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Assessment & Treatment of Aphasia Cheat Sheet by aoife via cheatography.com/165126/cs/34587/

Assessment of Aphasia	2. Language comprehension	3. Expressive language (cont)	Restorative Approaches	
 Many standardized tests available Initially often screening tools used or informal assessment Provides basic information on the patient's language abilities Enables therapist/ team to pitch 	 Does the patient appear to follow the conversation? Can they follow 1, 2, 3 -step commands Do they comprehend Yes/No questions reliably? Are you in the hospital? Do helicopters eat their young? Do they understand gestures or non-verbal communication Reading comprehension 	Using names: Who is thePrime Minister?Can the person write?	Aim to recover skills	use intact abilities to communicate
		 Own name, address, letters of the alphabet/ numbers, names of objects etc. In sentences? 		cortical reorga- nisation of damaged hemisphere
communication at the level in which the patient understands or can express 1. General information		 → SLP notes spelling errors/ substitutions/ omissions Observations Getting ideas to figure out the type of aphasia the client has 	Treatment of auditory compre- hension and spoken language	increased involv- ement of undamaged areas
Obtain medical historyObtain history from the patient	3. Expressive language	Treatment of Aphasia		directly stimulate specific listening, speaking, reading and writing skills
or significant other • Determine the patient's primary language • Determine hearing status and visual acuity • Determine the patient's pre- morbid language abilities & educational level • Determine the patient's cognitive function	 Conversational speech Fluent? Comprehensible? Slow or laboured? Words or sentences? Paraphasias? Naming: Confrontation: What's this? Associative: Pen and, table and Responsive: Where do you buy milk? 	Factors to • Type and consider: severity of impairment		
		 Motivation Medical needs/ condition 		single word, sentence, and paragraph level
		Treatments • Restorative either:	Broad number of techniques	Visual Action Therapy, Melodic Intonation Therapy, Constr- aint-induced therapy
		Compensatory Goals of therapy: 1. maximize recovery of impaired function		
		2. assist in the development of communication strategies	Trigger new neurons to act and stimulate these skills	
		 help the patient adjust to the residual deficits of the brain injury 		

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Compensatory Approaches

> Restorative Approaches may not be appropriate because of the severity of the disorder > Train the individual to use any means to communicate new or different ways of completing a task · lessen the impact of their communication difficulty → e.g. AAC/ communication apps, writing or drawing etc. > Focusing on communication & participation rather than on recovery of speech alone > Helping significant others adjust to a new communication style

Compensate for the inability to restore old skills

Communication Dos & Don'ts

Talk to the person as an adult
 Simplify sentence structure & reduce your rate of speech

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them

Communication Dos & Don'ts (cont)

! but keep speech adult-like > Minimize or eliminate background noise > Make sure you have the person's attention before communicating ➢ Encourage and use all modes of communication Speech/ writing/ drawing / yes-no response > Give them time to talk & permit a reasonable amount of time to respond > Don't finish sentences for the person with aphasia > Accept all communication attempts > Keep trying > They need to do it if they want to trigger these changes in the brain so don't finish word for

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