The Maryjane Rees Language, Speech, and Hearing Center



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Initial Case/Final Case/Assessment Report Spring/Fall Semester (year)

Client Name: xxxx Smith

Date of Birth: xx/xx/xx

File#: xxxx-xxxx

Date of Report:

Age: 7-1

Parents: Mr. & Mrs. Smith **Address:** 1234 Sloan Ct.

Sacramento, CA 95819

Phone: 916-723-0000

Graduate Clinician: Sam Speech, B.S.

Clinical Instructor: Laverne Language, M.S., CCC-SLP

Diagnoses: Language deficits & literacy

Long Term Goal: Improve language-based literacy skills

REFERRAL AND COMMUNICATION CONCERNS

XXXXX, a seven year, one month old female was referred to the Maryjane Rees Language, Speech and Hearing Center (MRLSHC) by her teacher, Ms. Smith, at Bonwood Elementary School. She was brought to this center by her mother, who was concerned about her ability to read words and her reading comprehension.

PERTINENT HISTORY

The following information was obtained through a parent questionnaire and an interview with Mrs. XXXXX on January 26, 2014. All information obtained was reviewed and confirmed by Mrs. XXXXX on January 26, 2014.

Pregnancy and Birth:

Mrs. XXXXX reported that XXXXX was born three weeks early at the gestational age of 34 weeks. Labor was induced due to concerns about XXXXX's varying heart rate secondary to a knotted umbilical cord. XXXXX was ultimately born healthy via cesarean section without complications.

Medical:

Mrs. XXXXX reported that XXXXX was taking no medications at the time of the assessment and that she was in good health.

Mrs. XXXXX reported that XXXXX was diagnosed with acid reflux at the age of three. No treatment was initiated and she subsequently "outgrew" it. At the age of three years, six months, XXXXX experienced a neurological incident in which she lost consciousness for no apparent reason. Consequently, XXXXX was tested for neurological abnormalities, including epilepsy, and she wore a heart monitor for a month. The results yielded no diagnoses or specific causes for the loss of consciousness. She has had approximately three ear infections that were successfully treated with antibiotics. XXXXX's allergies include mosquitos and sulfa antibiotics. She is currently undergoing testing for an allergy to gluten, as she does not tolerate it well.

Motor Development:

Mrs. XXXXX confirmed that XXXXX met all motor developmental milestones on time.

Vision and Hearing Acuity:

XXXXX has been prescribed corrective lenses for astigmatism, but she needs reminders to wear them. A hearing screening was conducted and passed at her latest check-up with her physician, Dr. XXX, in August 2013

Speech and Language:

While Mrs. XXXXX stated that she could not recall the specific ages, she indicated that XXXXX was a "late talker" and was enrolled in language services from the ages of 3 to 5. These services were initially offered through the Regional Center and later through the public school of residence. She was dismissed from services in Kindergarten, but continues to have difficulty communicating at the level of her classroom peers.

Education:

At the time of this report, XXXXX attended second grade at Bonwood Elementary School in the Sacramento City Unified School District. Mrs. XXXXX reported that her educational concerns began when XXXXX was in kindergarten. She resisted activities that involved books and writing, and she began to have difficulties with reading and spelling in the first grade curriculum. She has had consistent difficulty following classroom directions. As a result, XXXXX experiences tremendous anxiety in the school environment. At the time of this report, XXXXX's reading fluency was not at the expected benchmark for her grade and month and she was having difficulty with reading comprehension questions. The school was beginning the assessment process and her mother and teacher hope that she will qualify for an individualized education plan (IEP) to receive additional help with reading. A report from her teacher notes that while she has friends and participates in circle, her language is behind that of her peers, which limits her ability to socialize with them outside of class. Further, she has difficulty with spelling, sounding out letters, and reading comprehension. She believes these deficits are hindering XXXXX's academic progress.

Family/Social/Behavioral:

At the time of this interview, XXXXX lived at home with her mother, father, and 8 year-old brother. English is the primary language spoken in the home. She has a good relationship with all of her family members, but does have some difficulty following multiple-step directions at home.

