Diagnostic Evaluation and Interview for Cleft Palate

1. Present Concern (parent’s concern, who referred, why, been evaluated before? Treatment before (how long, how many times/individual, goals in therapy?)

2. Sound system (which sounds child uses, do you/others understand him/her, leave out sounds sounds/hard to produce sounds)

3. Resonance (child sound hyper or hypo nasal?)

4. Language (Understands language? How communicates words/gestures/intonation? Combines words?) Most advanced communications? How does he compare to peers his own age or his siblings when they were his/her age?

5. Medical History (pregnancy?, surgeries?, hearing test?, ear infections?, medical issues?)

6. Developmental History (speech and motor milestones)

7. Feeding Skills (difficulty sucking, chewing, weight gain)

8. Voice (raspy, hoarse)

9. Speech Sample
   a. Single sound assessment – easily allows to see patterns
   b. Syllable Repetition – isolate phoneme, determine if phoneme specific nasal air emission
   c. Sentence Repetition – test contains each phoneme, including high pressure, voiced/voiceless phonemes, differentiate sentences containing oral vs. nasal sounds.
   d. Connected Speech (alphabet, numbers)- hypernasality and hyponasality and nasal emission more apparent since taxing the velopharyngeal system, allows to see overall speech. Intelligibility, influence of context, and consistency of sound errors
   e. Stimulability testing- identify strategies which facilitate correct production, identify sounds that are easily modified.

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