarthria Assessment (FDA-2)

Case Study #1: GD

- 69 year old male
- Full-time Cardiologist
- Severe TBI due to bicycle accident
- CT scan showed left-sided subarachnoid hemorrhage with midline shift
- Left temporal lobe contusion
- Craniotomy with evacuation of the bleed
- Partial left temporal lobectomy

Past Medical History
- Hypertension
- Hyperlipidemia
- Coronary artery disease
- Myocardial infarction in 2006

Transferred to acute inpatient rehabilitation

Initially transferred to Kessler in a vegetative-minimally conscious state
Case Study #1: GD

- Hospitalized for approximately 2 months
- Discharged to home with supervision
- Participated in approximately 2 months of home speech therapy 2-3x/week
- Discontinued services and did not transition to outpatient rehabilitation
- Poor compliance due to poor insight/awareness

Case Study #1: Assessment
BDAE-4 Cookie Theft

Case Study #1: Assessment
BNT-Short Form
Case Study #1: Assessment

BDAE Repetition

Case Study #1: Assessment

WAB Object Identification

Case Study #1: Characteristics

• Expressive Language
  – Severe Fluent aphasia
  – Moderately-severely impaired auditory comprehension
  – Jargon
  – Neologisms
  – Empty/run on speech
  – Semantic/literal paraphasias
  – Perseveration
  – Not stimulable for phonemic/semantic cues
  – Repetition at basic monosyllabic word level
  – Word retrieval deficits
  – Poor oral reading
Case Study #1: Characteristics

- Receptive Language
  - Severely reduced auditory comprehension
  - Poor Phonological Awareness
  - Unable to follow 1-step commands
  - Poor comprehension of basic task instructions
  - Poor y/n reliability
  - Poor single word comprehension (e.g. object I.D.)
  - Poor awareness of errors/poor self-monitoring

- Reading Comprehension
  - Basic functional level (e.g. family names, etc.)

- Written Expression
  - Basic functional-single word level

Case Study #1: Long Term Goals

- LTG #1: The patient will demonstrate accurate word retrieval abilities at moderately complex conversation level 80% of the time given moderate cues for home, community, medical and safety needs.

- LTG #2: The patient will demonstrate receptive language skills at the moderately complex conversation level with 80% accuracy given moderate cues for home, community, medical and safety needs.

- LTG #3: The patient will demonstrate reading comprehension skills at the basic 2-3 sentence level with 90% accuracy given minimal cues for home, community, medical and safety needs.

- LTG #4: The patient will demonstrate written expression skills at the basic sentence level with 90% accuracy given minimal cues for home, community, medical and safety needs.

Case Study #1: Short Term Goals

- STG #1: The patient will complete basic functional word retrieval tasks (e.g. naming family members, automatized sequences, naming objects, etc.) with 90% accuracy given maximal cues.

- STG #2: The patient will generate a basic subject/verb/object sentence shown a picture with 70% accuracy given maximal cues.

- STG #3: The patient will identify absurdities in basic statements with 90% success and maximal cues to improve functional auditory comprehension skills.
Case Study #1: Short Term Goals

• STG #4: The patient will increase basic auditory comprehension via accurately answering basic yes/no questions (e.g. pertaining to pictures) with 90% accuracy given moderate cues.

• STG #5: The patient will follow basic 1-step directions with 80% accuracy given maximal cues.

• STG #6: The patient will complete basic functional written expression tasks at the single word level (e.g. via picture naming) with 90% accuracy given moderate cues.

• STG #7: The patient will complete single word level reading comprehension tasks (e.g. picture/word matching) with 90% accuracy given moderate cues.

Case Study #1: Treatment

Family Names

Context Dependent Conversation
Case Study #1: Treatment
Copy and Recall

• Identify successful modalities
  – Visual
    • Write Key Words
    • Alphabet Board
    • Providing written phonemes (e.g. D_ _)
    • Oral Spelling
    • Utilize gestures
  • Increase awareness of paraphasias
    • Write words produced
  • Target auditory comprehension
  • Slow Speech Slightly
  • Maintain eye contact/focus
  • Limit verbosity
  • Tactile feedback

Case Study #1: Treatment Tasks

• Repetition
• Minimal Pairs
• Answering basic Wh-questions
• Categorization of pictures/objects
• Correcting incongruities in sentences
• Thematic Language Stimulation
• Gestural Training
• Copy and Recall
• Context Dependent Tasks
• Yes/No Given Visual Support
Case Study #1: Summary

• Fair gains in expressive and receptive language
• Improved awareness of errors
• Structured, highly repetitive treatment
• Ongoing