ASSESSMENT & OBSERVATIONS

Test Results

The tests used have been validated for the specific purpose for which they are used and the results are considered to be valid unless otherwise stated in the text of the report

OR

The tests below should be viewed with caution and the results may have questionable validity because they were not primarily normed on students whose first language is not English (or students from any group you think may be penalized for having different backgrounds or experiences). This student may not have had experience with some of the material presented on these tests and the results may underrepresent his/her language/speech abilities.

AND

Effects of environment, culture or economic disadvantage are *(or are not)* known to be a factor in the student's development of speech and language skills

Initial Observation:

When the clinician greeted XXXXX in the waiting room, she appeared quiet. She quickly warmed up, however, and was very compliant during testing. Over the course of the first session, XXXXX engaged in conversation appropriately. She had difficulty recounting sequenced events related to swimming, her favorite pastime, and she often spoke in 3-4 word utterances that exhibited errors in grammar and syntax.

Speech and Hearing:

Articulation:

A consistent /w/ for/r/ substitution was noted upon informal observation. XXXXX's speech was, however, judged to be 90% intelligible to both known and unknown listeners

Voice/Fluency:

Voice and fluency were assessed through conversational speech and were judged to be within normal limits for her age and gender.

Oral-facial/ Oral Motor:

An oral-facial examination was administered to assess the adequacy of the oral structures and their function for speech purposes. Facial features (face and jaw alignment) were symmetrical. Inspection of her dentition revealed a class two malocclusion (overbite); she appeared to have good oral hygiene. The structure and color of her palate, velum, and uvula were normal. Her lip symmetry and range of motion

(ROM) were within normal limits. Her tongue color, size, strength, and ROM were also within normal limits. Finally, her diadochokinetic rate was judged to be within normal limits for her age.

Hearing:

A peripheral hearing screening was conducted and passed at 25dB at the frequencies of 500, 1000, 2000, and 4000 Hz.

Language:

Test Administered: Clinical Evaluation of Language Fundamentals (CELF-5) (Wiig, Semel, & Secord, 2013).

The CELF-5 was administered on January 26, 2014. This test "is an individually administered clinical tool for the identification, diagnosis, and follow-up evaluation of language and communication disorders in students aged 5-21 years."

Core Language Score and Indexes

	Standard Score	Percentile	Score Description
Core Language Score	71	3	"Low/Moderate Range of
			Language Functioning"
Receptive Language Index	104	61	"Average Range of
			Language Functioning"
Expressive Language	72	3	"Low/Moderate Range of
Index			Language Functioning"
Language Content Index	104	61	"Average Range of
			Language Functioning"
Language Structure Index	71	3	"Low/Moderate Range of
			Language Functioning"

<u>Interpretation</u>: These composite scores have a mean of 100 and a standard deviation of 15. A score of 100 on this scale represents the performance of the typical student of a given age. Scores within one standard deviation of the mean (between 86 and 114) are considered "average." XXXX 's scores on the Receptive Language and Language Content composites were within this range. All other composites were >1.5 standard deviations **below** the mean.

Discrepancy Comparisons:

Through a computer analysis, XXXX 's performance on the Receptive Language Index was compared to her performance on the Expressive Language Index. The difference was seen to be statistically significant, indicating a relative strength with tasks that probe listening and auditory comprehension skills when compared to tasks that probe expressive aspects of language.

Through a computer analysis, XXXX's performance on the Language Content Index was compared to her performance on the Language Structure Index. The difference was seen to be statistically significant, indicating relatively less difficulty with tasks that probe semantic development when compared to tasks that require receptive and expressive interpretation and production of sentence structures.

Description of Core Language Score and Indexes (paraphrased from authors' descriptions): Core Language: This score is a measure of general language ability and provides a way to quantify a student's overall language performance. It is comprised of four subtests that best discriminate typical from disordered language performance: XXXXXXX, XXXXXXXX, XXXXXXXX, and XXXXXXXX.

Receptive Language: This index is a measure of a student's performance on subtests designed to best probe receptive aspects of language, including comprehension and listening. It can aid in determining the presence or absence of a language disorder and is comprised of three subtests: XXXXXXX, and XXXXXXX.

