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**Speech-Language Evaluation**

Name: XXXX YYYY  
DOB: 5/21/12  
CA: 2 years 10 months

Date: 4/17/15  
Evaluator: \_\_\_\_\_, MS  
CCC-SLP, TSHH

**Background Information**

XXXX, age 2 years 10 months, was seen in his home for a speech-language evaluation. This evaluation was authorized by the \_\_\_\_\_ school district, as XXXX transitions from the Early Intervention system. The primary concern was with XXXX's speech intelligibility.

**Behavioral Observations**

XXXX smiled in response to the evaluator's greeting and easily transitioned to the evaluation area. He was attentive and cooperative throughout the evaluation. XXXX attempted all tasks presented to him. He commented on the picture plates of standardized testing and on objects in his environment, though his utterances were difficult to understand, and parent interpretation was often necessary. XXXX demonstrated appropriate use of eye contact, facial expression, and gesture, and an age-appropriate attention span.

**Audition**

XXXX passed a newborn hearing screening. He localized to sounds and voices during the evaluation, and responded when his name was called. He was reported to experience chronic ear infections, and is being monitored by an ENT for possible tympanostomy tube placement and adenoidectomy. XXXX's hearing was reported to be within normal limits as per his doctor.

**TESTS ADMINISTERED AND RESULTS:**

| <u>Test</u>              | <u>Standard Score</u> | <u>Percentile Rank</u> | <u>Age Equivalent</u> | <u>Standard Deviation</u> |
|--------------------------|-----------------------|------------------------|-----------------------|---------------------------|
| <u>PLS-5</u>             |                       |                        |                       |                           |
| Auditory Comprehension   | 101                   | 53                     |                       | WNL                       |
| Expressive Communication | 103                   | 58                     |                       | WNL                       |
| Total Language Score     | 102                   | 55                     |                       | WNL                       |

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|                                       |     |                     |      |
|---------------------------------------|-----|---------------------|------|
| <u>Brown's Stages of Grammar</u>      |     | Stage III=36 months | WNL  |
| <u>Prutting's Pragmatic Checklist</u> |     | Stage III=3 years   | WNL  |
| <u>CAAP</u>                           |     |                     |      |
| Articulation                          | <55 | <1                  | -3.0 |
| Phonology                             | <55 | <1                  | -3.0 |

\*Standard scores are based on a mean of 100, with a standard deviation of 15. Standard scores within a range of 85-115 are considered to be within normal limits. To be eligible for services, a child must exhibit a score of 2 standard deviations below the mean (a standard score of 70 or lower) in one area, or 1.5 standard deviations below the mean in two separate areas of development.

### Receptive and Expressive Language:

The Preschool Language Scale-5 (PLS-5) is comprised of two subscales: Auditory Comprehension and Expressive Communication. The Auditory Comprehension subscale is used to evaluate how much language a child understands. The tasks on this subscale that are designed for infants and toddlers target skills that are considered important precursors for language development (i.e. attention to speakers, appropriate object play). The tasks designed for preschool-age children assess comprehension of basic vocabulary, concepts, and grammatical markers. The Expressive Communication subscale is used to determine how well a child communicates with others. The tasks on this subscale that are designed for infants and toddlers address vocal development and social communication. Preschool-aged children are asked to name common objects, use concepts that describe objects and express quantity, and use specific prepositions, grammatical markers and sentence structures.

The PLS-5 was administered on 2/6/15 as part of an Early Intervention progress update.

Results of the auditory comprehension subtest of the PLS-5 revealed a standard score of 101 and a percentile rank of 53, indicating skills to be within normal limits. XXXX followed routine, familiar directions with gestural cues, identified familiar objects from a group of objects without gestural cues, identified photographs of familiar objects, followed commands with gestural cues (i.e. "Get the bear and give it to mommy"), identified body parts and clothing items on himself, demonstrated understanding of the verbs "eat, drink, sleep" in context (i.e. "Mr. Bear is thirsty. Give him something to drink"), pronouns (me, my, your), use of objects (i.e. "Show me what you wear on your feet"), spatial concepts (in, on, out of, off), and quantitative concepts (one, some, all), followed commands without gestural cues, recognized actions in pictures (i.e. "Show me the child who is sleeping"), made inferences (i.e. "Look at these pictures. Show me which picture answers my question. Anna hurt her knees and elbows. How do you think Anna

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got hurt?" pointed to a picture of a crashed bicycle), identified colors, engaged in symbolic and pretend play.

Results of the expressive language subtest of the PLS-5 revealed a standard score of 103 and a percentile rank of 58, indicating skills to be within normal limits. XXXX participated in a play routine with another person, imitated words, produced at least three different types of consonant-vowel combinations (CV, CVC, CVCV), initiated a turn-taking game/social routine, used at least five words, used gestures and vocalizations to request objects, demonstrated joint attention, named objects in photographs, use words more often than gestures to communicate, and use words for a variety of pragmatic functions (request/label objects/actions, request repetition, request assistance, answer yes/no questions, use a word to get attention), used different word combinations (i.e. noun+verb, verb+noun, noun+verb+location), combined three to four words in spontaneous speech, used at least ten nouns, two modifiers, and a pronoun in spontaneous speech, produced one four to five-word sentence, used present progressive (verb+ing) (i.e. eating, sleeping), and plurals.

