

Fluency Assessment Summary

Date:

District:

Student's Full Name:		SSID:	
Date of Birth:		Grade:	
School:		Age:	
SLP:		Communication Assessment:	

1. BEHAVIORAL COMPONENTS:

a. Frequency of dysfluencies: /per 100 words produced in conversational context	
b. Types of dysfluencies observed:	
<input type="checkbox"/> whole multisyllabic word repetitions	<input type="checkbox"/> abnormal rhythm, continuity, rate or effort
<input type="checkbox"/> whole monosyllabic word repetitions	<input type="checkbox"/> interjections
<input type="checkbox"/> part-word syllable repetitions	<input type="checkbox"/> broken words
<input type="checkbox"/> part-word speech sound repetitions	<input type="checkbox"/> blocks/phonatory arrest
<input type="checkbox"/> rephrasing or revision of sentences	<input type="checkbox"/> silent or audible prolongations
<input type="checkbox"/> pitch rise	<input type="checkbox"/> pauses
c. Blocks/phonatory arrest/sustained articulatory posture observed:	
<input type="checkbox"/> no	<input type="checkbox"/> yes: average duration of _____ seconds
d. Speech sound prolongations observed:	
<input type="checkbox"/> no	<input type="checkbox"/> yes: average duration of _____ seconds
e. Schwa replacement for intended vowel observed:	
<input type="checkbox"/> no	<input type="checkbox"/> yes
f. Physical concomitants (secondary characteristics/struggle behaviors) observed:	
<input type="checkbox"/> none perceived	<input type="checkbox"/> noticeable to casual observer
<input type="checkbox"/> only noticeable to trained observer	<input type="checkbox"/> distracting or obvious to the listener
Description of behavior(s):	

Student's Full Name:		SSID:	
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2. AFFECTIVE COMPONENTS

a. Student awareness and emotional reaction to dysfluencies:	
<input type="checkbox"/> not aware	<input type="checkbox"/> often aware
<input type="checkbox"/> occasionally aware	<input type="checkbox"/> always aware
b. Student emotional reaction to dysfluencies:	
<input type="checkbox"/> not concerned	<input type="checkbox"/> negative emotions are often observed/reported
<input type="checkbox"/> mildly frustrated	<input type="checkbox"/> negative emotions are frequently observed/reported

3. COGNITIVE COMPONENTS

a. Verbal or situational avoidance behaviors:	
<input type="checkbox"/> non observed or reported	<input type="checkbox"/> frequently observed or reported
<input type="checkbox"/> occasionally observed or reported	<input type="checkbox"/> consistently observed or reported in numerous situations
b. Peer reactions to dysfluencies:	
<input type="checkbox"/> appear unaware	<input type="checkbox"/> frequent teasing noted/reported
<input type="checkbox"/> aware: some teasing noted/reported	<input type="checkbox"/> considerable teasing requires strong adult intervention

4. INFORMAL ASSESSMENT INFORMATION (information from observation, interview, etc.):

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