Expressive Language: This index is a measure of a student's performance on subtests designed to probe expressive aspects of language, including oral language expression. It can aid in determining the presence or absence of a language disorder and is comprised of three subtests: XXXXXXX, XXXXXXX, and XXXXXXXX.

<u>Language Content:</u> This index is a measure of a student's performance on subtests designed to probe vocabulary and word knowledge. It is comprised of three subtests: <u>XXXXXXX</u>, <u>XXXXXXXX</u> and <u>XXXXXXXX</u>.

Language Structure: This index is an overall measure of a student's performance on subtests designed to probe understanding and production of syntactical structures and morphology. It is comprised of four subtests: XXXXXXX, XXXXXXXX, and XXXXXXXX.

Subtest Scores

Subtest	Raw Score	Scaled Score	Percentile	Score
				Description
Sentence Comprehension	15	4	2	Low to Very
				Low
Linguistic Concepts	12	4	2	Low to Very
				Low
Word Structure	12	3	1	Low to Very
				Low
Word Classes	34	19	99.9	Above
				Average
Following Directions	14	9	37	Average
Formulated Sentences	14	6	9	Low to Very
				Low
Recalling Sentences	20	6	9	Low to Very
				Low

<u>Interpretation</u>: These scaled scores have a mean of 10 and a standard deviation of 3. A scaled score of 10 describes the average of a given age group. About 2/3 of all students with typical language development earn subtest scaled scores within one standard deviation of the mean (between 8 and 12), the range of average performance.

XXXX's scaled scores on the <u>Word Classes</u> subtest was **above** this range. Her scaled scores on the Following Directions subtest was **within** this range. Her scaled scores on Formulated Sentences and Recalling Sentences were **within 1.5 standard deviations below** the mean. All other subtests were >1.5 standard deviations **below** the mean.

Description of subtests (paraphrased from authors' descriptions):

Sentence Comprehension: Used to evaluate the student's understanding of grammatical rules at the sentence level. The student responds to a sentence by pointing to the correct picture stimuli. **Linguistic Concepts:** Used to evaluate the student's ability to understand linguistic concepts such as *middle*, *different*, and *many*. Some concepts require understanding of logical operations or connectives, such as *and*, *or*, *all but one*. The student points to pictured objects in response to oral directions.

<u>Word Structure:</u> Used to evaluate the student's knowledge of grammatical rules in a sentence completion task. The student completes an orally presented sentence that pertains to an illustration. <u>Word Classes:</u> Used to evaluate the student's ability to understand relationships between words based on meaning features, function, or place or time of occurrence. The student chooses the two words (i.e., pictures or presented orally) that best represent the desired relationship.

<u>Following Directions:</u> Used to evaluate the student's ability to (a) interpret spoken directions of increasing length and complexity, (b) follow the order of presented objects with varying characteristics such as color, size, or location, and (c) identify several pictured objects that were mentioned. The student identifies the objects in response to oral directions.

<u>Formulated Sentences:</u> Used to evaluate the student's ability to formulate simple, compound, and complex sentences when given grammatical (semantic and syntactic) constraints. The student is asked to formulate a sentence, using target word(s) while using an illustration as a reference.

Recalling Sentences: Used to evaluate the student's ability to recall and reproduce sentences of varying length and syntactic complexity. The student imitates sentences presented by the examiner. orally. The questions probe the student's understanding of the paragraph's main idea, memory for facts and details, recall of event sequences, and ability to make inferences and predictions.

Pre-Reading Skills: Language-Based:

XXXXX's language and language based reading skills were assessed through formal testing using the *Comprehensive Test of Phonological Processing-2 (CTOPP-2)* and selected language and reading based subtests from the *Woodcock-Johnson IV (WJIV)*. This specific battery of tests is often used to identify and define language based reading difficulties and developmental reading disabilities.

Observation of Reading and Language Abilities:

When XXXXX spoke, she used simple grammar and adequate vocabulary. When she read, she appeared to struggle. For example, when she read from a story to the clinician from her school textbook, her reading was observed to be labored. When she was asked to read silently, she was observed to mouth each word separately. When presented with four comprehension questions based on the passage she read, her response latency averaged approximately 30 seconds or greater, and she only answered one question correctly.

