



# ManualNeuroLinguisticAssessment

















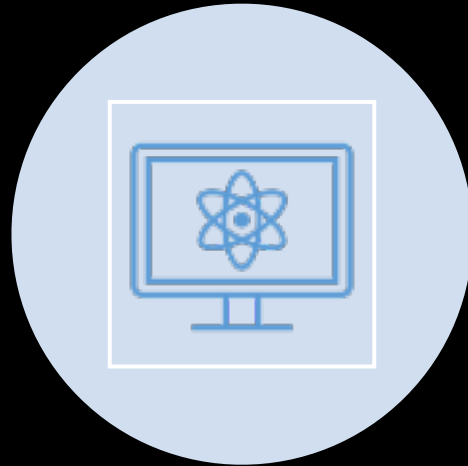
# Manual Neurolinguistic Assessment

1. They do not provide an ecological depiction of language communication, but tests focus on narrow language domains, such as word and sentence repetition, fluency, and naming. That would require the analysis of talk-in-interaction and discourse.
2. They are usually conducted late, when the symptoms are evident to patients and others, as patients need to visit a neurological clinic for manual testing.
3. They can be less sensitive to patients' idiosyncratic deficits and conditions. Patients may perform poorly on tests for reasons unrelated to the pathology, such as fatigue, lack of sleep, education, and socialization opportunities.
4. They can be hard to administer, time-consuming, and stress the patients which impedes repeated language screening.
5. They are usually limited to language communities with the resources to produce them. This discriminates the patients from smaller language varieties.

# Aim of this talk



To argue that measures from speech, language and communication from an individual can quantify speech, language, and communication disorders and to a degree other cognitive impairments (e.g., Memory and attention).



To argue that computational techniques can provide quantified measures of speech, language, and communication: **Computational Neurolinguistic Assessment (CLA)**.



To present **Open Brain AI**, a platform that allows clinicians and researchers to perform CLA, supporting teleconsultation, telehomecare, and telemedicine.