

**Pre-Therapy Assessment**

Patient Name:

Patient ID:

Age/Gender:

Languages known/used:

No.Of sessions/week:

Provisional Diagnosis:

Clinician:

Date:

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**Brief History**

## OPME

ORGAN	SRUCTURE	FUNCTION
Lip		Puckering: Rounding: Spreading :
Teeth		Biting: Chewing:
Tongue		Elevation: Lateral movements: Protrusion: Retraction:
Hard palate		
Soft palate		Symmetrical movements:
Uvula		
Jaw		
IOBP:		Drooling:

### Vegetative skills

- Blowing:
- Swallowing:
- Chewing:
- Sucking:
- Biting:

### Pre linguistic skills

- Attention:
- Eye contact:
- Name call response:
- Sitting tolerance:
- Compliance:
- Pointing:
- Turn taking:

### Language skills

Language comprehension:

Language expression:

- Mode of communication: verbal/ non verbal

Pragmatic skills

- Greetings:
- Social interaction:
  - Engages in interaction:
  - Initiate interaction:
- Social smile:

Play:

- Solo play:
- Peer play:
- Instrumental play:
- Imaginative play:
- Narration:
- Topic initiation:
- Topic maintenance:
- Topic termination:

Cognitive skills:

- Object permanence:
- Object use:
- Sequencing:
- Selection:
- Matching:- object to object: \_\_\_\_\_ Object to picture: \_\_\_\_\_
- Categorization:
- Reasoning:
- Judgment:
- Gender concept:
- Money concept:

Semantic relations:

- Appearance/Disappearance:
- Possession:
- Rejection:
- Possession:
- Location:
- Denial:
- Imitation:

Language Test Results:

Speech skills:

Articulation:

Voice:

Fluency:

Speech test results:

Academic skills:

Remarks:

Provisional diagnosis:

Selected Goals:

Speech Language Pathologist