Test Administered: Comprehensive Test of Phonological Processing2 (CTOPP2) [Wagner, Torgesen, Rashotte, & Pearson. (2013). Austin: Pro-Ed.]

The CTOPP2 was administered on January 26, 2014. The CTOPP2 is a norm-referenced test that measures phonological processing abilities related to reading. The term phonology refers to the sound system of language. Three kinds of phonological processing in particular appear to be especially relevant to the development of written language: Phonological awareness, phonological memory, and rapid naming. The authors further state that a deficit in one or more of these kinds of phonological processing abilities is viewed as the primary cause of learning disabilities in general, and of reading disabilities in particular. The results are as follows:

Composite Scores

Composites		Standard Score	Percentile	Score Description
Phonological Awareness		88	21	Below Average
Phonological Memory		88	21	Below Average

Rapid Symbolic Naming		67	1	Very Poor
Alternate Phonological		88	21	Below
Awareness				Average

<u>Interpretation</u>: These composite scores are based on a distribution with a mean of 100 and a standard deviation of 15. XXXXX's scores were within 1 standard deviation **below** the mean, with the exception of the Rapid Symbolic Naming score, which was greater than 2 standard deviations **below** the mean.

Subtest Scores

Subtests	Age Equivalent	Grade Equivalent	Scaled Score	Percentile	Score Descriptions
Core:		•			•
Elision (EL)	6-9	1.7	8	25	Average
Blending Words (BW)	7-6	2.4	9	37	Average
Phoneme Isolation (PI)	6-6	1.4	7	16	Below
					Average
Memory for Digits (MD)	6-6	1.4	9	37	Average
Nonword Repetition (NR)	5-3	k.2	7	16	Below
					Average
Rapid Digit Naming (RD)	4-9	<k.0< td=""><td>4</td><td>2</td><td>Poor</td></k.0<>	4	2	Poor
Rapid Letter Naming (RL)	5-3	k.2	5	5	Poor

Supplemental Subtests	Age	Grade	Standard	Percentile	Score
	Equivalent	Equivalent	Score		Descriptions
Blending Nonwords (BN)	6-9	1.7	8	25	Average
Segmenting Nonwords (SN)	6-3	1.2	8	25	Average

<u>Interpretation</u>: These scaled scores are based on a distribution with a mean of 10 and a standard deviation of 3. Two subtest scores, <u>Rapid Digit Naming</u> and <u>Rapid Letter Naming</u>, are > 1.5 standard deviations *below* the mean. The other subtest scores are all at or within 1 standard deviation below the mean.

Descriptions of Subtests (quoted directly from the manual):

Elision: Measures the ability to remove phonological segments from spoken words to form other words

Blending Words: Measures the ability to synthesize sounds to form words

Phoneme Isolation: Measures the ability to isolate individual sounds within words

Memory for Digits: Measures the ability to repeat numbers accurately

Nonword Repetition: Measures the ability to repeat nonwords accurately

Rapid Digit Naming: Measures the ability to rapidly name digits **Rapid Letter Naming:** Measures the ability to rapidly name letters

Blending Nonwords: Measures the ability to synthesize sounds to form nonwords

Segmenting Nonwords: Measures the ability to segment nonwords into phonemes

Overall CTOPP Interpretation:

Phonological awareness, phonological memory, and rapid naming play an integral role in reading and reading comprehension. While XXXXX's composite scores on the Phonological Awareness, Phonological Memory, and Alternate Phonological Awareness composites of the *CTOPP* were in the Below Average range, her scores on the Rapid Symbolic Naming Composite was in the Very Poor range. These scores are likely contributing to XXXX's difficulties when decoding words and comprehending text.

Test Administered: Woodcock-Johnson IV (WJIV) Tests of Achievement [Schrank, Mather, & McGrew. (2014). Rolling Meadows, IL: The Riverside Publishing Company].

Selected subtests of the *WJIV* were administered on January 26, 2014. These specific subtests are designed assess XXXXX's reading comprehension and her ability to identify and read letters and words. The results are as follows:

Subtest Scores

Subtest	Raw score	Age Equivalency	Grade Equivalency	Standard Score	Score Classifications
Letter-word ID	XX	XX-X	X.X	XX	Low
Passage	XX	XX-X	X.X	XX	Low
Comprehension					
Word Attack	XX	X-X	X.X	XX	Low
Oral	XX	XX-XX	X.X	XX	Low
Comprehension					

Descriptions of Subtests (quoted directly from the manual):

<u>Letter Word ID</u>: Measures the ability to identify letters and words, a reading and writing ability. <u>Passage Comprehension</u>: Measures reading comprehension.

