

## Motor Speech Disorders Evaluation

Name:  
ID/Medical record number:  
Date of exam:  
Referred by:  
Reason for referral:  
Medical diagnosis:  
Date of onset of diagnosis:  
Other relevant medical history/diagnoses/surgery  
Medications:  
Allergies:  
Pain:  
Primary languages spoken:  
Educational history:  
Occupation:  
Hearing status:  
Vision status:  
Tracheostomy:  
Mechanical ventilation:

### Subjective/Patient Report:

### Observations/Informal Assessment:

### Mental Status (check all that apply):

- alert
- responsive
- cooperative
- confused
- lethargic
- impulsive
- uncooperative
- combative
- unresponsive

**Oral Motor, Respiration, and Phonation**

**Lips**

WNL, mild, mod, severe impairment  
 Observation at rest (WNL, Edema, Erythema, Lesion): \_\_\_\_\_  
 Symmetry, range, speed, strength, tone:  
     Pucker \_\_\_\_\_  
     Retraction \_\_\_\_\_  
     Alternating pucker/retraction \_\_\_\_\_  
 Involuntary movement (e.g., chorea, dystonia, fasciculations, myoclonus, spasms, tremor): \_\_\_\_\_

**Tongue**

WNL, mild, mod, severe impairment  
 Observation at rest (WNL, Edema, Erythema, Lesion): \_\_\_\_\_  
 Symmetry, range, speed, strength, tone:  
     Protrusion \_\_\_\_\_  
     Retraction \_\_\_\_\_  
     Lateralization \_\_\_\_\_  
 Involuntary movement: \_\_\_\_\_

**Jaw**

WNL, mild, mod, severe impairment  
 Observation at rest: \_\_\_\_\_  
 Symmetry, range, strength, tone:  
     Opening \_\_\_\_\_  
     Closing \_\_\_\_\_  
     Lateralization \_\_\_\_\_  
     Protrusion \_\_\_\_\_  
     Retraction \_\_\_\_\_  
 Involuntary movement: \_\_\_\_\_

**Soft palate**

WNL, mild, mod, severe impairment  
 Observation at rest (WNL, Edema, Erythema, Lesion): \_\_\_\_\_  
 Symmetry, range, strength, tone: \_\_\_\_\_  
 Elevation \_\_\_\_\_  
 Sustained elevation \_\_\_\_\_  
 Alternating elevation/relaxation \_\_\_\_\_  
 Involuntary movement: \_\_\_\_\_

*Templates are consensus-based and provided as a resource for members of the American Speech-Language-Hearing Association (ASHA). Information included in these templates does not represent official ASHA policy.*

**Respiration/Phonation**

Observations/formal measures administered: \_\_\_\_\_

Activity	Stimulus	Quality	Duration	Loudness	Steadiness
Phonation		WNL Breathy Hoarse Harsh Strained-strangled	___ secs WNL Mildly impaired Moderately impaired Severely impaired	WNL Monoloudness Excessive loudness Variable loudness	
Oral reading		WNL Breathy Hoarse Harsh Strained-strangled	WNL Mildly impaired Moderately impaired Severely impaired	WNL Monoloudness Excessive loudness Variable loudness	
Conversation		WNL Breathy Hoarse Harsh Strained-strangled	WNL Mildly impaired Moderately impaired Severely impaired	WNL Monoloudness Excessive loudness Variable loudness	

**Oral Agility: Diadochokinetic Rates**

	Duration	Quality	Comments
P^	___/Per 3 sec.	WNL/mild/mod/sev	
T^	___/ Per 3 sec.	WNL/mild/mod/sev	
K^	___/Per 3 sec.	WNL/mild/mod/sev	
P^T^K^	___/Per 3 sec.	WNL/mild/mod/sev	

Other oral agility: \_\_\_\_\_

**Speech Intelligibility**

Standardized dysarthria/apraxia tests: \_\_\_\_\_

Non-Standardized Tasks: \_\_\_\_\_

Stimulus	Severity	Comments
Phoneme	WNL/mild/mod/sev	
Word	WNL/mild/mod/sev	
Sentence	WNL/mild/mod/sev	
Conversation	WNL/mild/mod/sev	

*Templates are consensus-based and provided as a resource for members of the American Speech-Language-Hearing Association (ASHA). Information included in these templates does not represent official ASHA policy.*

**Awareness/strategy use**

- Limited to no awareness of motor speech impairment
- Aware of motor speech impairment; unable to use strategies to improve intelligibility
- Uses strategies intermittently to improve intelligibility or listener’s understanding of message
- Uses strategies effectively and consistently to improve intelligibility or listener’s understanding of message

**Findings**

- Motor speech within normal limits
- (mild, mild-moderate, moderate, moderate-severe, severe) apraxia characterized by \_\_\_\_\_
- (mild, mild-moderate, moderate, moderate-severe, severe) dysarthria characterized by \_\_\_\_\_

Dysarthria type:

- ataxic
- hypokinetic
- hyperkinetic
- spastic
- flaccid
- mixed
- unilateral upper motor neuron

**Impact of Motor Speech Impairment on Functioning:**

**Activity Limitations and Participation Restrictions (check all that apply):**

	<b>Mild</b>	<b>Moderate</b>	<b>Severe</b>
General tasks and demands	_____	_____	_____
Household tasks	_____	_____	_____
Interpersonal interactions	_____	_____	_____
Education	_____	_____	_____
Employment	_____	_____	_____
Community	_____	_____	_____
Other _____	_____	_____	_____

**Safety Risks**

**Mild                      Moderate                      Severe**

*Templates are consensus-based and provided as a resource for members of the American Speech-Language-Hearing Association (ASHA). Information included in these templates does not represent official ASHA policy.*

Being left alone at home	_____	_____	_____
Traveling alone in community	_____	_____	_____
Other _____	_____	_____	_____

**Prognosis:**

Good  
 Fair  
 Poor  
 Based on \_\_\_\_\_

**Recommendations: (check all that apply)**

Speech-language pathology treatment  
     Frequency:              Duration:  
 Augmentative-Alternative Communication or Speech Generating Device  
 evaluation  
 Other suggested referrals:  
      Neurology  
      Otolaryngology  
      Pulmonology  
      Other

**Patient/Family Education**

Described results of evaluation  
 Patient expressed understanding of evaluation and agreement with goals  
 and treatment plan  
 Patient expressed understanding of evaluation but refused treatment  
 Family/caregivers expressed understanding of evaluation and agreement  
 with goals and treatment plan.  
 Patient demonstrated recommended strategies  
 Family/caregivers demonstrated recommended strategies  
 Patient requires further education on strategies  
 Family/caregivers require further education on strategies  
 Other \_\_\_\_\_

**Treatment Plan**

Long Term Goals

Short Term Goals