

IMPRESSION: **PT NAME** is a **XX**-year old **boy/girl** with **[delays in]** or **[a disorder of]**

- receptive
- expressive language
- communication
- speech

The assessment found that **PT NAME** has many strengths including **[check all that apply]**

- Appropriate use of non-verbal communication
- Imaginative play appropriate for age
- Motivation to interact socially
- Appropriate receptive language skills
- A pleasant personality
- Willingness to cooperate and work hard

We found that **He/She** does not meet the criteria for autism spectrum disorder **[because of ...]**.

Difficulties with language and speech may be associated with other delays in development. We found that **PT NAME's**

- gross motor and fine motor development is/is not delayed
- thinking skills and problem solving are/are not delayed
- social skills are/are not age appropriate

Difficulties with language and speech may be associated with behavioral problems. For some children with delayed communication, behavioral arise when a child is frustrated at his/her ability to express himself/herself. For some children, the behavior problems accompany communication difficulties. We found that **PT NAME** had **[check all that apply]**

- Difficulties with aggression/tantrums
- Limited ability to pay attention, control activity level, and curb impulsivity
- Excessive worries or anxiety
- Other

In some cases, the underlying biological or neurological cause of the delays/disorder of communication can be determined. In **PT NAME's** case we know/suspect that the child has the following conditions:

- Hearing loss
- Global cognitive impairment
- Genetic disorder
- Neurological disorder

We do not think the child's language **delay/disorder can be explained by**

- Being a boy
- A bilingual household
- Early otitis media
- Other:

Based on this assessment, **I/we** make the following recommendations:

PLAN:

- I/We** have referred **PT NAME** for Speech and Language evaluation at Lucille Packard Children's Hospital at Stanford.
- In order to ascertain that the speech and language delay is not caused by a hearing loss, **I/we** have referred **PT NAME** for an Audiology evaluation at Lucille Packard Children's Hospital at Stanford. **PT NAME** has already had a normal hearing test.
- PT NAME** may be eligible for Early Start services through the **XXX** Regional Center. We have instructed the family how to contact the Regional Center

- PT NAME** may be eligible for special education services through his/her local school district. We have shared contact information for with the family and provided them with a sample of the letter that they must present to the school in order to begin an evaluation process.
- Communication disorders may be caused by genetic/neurologic/other conditions. Based on our assessment, we recommend the following laboratory tests: **LIST**

Many studies have shown that a rich language environment at home helps children to learn skills. For this reason we made the following recommendations to the family:

- Follow the recommendations of your child's Speech and Language Pathologist for promoting language development. If your child's Speech and Language Pathologist thinks that any of the following recommendations are not appropriate for your child, do not hesitate to contact us for further discussion.
- Talk to the child frequently. Speak directly to the child to help **him/her** to learn language. Talking to other adults in the room is not as helpful. The television is not a good method to teach language.
- Talk about what your child is doing. This approach is called child-directed speech. If **he/she** is playing with a toy, eating a food, or noticing people or objects, talk about that interest. Narrate your day as you grocery shop, play at the park, or bathe or dress **him/her**. ("Look at the bright red apples!" "The boy kicked the ball" "Put your arm in the shirt." "Now we are washing your belly.")
- When describing items or events, present words in many sentences. Each repetition is an opportunity to learn the word. If **PT NAME** is playing with a car you might say "You have a car. Look at that blue car. That car is fast. Can you make the car go vroom?"
- Expand on what **PT NAME** says. If he/she says "banana" or part of the word ("nana") while pointing at a piece of fruit, you might say, "You want that banana. Here is the yellow banana. This banana is for you" Every time you repeat the word you reinforce learning.
- Use facial expressions and gestures to add interest and information to spoken language.
- Encourage your child to speak. However, do not withhold what the child wants to the point of your child's frustration or tantrum. Even if the child does not say the word, if you repeat it he/she may learn to understand the word.
- Model correct speech. If **PT NAME** pronounces a word incorrectly, simply say it correctly, without repeating the incorrect pronunciation. This approach exposes the child to the correct pronunciation of that word.
- If family members have different primary languages, speak to the child in whichever language you feel most comfortable. Grandparents may use one language with a child, for instance, and parents another. Being exposed to multiple languages does not cause language delays.
- Share books with **PT NAME** at least 20 minutes every day. When reading books to a child, use different voices and add drama if you can. If the child is not interested in the words of the book, talk about the pictures. Let the child hold the book and turn the pages. Make the interaction fun for both of you.
- Explore your local library. Most libraries have story time for young children. Ask the librarian to help you choose books your child might like.
- Playing with other children may motivate your child to speak. For that reason we recommend
 - A day care program or preschool
 - Additional time in the his/her current program
 - Play dates with other children

Recommendations for other developmental or behavioral concerns are as follows:

Because of the primary problems in language/speech/communication, we recommend that **PT NAME's development and/or behavior** should be monitored over time. We recommend that this monitoring occur [**where...**]

Thank you for referring this lovely family to our clinic. We have made arrangements to follow-up **PT NAME** in our clinic in **xx** months. If you have any questions or concerns, do not hesitate to call me or our clinical nurse specialist, Cheryl Goldfarb-Greenwood, at 650-725-8995.