### Language Sample:

A language sample is an in-depth analysis of spontaneous speech and language, including syntax, semantics, and morphology (word order and meaning and use of grammatical structures) using norm-referenced and developmental measures.

Analysis of a representative sample of XXXX's spontaneous speech revealed a mean length of utterance (MLU) (average number or morphemes per phrase) of 3.00, with utterances ranging in length from 1 to 6 morphemes (smallest meaningful unit of a word), XXXX's chronological age=34 months, with an expected, correlated MLU of 3.00, and a predicted age of 30 months. This signifies MLU to be within normal limits.

Further syntactic analysis (grammatical forms) revealed functioning in Brown's Stage III= 36 months. XXXX demonstrated use of pronouns (I, me, mine, you, he, we), demonstratives (this, that), and present progressive -ing verb tense, and inconsistently negatives used with auxiliary (don't, can't), prepositions (with, to), plurals, and articles (a, the). Skills are within normal limits in this area.

### Pragmatic Language:

XXXX demonstrated functioning in pragmatic language (social use of language) in Prutting's Stage III= 3 years. XXXX utilized language to greet, request, protest, label, and describe objects and actions, and to express his wants and needs. He asked and answered yes/no and wh-questions and engaged in verbal turn taking for 2-3 turns. Skills are within normal limits in this area, however it should be noted that XXXX's delays in articulation/phonological skills impinge upon his ability to clearly utilize language for social purposes, and he becomes frustrated when his intent is not understood and his needs are not met.

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### Articulation/Phonology:

The Clinical Assessment of Articulation and Phonology (CAAP) was administered to assess sound production in initial, medial, and final positions of words. Results of the articulation portion of the CAAP revealed a standard score of <55 and a percentile rank of <1, indicating skills to be 3.0 standard deviations below the mean.

XXXX demonstrated use of the following sound substitution errors:

Initial Word Position: t/k, d/g, w/r, d/f, b/v, d/s, s/z, d/sh, t/j, t/ch, y/l, f/th as in "thumb,"

w/th as in "them," tihy/kl, fw/fl, d/gl, s/sk, s/sn, f/sw, b/br, f/tr, p/k, w/gr, m/l.

Medial Word Position: m/zh as in "treasure."

Final Word Position: k/g, t/d, f/th as in "teeth," p/j, f/s, t/f, yuh/l, p/b, p/th as in "bathe," p/v, s/j, uh/er, oh/l.

Omission of /f, k, n, t, v, z, sh, ch, ng, er/ were observed in final word position.

According to the CAAP developmental norms, the /d, h, m, n, p, w/ sounds were mastered (produced by 95% of children) by age 2, the /b, g, k, t/ sounds were mastered by age 3, the /f, y, ng/ sounds were mastered by age 4, the /j, l, s, v, z, sh, ch/ sounds were mastered by age 5, the /r, er, zh/ sounds were mastered by age 6, the /th/ sound as in "this" was mastered by age 7, and the /th/ sound as in "thumb" was mastered by age 8.

Results of the phonology portion of the CAAP (Checklist I, using the words from the articulation portion) revealed a standard score of <55 and a percentile rank of <1, indicating skills to be 3.0 standard deviations below the mean. XXXX demonstrated use of the following phonological processes: Syllable Structure: Final Consonant Deletion (omission of the last sound from a word) (50% of occurrence, and observed more but not on on scored words), Cluster Reduction (omission of one sound from a cluster of two or substitution of one sound for a group of two: d/gl, s/sk, s/sn, f/sw, b/br, f/tr, w/gr) (78% of occurrence), Syllable Reduction (omission of one or more syllables from a word) (11% of occurrence); Substitution: Gliding (w/l, w/r, y/l) (71% of occurrence), Vocalization (vowel for l, r, er) (88% of occurrence), Fronting (Velar: t/k, d/g; and Palatal: d/sh, t/j, t/ch) (60% of occurrence), Deaffrication (i.e. sh/ch) (not observed), and Stopping (stopping the airflow from a sound: t/f, d/f, b/v, d/s, d/sh, t/j, t/ch) (70% of occurrence); and Assimilation: Prevocalic Voicing (i.e. production of a voiced consonant for a voiceless consonant at the beginning of words/before a vowel: d/f, d/s, d/sh) (38% of occurrence) and Postvocalic Devoicing (production of a voiceless consonant for a voiced consonant at the end of words: k/g, t/d, p/j, p/b, s/j) (88% of occurrence).

Phonological process use was suppressed by 90% of the normative sample of the CAAP by the following ages: between ages 2 1/2 and 3-Fronting and Stopping; by age 3-Cluster Reduction, Syllable Reduction, Prevocalic Voicing, and Postvocalic Devoicing; between age 3 and age 3 1/2-Final Consonant Deletion; by age 5-Vocalization and Gliding.

