

AASL SLP EVALUATION CHECKLIST

*This checklist is to be used for all TRICARE evaluations moving forward. We know this is something new and in beta, we appreciate patience exhibited by all as clinicians and reviewers! If you have any questions or concerns, please do not hesitate reach out to Quality Assurance.

SELECT THE FOLLOWING FOR THE “TEMPLATE” (LOCATED IN THE TOP RIGHT CORNER, IS USUALLY BLANK UPON OPENING THE NOTE)

IEVAL = INITIAL EVALUATION.

REVAL = RE-EVALUATION

THESE TEMPLATES WILL AUTOMATICALLY LOAD INTO THE RESPECTIVE NARRATIVE AREAS OF THE TEMPLATE. THEY ARE THEN TO BE CUSTOMIZED TO THE INDIVIDUAL ACCORDINGLY. PLEASE PROOFREAD ALL OF YOUR WORK.

SUBJECTIVE

Parent/Family Concerns (top left of the Subjective Tab)

MEDICAL HISTORY WILL NEED TO BE DELETED ON WHITE PAGE RIGHT BEFORE SIGN OFF OR WILL BE DONE BY YOUR COSIGNER IF APPLICABLE

OBJECTIVE FINDINGS

Objective Findings

DO NOT SELECT MILD/MODERATE/SEVERE DELAY FROM DROP-DOWN LIST, AS THE TEMPLATES NOTE SEVERITY, AND WE ARE TRYING TO NO LONGER USE THE WORD “DELAY”

IF THE EVAL TEMPALTE DOES NOT LOAD THESE AREAS, OR YOU NEED TO START FRESH, THEY ARE ALSO SAVED SEPARATELY. ADD SECTIONS AS YOU NORMALLY WOULD. ONCE ADDED, SELECT THE FOLLOWING FOR THE “TEMPLATE” (LOCATED ON THE RIGHT SIDE, IS USUALLY BLANK UPON ADDING)

ARTIC = ARTICULATION

OME = ORAL MOTOR

LAN = RECEPTIVE AND EXPRESSIVE LANGUAGE

SOCIA= PRAGMATIC/SOCIAL

VOICE= VOICE AND FLUENCY

PLEASE REVIEW THSE SECTIONS, REMOVE INACCURATE INFORMATION, AND ADD CLIENT SPECIFIC DETAILS.

AASL SLP EVALUATION CHECKLIST

Standardized Tests

ADD STANDARD SCORES; WE ARE NO LONGER DOING ANALYSIS BY SUBTEST. PLS-5 and Rossetti have checklists or templates in RainTree.

ASSESSMENT

PLEASE REVIEW THSE SECTIONS, REMOVE INACCURATE INFORMATION, AND ADD CLIENT SPECIFIC DETAILS.

TREATMENT PLAN

FILL IN AS USUAL, USE GOAL BANK ON GOOGLE DOC AND LOAD TEMPLATES

RECOMMENDATIONS

In order to (box on left); PLEASE REVIEW THSE SECTIONS, REMOVE INACCURATE INFORMATION, AND ADD CLIENT SPECIFIC DETAILS.

improve (list areas here, no space or period at end!)

Comments (left, under “in order to” box): PLEASE REVIEW THSE SECTIONS, REMOVE INACCURATE INFORMATION, AND ADD CLIENT SPECIFIC DETAILS. INCLUDE ANALYSIS SUMMARY OF TEST RESULTS HERE.

Recommendations for further assessment(s): PLEASE REVIEW THSE SECTIONS, REMOVE INACCURATE INFORMATION, AND ADD CLIENT SPECIFIC DETAILS.

Discharge Criteria: PLEASE REVIEW THSE SECTIONS, REMOVE INACCURATE INFORMATION, AND ADD CLIENT SPECIFIC DETAILS.