<u>Word Attack:</u> Measures the ability to apply phonic and structural analysis skills in order to read unfamiliar printed words, a reading/writing ability.

Test Administered: Woodcock-Johnson IV (WJIV) Tests of Oral Language [Schrank, Mather, & McGrew. (2014). Rolling Meadows, IL: The Riverside Publishing Company.]

One subtest of the *WJIV* was administered on January 26, 2014. This specific subtests is designed to assess XXXXX's listening comprehension. The results are as follows:

Subtest Scores

Subtest	Raw score	Age Equivalency	Grade Equivalency	Standard Score	Score Classifications
Oral Comprehension	XX	XX-XX	X.X	XX	Low

<u>Interpretation</u>: The *WJIV* standard scores have a mean of 100 and a standard deviation of 15. Normative scores were based on XXXXX's age. A score of 100 on these scales represents the

performance of the typical student of a given age. Scores between 90 and 110 are in the "Average" range.

All off XXXX's scores were in the "Low" range. This testing profile indicates that she has difficulty decoding words fluently and that she has difficulty understanding both text that she has read and text that is read to her.

A child without language-based reading difficulties should demonstrate relatively commensurate average to above-average performance in his or her ability to read written information and to understand verbal information. Significantly higher oral comprehension abilities compared to reading comprehension abilities may indicate dyslexia, particularly in the presence of decreased letter word identification and/or word attack skills. Similar oral and reading comprehension abilities that are below average are often representative of a more generalized language-based reading difficulty.

SUMMARY & INTERPRETATION

XXXXX was brought to this center by her mother, who was concerned about her ability to read words and her reading comprehension.

She was assessed on January 26, 2014 with a battery of tests that is often used to identify and define language-based reading difficulties and developmental reading disabilities.

XXXXX's articulation was characterized by a /w/ for /r/ substitution. Her overall intelligibility was judged to be 90% to both known and unknown listeners. Her voice and fluency were judged to be within normal limits on the day of testing.

XXXXX's core language score and indexes languag ranged from the low/moderate to average range of functioning upon standardized testing. Specific relative strengths were noted in the area of understanding the relationships between words based on meaning features, function, or place and time of occurrence and in the area of following directions. Discrepancy comparisons further revealed a relative strength with tasks that probe listening and auditory comprehension skills and tasks that probe semantic development.

Upon informal observation of her reading and reading scores and standardized testing, she exhibited signs of a language-based reading difficulty, characterized by below average reading fluency in the presence of below average scores in the areas of phonological awareness, phonological memory, and alternate phonological awareness and very poor rapid symbolic naming. Phonological awareness, phonological memory, and rapid naming are important language-based pre-requisites to decoding and reading comprehension. This, combined with her decreased ability to understand information presented both in an oral format and in a written format on the *WJIV*, may be indicative of a mixed decoding/comprehension deficit as part of a generalized language-based reading difficulty.

It should be noted that XXXX's overall language ability, combined with her phonological awareness and rapid naming abilities, will negatively impact her ability to both successfully decode and comprehend during reading, which will affect her ability to successfully access the core academic curriculum at school.

RECOMMENDATIONS

Based on XXXXX's performance upon standardized testing, parent report, and clinical observations, it was recommended that she be enrolled in language therapy at this Center in the language II –

language/literacy clinic. Therapy was recommended twice weekly for 50 minute sessions. Initial remedial goals may include, but would not be limited to, the following:

- 1. Increase oral language abilities through narrative exercises that emphasize grammar and syntax.
- 2. Strengthen phonological memory through a hierarchical phonological awareness program.
- 3. Improve reading fluency by improving visual recognition of word families (major and minor phonograms in activities practiced to high levels of automaticity).

Sam Speech, BS Graduate Clinician Laverne Language, M.S., CCC-SLP Clinical Instructor CA License #