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XXXX demonstrated excessive use of vowel distortions, sound preferences for /d/ and /p/, and atypical sound substitution errors, (p/j, w/th as in "them," f/tr, m/zh as in "treasure," p/k, w/gr) were observed. Overall speech intelligibility was judged as poor in known contexts and short utterances (less than 3 words), and partially to fully unintelligible in unknown contexts and longer utterances (more than 4 words). As sentence length increased, speech intelligibility decreased. XXXX produced words different ways upon multiple repetitions (i.e. "dup" and then "duf" for "glove," "wehjuh" and "wuh-ee" for "Gregory"). A Percentage of Consonants Correct (PCC) Analysis of a spontaneous speech sample revealed 29% of consonants to be produced accurately, indicating a severe disorder.

XXXX was observed and reported to become extremely frustrated when his utterances were not understood. He was observed and reported to either shut down and refuse to speak or to act out physically at these times. Mrs. YYYY reported that it is necessary for her to translate XXXX's utterances for friends and family members, including XXXX's father and grandparents, whom he sees daily. She further reported that XXXX is aware that others don't understand him and will try to find another way to say what he wants to say before getting upset. XXXX was reported to be quiet at school, however his teachers and peers were reported to have difficulty understanding his speech when he does verbalize.

A sample of XXXX's spontaneous utterances\* are as follows:

1. "Duh with ih" (Done with it).
2. "Uh, dih wuh daw doh with dat" (Uh, this one don't go with that).
3. "Daw tah" (Good catch).
4. "Pay tah to me" (Play catch to [with] me).
5. "Ih do way" (It don't work).
6. "Ih ih uh yih-oh woo" (It in the little room).
7. "I taw wees ih" (I can't reach it).
8. "How bow we deh \_\_ \_\_?" partially unintelligible (How 'bout we get \_\_ \_\_?)
9. "Ta I haw do dit?" (Can I have [a] glow stick?)
10. "You doh deh me daw-uh?" (You go get me [my] jacket?)

\*Parent translation of these utterances was necessary.

### Oral-Motor/Feeding:

Oral-facial structures were symmetrical upon rest and sound production. Strength and tone of the oral-facial musculature was judged to be within normal limits. A closed mouth

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posture was observed at rest. XXXX was reported to bite and chew a variety of food tastes, textures and temperatures without choking or gagging. He was reported to drink from an open cup and straw without liquid loss or coughing. Oral-motor/feeding skills are within normal limits.

### Fluency:

The rhythm and rate of speech appeared to be within normal limits at this time. This area should be further assessed as speech intelligibility improves and sentence length increases.

### Voice:

Parameters of voice, with respect to pitch, quality, volume and resonance were judged to be within normal limits for age and gender.

### Conclusion

XXXX, age 2 years 10 months, was seen for a speech-language evaluation as he transitions from the Early Intervention system. Results of the auditory comprehension subtest of the PLS-5, administered on 2/6/15 as part of an Early Intervention Speech Evaluation, revealed a standard score of 101 and a percentile rank of 53, indicating skills to be within normal limits. Results of the expressive communication subtest of the PLS-5 revealed a standard score of 103 and a percentile rank of 58, indicating skills to be within normal limits. A total language standard score of 102 and a percentile rank of 55 were attained on the PLS-5, indicating overall skills to be within normal limits. Mean length of utterance is within normal limits. Use of grammatical structures is at Brown's Stage III=36 months, which is within normal limits. XXXX demonstrated pragmatic language skills at Prutting's Stage III=3 years, which is within normal limits. It should be noted, however, that XXXX's delays in articulation/phonological skills impinge upon his ability to express himself clearly, and he is reported to become frustrated when his intent is not understood. Results of the articulation portion of the CAAP revealed a standard score of <55 and a percentile rank of <1, indicating skills to be 3.0 standard deviations below the mean. Results of the phonology portion of the CAAP revealed a standard score of <55 and a percentile rank of <1, indicating skills to be 3.0 standard deviations below the mean. Overall speech intelligibility was judged as poor in known contexts and partially to fully unintelligible in unknown contexts. Excessive use of phonological processes, vowel distortions and atypical sound substitution errors were observed. Oral-motor/feeding, fluency, and voice skills are within normal limits.

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Recommendations:

Speech therapy is recommended to improve articulation/phonological skills. Final decision for provision of services is made by the CPSE.

Certification Statement:

This therapist discussed the child's strengths and weaknesses, including any concerns the parent may have had about the evaluation process. I have offered assistance in understanding the evaluation techniques and ensured that the evaluation has addressed the parent's concerns and observations about the child. I certify that I personally evaluated the above named child, employing age-appropriate testing instruments and procedures, as well as informed clinical opinion. I have discussed the results of the evaluation with the family. The family was also given the agency's contact number should they have any questions.

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\_\_\_\_\_, MS CCC-SLP, TSHH  
Speech-Language Pathologist, License #