Case Study #2: JP

• 47-year-old male
• Employed as parole counselor
• Collapsed when boxing
• Occlusion of the left carotid artery resulting in a left MCA infarct
• Malignant edema s/p left hemicraniectomy
• Resultant right hemiplegia and global aphasia
• Dysphagia status post PEG tube placement
• Course complicated by aspiration pneumonia
• PMH of hypertension and obesity
• Hospitalized at the acute stage for 3 weeks
• Transferred to a rehabilitation setting and received inpatient therapy for 2.5 months
• Discharged to home with close supervision
• Home Care Services:
  - 2-3 days/week for 4 weeks
  - Upgraded to regular solid diet with all liquids
Case Study #2: Assessment
BDAE- Cookie Theft

Case Study #2: Assessment
BNT-Short Form

Case Study #2: Assessment
Body Part Identification
### Case Study #2: Characteristics

#### Expressive Language
- Severe non-fluent aphasia
- Telegraphic utterances
- Stereotypical Utterances/Overlearned Phrases
- Word Retrieval Deficits
- Poor syntax & grammar
- Paraphasias- semantic & literal
- Perseveration
- Stimulable for phonemic and semantic cues
- Expressive < Receptive

#### Receptive Language
- Preserved self-monitoring
- Auditory comprehension of basic information
- Poor body part identification
- Basic y/n reliability
- 1-Step Commands

#### Reading Comprehension
- Basic phrase-sentence level

#### Written Expression
- Basic Functional Level

### Case Study #2: Long-Term Goals

1. **LTG #1:** The patient will demonstrate basic functional expressive language skills at the sentence level 90% of the time given minimal cues for home, community, medical and safety needs.

2. **LTG #2:** The patient will demonstrate receptive language skills at the moderately complex conversation level with 90% accuracy given minimal cues for home, community, medical and safety needs.

3. **LTG #3:** The patient will demonstrate reading comprehension skills at the moderately complex multi-paragraph level with 90% accuracy given minimal cues for home, community, medical and safety needs.

4. **LTG #4:** The patient will demonstrate written expression skills at the basic sentence level with 90% accuracy given minimal cues for home, community, medical and safety needs.
Case Study #2: Short-Term Goals

• STG #1: The patient will complete a variety of basic word retrieval tasks (e.g. phrase completions, concrete divergent naming, naming synonyms/antonyms, naming objects, etc.) with 75% accuracy given maximal visual, verbal, tactile cues.

• STG #2: The patient will complete basic phrase-sentence level production tasks (e.g. SVO picture description, conversational exchanges, etc.) with 75% accuracy given maximal visual, verbal, tactile cues.

• STG #3: The patient will complete basic-moderately complex y/n reliability questions with 90% accuracy given minimal cues.

• STG #4: The patient will follow basic 2-step auditory directions with 90% accuracy given moderate cues (e.g. Body part identification, object manipulation, etc.)

• STG #5: The patient will complete basic single word level written expression tasks (e.g. basic phonics and irregulars at the monosyllabic word level) with 90% accuracy given minimal cues.

• STG #6: The patient will complete basic sentence level reading comprehension tasks (e.g. sentence/picture matching, following written directions, etc.) with 90% accuracy given minimal cues.

• STG #7: The patient will implement 1 word retrieval strategy during basic structured word retrieval tasks (e.g. circumlocution, SFA, written expression, gesture, etc.) with 90% accuracy given minimal cues.

Case Study #2: Treatment

Picture Description “What’s Wrong”
Case Study #2: Treatment Planning

- Script training: Initiating basic conversational turn-taking
- Training AAC (e.g. picture boards-speech generating application)
- Naming tasks (responsive/convergent/divergent)
- Object/picture naming & description
- Body part identification
- Moderately complex y/n reliability
- Inclusion of language applications for HEP
  - E.g. Thinker, Lingraphica, etc.
- Multimodal training- gestural, written expression, etc.
- Incorporating writing & reading across all tasks
- Functional Tasks- Restaurant simulation/MD appointments
Case Study #2: Summary

- Receptive language within functional limits
- Increased expressive language with written expression as improving compensatory strategy
- Discharged to transfer to a facility closer to home

Treatment Materials

- Treatment Books
  - WALC
  - HELP
  - SOURCE
  - Early Aphasia Therapy
- Applications
  - Lingraphica
  - Proloquo2go
  - TherAppy
  - Constant Therapy
- Language Activity Resource Kit (LARK)
- Alimed Cards: The Apraxia of Speech Stimulus Library
- Color Cards
- News for You- New Reader Press
- Language Games
- Incorporating language is common games
  - Cards, Checkers, Etc.

Summary

- Differential diagnosis
- Concomitant cognitive deficits
- Strong clinical decision making
- Functional Tasks
  - Consider Motivation: Work, Social, etc.
  - Group Therapy
- Well-rounded tasks/sessions
  - Think “outside the box”
Questions?

Contact Information

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