

## LocuTour's Session Checklists

The following checkboxes can be used to assist in creating SOAP notes.

### ***Subjective Observations***

S: During this session the client was observed to be:

- Alert
- Confused
- Oriented
- Disoriented
- Attentive
- Distracted
- Cooperative
- Uncooperative
- Putting forth good effort
- Putting forth minimal effort
- On time to appointment
- Late to appointment

### ***Non-speech Sounds and Movements***

A: When non-speech sounds occur frequently, the communicative message can be overshadowed and unintentional messages about connectedness to the speaker/listener communication may be sent.

During this session the client exhibited:

- Belching noises
- Cough
- Chronic throat clearing
- Talking with food in the mouth
- Hiccup
- Laugh
- Lip smacking
- Body movements
- Sneezing
- Yawning
- Place holder "um"
- Starter "um"
- Loud breathing
- Sighing
- Teeth chattering
- Humming
- Nasal emissions
- Idiosyncratic sound effects

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### *Plan of Treatment*

P: The follow-up plan of treatment should:

- Provide information and education concerning the clinical findings
- Determine treatment readiness and assess insight and motivation for change
- Determine if the client is unwilling or unable to make changes to improve speech, then provide information concerning the issues of change
- Assist client with committing to the need for change
- Delineate client and clinician goals and roles in treatment
- Modify abnormalities of posture, tone and strength
- Modify respirations
- Modify phonation, voice onset, and voicing
- Modify resonance
- Modify volume
- Modify articulation
- Modify syllable stress and sequencing
- Modify rate
- Modify suprasegmentals, prosody, rhythm, and intonation
- Provide alternative modes of communication
- Establish and reinforce a maintenance plan
- Provide follow-up care and recommendations to necessary professionals
- Determine current level of functioning at discharge
- Assess for communication satisfaction