



SPPA270 – Preclinical Participation

Report: Speech-Language Pathology Therapy Session

<b>Your Name:</b> _____	<b>Date:</b> _____
<b>Location:</b> _____	<b>Time (total):</b> _____
<b>Clinician:</b> _____	<b>Client Age:</b> _____
<b>Disorder/Background Information:</b> _____	

**Clinician Information:**

- a) The goals and objectives were clearly identifiable (Explain):
  
  
  
  
  
- b) The therapy activities were developmentally appropriate (Explain):
  
  
  
  
  
- c) The clinician collected data using a reliable and valid method (Explain):
  
  
  
  
  
- d) The clinician adapted to unexpected changes during therapy (Explain):
  
  
  
  
  
- e) The clinician provided treatment that was fluid and well paced (Explain):
  
  
  
  
  
- f) The clinician exhibited an empathetic (caring, compassionate) attitude (Explain):
  
  
  
  
  
- g) The clinician displayed a professional and appropriate appearance (Explain):