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SPPA270 – Preclinical Participation

Report: Diagnostic Speech-Language Pathology Session

Your Name:	Date:
Location:	Time (total):
Clinician:	Client Age:
Disorder:	

Formal Observations:

- a) Complete names of specific diagnostic tests and/or procedures:
- b) Examples of clinician's instructions to and actions with client (minimum of 5):
- c) Examples of client's responses (minimum of 5):
- d) Known results and recommendations (consult with clinician):

Informal Observations

- a) Client's verbal behaviors:
- b) Client's non-verbal behaviors:

What I Learned: