

# Speech Language Pathologist Skills Self-Assessment

This profile is for use by all **Speech Language Pathologists** with more than one year's experience in his/her discipline and specialty. Please return this checklist by mail or FAX \_\_\_\_\_.

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Directions: Indicate your level of experience by the numbers below as follows:	1 = Can function independently	3 = Limited Experience
	2 = Experienced but may need review	4 = No Experience

<b>Fluency</b>				
<i>Voice:</i>				
Videostroboscopy	1	2	3	4
Visipitch	1	2	3	4
LSVT	1	2	3	4
<b>Aural Rehab</b>				
Sign Language	1	2	3	4
Audiometric Screenings	1	2	3	4
Cued Reading	1	2	3	4
<b>Cleft Palate</b>				
Prosthetic Devices	1	2	3	4
Palatal Lifts	1	2	3	4
Obturator	1	2	3	4
Feeding Disorders	1	2	3	4
<b>Augmentation Communication</b>				
Computer Applications	1	2	3	4
Communication Board	1	2	3	4
<b>Dysphagia</b>				
Videofluoroscopy/MBS	1	2	3	4
Ultrasound	1	2	3	4
Cervical Auscultation	1	2	3	4
SEMG – Surface Electro Myography (Biofeedback)	1	2	3	4
Adaptive Equipment	1	2	3	4
F.E.E.S	1	2	3	4
Bedside Exams	1	2	3	4
Thermo Stim	1	2	3	4
DPNS (Deep Pharyngeal Nuero Stim)	1	2	3	4
Electrical Stimulation	1	2	3	4
Diet Classifications	1	2	3	4
PT/Caregiver Training & Instructions	1	2	3	4

<b>Neurogenic</b>				
CVA	1	2	3	4
Aphasia	1	2	3	4
<b>Traumatic Brain Injury:</b>				
Cognitive Rehab	1	2	3	4
Coma Stimulation	1	2	3	4
Rancho Levels	1	2	3	4
Craniotomy	1	2	3	4
<b>Motor Speech Disorders:</b>				
Dysarthria	1	2	3	4
Apraxia	1	2	3	4
E-Stim	1	2	3	4
<b>Progressive Disorders:</b>				
ALS	1	2	3	4
MS	1	2	3	4
Parkinson's	1	2	3	4
Huntington's	1	2	3	4
Guilian-Barre's	1	2	3	4
<b>Vents/Trachs</b>				
Trach Management	1	2	3	4
Ventilator Interpretation	1	2	3	4
Passy Muir Valves	1	2	3	4
Pulse Oximetry	1	2	3	4
<b>Medical</b>				
Suctioning	1	2	3	4
Head & Neck Cancers	1	2	3	4
Trauma	1	2	3	4
Vital Signs	1	2	3	4
<b>Laryngectomee</b>				
Electro Larynx	1	2	3	4
Esophageal Speech	1	2	3	4

<b>Pediatrics</b>				
Autism	1	2	3	4
Developmental Delays	1	2	3	4
Phonological Processes	1	2	3	4
Articulation	1	2	3	4
Phonetic Transcription	1	2	3	4
Dysphasia	1	2	3	4
Language Stimulation	1	2	3	4
Feeding Disorders	1	2	3	4
Cerebral Palsy	1	2	3	4
Genetic Syndromes	1	2	3	4
Oral/Motor	1	2	3	4
Early Intervention Evaluations	1	2	3	4
Sensory Integration	1	2	3	4
<b>Dementia Management</b>				
Dysphasia Dining	1	2	3	4
Memory Book	1	2	3	4
<b>Education</b>				
In-services/Education	1	2	3	4
Special Education	1	2	3	4
IEP (Individual Education Plan)	1	2	3	4
<b>Documentation</b>				
Cared Planning Meetings	1	2	3	4
700 & 701 Forms	1	2	3	4
MDS Forms	1	2	3	4
PPS Forms	1	2	3	4
FIM Scores (Functional Independence Measures)	1	2	3	4
NOMS (National Outcomes Measurement System)	1	2	3	4
SOAP Notes (Subjective, Objective, Assessment, Plan)	1	2	3	4
Chart Review	1	2	3	4