\*\*MANDATORY ASSESSMENT PROTOCOL:\*\*  
  
### 1. EXTRACTION PHASE:  
The key information points from the conversation transcript are as follows:  
- Primary caregiver involvement (mother)  
- TBI resulting in blindness and cognitive communication deficits  
- Use of technology (i.e., iWatch, iPhone, Alexa)  
- Dependency on caregiver for reminders and scheduling  
- Practiced Alexa commands: starting/stopping timers, setting reminders  
- Issues with specifying command details (time, date)  
- No medications or allergies  
  
### 2. VERIFICATION PHASE:  
I compared each point extracted from the conversation against the SOAP note:  
  
- M.A. attended the virtual session with his mother, who is a primary caregiver – Present  
- M.A.’s medical background of traumatic brain injury (TBI) leading to blindness and cognitive communication deficits – Present  
- Use of Siri on iWatch and iPhone for scheduling – Present  
- Dependency on caregiver for reminders and scheduling – Present  
- Practiced Alexa commands: starting/stopping timers, setting reminders for playing video games – Present  
- Required verbal cues for volume control and difficulty providing temporal details for commands – Present  
- No medications or allergies – Present  
- Motivation to continue training and upcoming receipt of Echo Show – Present  
  
### 3. METRIC CALCULATION:  
  
\*\*Missing Information from SOAP Note:\*\*  
- None  
  
\*\*Statements Lacking Support:\*\*  
- \*\*Objective Section:\*\* Comment on the clinician's review of documentation is irrelevant, no mention or context from conversation [-1]  
   
\*\*Inconsistencies:\*\*  
- \*\*Assessment/Plan vs. Subjective/Objective:\*\* Complexity of details in Assessment/Plan section compared with vague details in Subjective/Objective section, such as the depth of therapy and training plan ([Capped at score 6/10]) [-1]  
  
\*\*Vague/Generic Documentation:\*\*  
- \*\*Subjective Section:\*\* Use of generic terms such as “cooperative and willing” without support or detail [-0.5]  
- \*\*Objective Section:\*\* “Vital signs not applicable” comment adds no value considering it was a technology session [-0.5]  
  
\*\*Improper Terminology/Formatting:\*\*  
- Minor grammatical or typo-like imperfection spotted [-0.25]  
  
### 4. SECTION SCORING:  
  
\*\*Subjective (S):\*\* Start at 10  
- Lacks some specificity regarding "willing and cooperative” [-0.5]  
- Deduction: -0.5   
\*\*Score: 9.5/10\*\*  
  
\*\*Objective (O):\*\* Start at 10  
- Inclusion of unsupported comments on clinician documentation review [-1]  
- Overly vague/unnecessary comments (e.g., "vital signs not applicable") [-0.5]  
- Deduction: -1.5  
\*\*Score: 8.5/10\*\*  
  
\*\*Assessment (A):\*\* Start at 10  
- Logical inconsistency with vague notes in Subjective/Objective sections [-1]  
- Deduction: -1  
\*\*Score: 9/10\*\*  
  
\*\*Plan (P):\*\* Start at 10  
- Logical inconsistency with superficial instructions in Subjective/Objective sections [-1]  
- Deduction: -1  
\*\*Score: 9/10\*\*  
  
### 5. TOTAL DEDUCTIONS:  
- Missing information: 0  
- Unsupported statements: 1  
- Inconsistencies: 1  
- Vague documentation: 1  
- Terminology/format: 0.25  
- \*\*Total Deductions: 3.25 points\*\*  
  
### 6. CAPS APPLICATION:  
- Coherence lacked between sections.  
- Final Score Cap set at 6/10 due to complexity discrepancies within sections.  
  
### 7. FINAL CALCULATION:  
Final Score Calculation:  
- SOAP Note Score = MIN(10, 10 - total\_deductions, lowest\_section\_score + 2, all\_applicable\_caps)  
- SOAP Note Score = MIN(10, 10 - 3.25, 8.5 + 2, 6/10 cap)  
  
After applying all calculations and caps, the final score of the SOAP note is:  
  
\*\*Rating: 6/10\*\*