

Sample Format (ACCI Choice pro Dedicated) (Use Letterhead)

Augmentative Communication Device Request

Name: _____ Date of Birth: _____
Address: _____ Age: _____
Parent: _____ Phone: _____

Date of Report: _____

Diagnosis : R47.1 Dysarthria, Q90 Down Syndrome

Background Information:

(Note: Each case will be worded differently)

_____, a young lady with Down Syndrome, has been followed for speech therapy by this office since 2006, initially at a frequency of 2X/week which was decreased to 1x/week as she entered the school system and then further decreased to summer only therapy for the past two years. Client is a long term AAC user. While extensive therapy addressed her severe oral motor deficits for years, her attempts at speech are unintelligible except to a highly familiar listener such as her grandmother (and guardian). Client has used an (name of device) AAC device for the past several years. However, as she enters adolescence, the device no longer meets her growing needs for communication. The volume on the (name of device) is not loud enough to be heard by her peers in everyday teen situations. Therefore, over the summer alternative device trials were conducted and a decision made to trial the ACCI Choice pro Dedicated (ACCI Choice pro Dedicated with the iAdapter case which includes a built in speaker system to enhance voice output.)

Device Trial

During the summer, Client used the ACCI Choice pro Dedicated with the Proloquo2Go communication program. This is a page based system, similar to her current (name of device). However, it includes better access to social language that is necessary at this age and less reliance on simply choosing things she wants. Throughout the summer, she was able to use it in simulated conversations about going shopping at the mall, going out to eat with friends and getting medical help for her grandmother or herself if needed. Her grandmother is her sole caregiver. She was excited about how lightweight it was compared to her current system. All those around her, especially her grandmother, can hear the natural sounding teenage voice. The device can also be integrated in school with all her academic subjects, allowing additional access to language during the school day than is possible at the present time. Her academic work cannot be programmed into her existing AAC device. When the (name of device) was purchased for her, the ACCI Choice pro Dedicated did not exist.

Speech, Language and Cognitive Status

Extensive standardized testing has been completed in the past and is summarized here. On **the Goldman Fristoe Test of Articulation**, she has consistently earned standard scores of less than 40. She makes multiple errors on all speech sounds. Her mouth is held in an open posture and she requires maximum cues to bring her lips together to make bilabial (m, p, b) sounds. With the cues, she is able to make the sounds but then has difficulty using them in spontaneous speech. She tends to keep her mouth in the open position with little tongue movement while speaking. Her speech is unintelligible to unfamiliar listeners. She has received therapy for the past 7 years focusing on verbal speech. Additional improvements are likely to be minimal. At this point an AAC device is essential for others to understand her sentences.

On the Expressive One Word Picture Vocabulary Test, she achieves a standard score of 78. This is significantly above the level of her articulation ability. She has the vocabulary but is unable to be understood by anyone except highly familiar listeners within a known context.

Client is fully capable of speaking in 5-6 word sentences. However, her severe dysarthria of speech continues to interfere with functional communication. When sentence length is increased, intelligibility decreases. Sentence length is often reduced to 1-2 word sentences so the listener can

understand the content of her message. When her peers are unable to understand her, she withdraws from communication interaction and becomes increasingly depressed.

Requested Device

ACCI Choice 16 pro™ Dedicated with an iAdapter Case

Manufactured by ACCI
Two year limited warranty

Available from: Augmentative Communication Consultants, Inc
PO Box 731
Moon Township, PA 15108

Toll Free: 1-800-982-2248
1-412-264-6121

Fax: 1-412-269-0923

E-Mail: acci1@earthlink.net

Web-Address: www.ACCIinc.com

Certification and Prescription:

I certify that I am not an employee of ACCI or have any financial relationship with the supplier of the speech generating device.

A copy of this report has been sent to her primary care physician who was asked to write a prescription for the device.

Report was faxed to the treating Physician on: _____

(Signature of SLP)

Write Name and Title
ASHA#
State License #

Date