ASHA NOMS

SLP Healthcare Registry 2020 Treatment Taxonomy

Cognition (18+) Treatment Aims and Targets

Aim 1: Improved Orientation	Aim 4: Improved Executive Functioning
☐ Establishing orientation to self	☐ Increased capacity for goal setting
☐ Establishing orientation to others	☐ Increased capacity for planning
☐ Establishing orientation to location/date/time	☐ Increased capacity for implementation of plan
	☐ Increased capacity for monitoring
Aim 2: Increased Attention	☐ Increased capacity for problem solving/reasoning
☐ Establishing attention	☐ Increased capacity for organization/sequencing
☐ Increased capacity for maintaining attention	☐ Increased capacity for self-regulation
☐ Increased capacity for selective attention	
☐ Increased capacity for divided attention	Aim 5: Improved Awareness and Performance
☐ Increased capacity for alternating attention	☐ Increased safety awareness/insight
☐ Increased frequency of self-regulated use of external stimuli for	☐ Increased deficit awareness
attention	
☐ Increased frequency of self-regulated use of internal	☐ Increased processing speed
stimuli/strategies for attention	☐ Increased cognitive endurance
Aim 3: Improved Memory	
☐ Increased capacity for encoding/retrieval	
☐ Increased working memory	
☐ Increased immediate memory	
☐ Increased short-term memory	
☐ Increased long-term memory	
☐ Increased prospective memory	
☐ Increased frequency of self-regulated use of external stimuli for	
memory	
☐ Increased frequency of self-regulated use of internal	
stimuli/strategies for memory	

Speech Intelligibility (ages 18+) Treatment Aims and Targets

Aim 1: Increased Intelligibility	Aim 3: Increased Efficiency
☐ Increased respiratory support for speech	
☐ Increased strength of articulators	☐ Increased intelligible words/units of meaning per minute
☐ Increased accuracy of articulation	☐ Improved communication repair strategies
☐ Increased accuracy of error perception	☐ Increased use of alerting signals
☐ Increased loudness	☐ Increased speech fluency
☐ Decreased rate	☐ Increased speech initiations
☐ Improved velopharyngeal function for speech	
☐ Improved posture for speech	Aim 4: Increased Naturalness
☐ Improved caregiver listening skills	☐ Improved loudness control and loudness variation
☐ Increased intelligibility in adverse listening/speaking situations	☐ Increased pitch variability
☐ Increased use of compensatory or speech-facilitation strategies	☐ Improved velopharyngeal function
☐ Increased use of self-monitoring skills	☐ Improved use/control of prosody
	☐ Improved rate control
Aim 2: Increased Comprehensibility	
☐ Increased comprehensible words/messages per minute	
☐ Increased use of supplementary strategies	
☐ Increased comprehensibility in adverse listening/speaking situations	

Spoken Language Comprehension (18+) Treatment Aims and Targets

Aim 2: Increased Comprehension-Monitoring of Spoken Language
 Increased recognition of the internal signs or feeling of comprehension breakdowns
☐ Increased recognition of nonverbal signals that there is a
communication breakdown
Increased requesting of clarifications or modifications (e.g., slow
rate, speak up)

Spoken Language Expression (ages 18+) Treatment Aims and Targets

Aim 1: Increased Use of Expressive Language for Communication	Aim 2: Expressive Language Efficiency
☐ Improved use of semantic concepts and lexical retrieval	☐ Increased rate
☐ Improved use of syntactic sentence structures	☐ Increased content over time (information units per minute)
☐ Improved use of grammatical morphemes	☐ Decreased perseverations
☐ Improved phonology	
☐ Increased quantity of output	
☐ Improved conversation/discourse abilities	

Swallowing (ages 18+) Treatment Aims and Targets

Aim 1: improved Airway Protection	Aim 4: Increased Oral Efficiency
☐ Increased area of vocal fold contact	☐ Increased anterior oral containment
☐ Increased tightness of vocal fold adduction closure during swallow	☐ Increased posterior oral containment
☐ Increased duration of laryngeal closure during swallowing	☐ Increased strength of lip closure
 ☐ Earlier onset of upper airway closure in relation to bolus position ☐ Earlier initiation of pharyngeal response in relation to bolus entry into pharynx 	 ☐ Increased integrity of posterior oral linguavelar/linguapalatal valve ☐ during oral preparatory stage ☐ Decreased oral residue
☐ Increased percentage of swallows followed by post-swallow expiration	☐ Exploitation of gravity to increase control of oral contents
☐ Increased epiglottic inversion	
☐ Improved oral hygiene	Aim 5: Improved Respiratory-Swallow Coordination & Pulmonary- Swallow Interaction
Aim 2: Increased Percentage of Bolus Entering Digestive System	☐ Increased lung volume present at swallow onset
☐ Prolonged duration of UES opening during swallow	☐ Increased post-swallow expiratory/cough pressure
☐ Increased traction forces on anterior UES during pharyngeal phase of swallow	☐ Increased speed of onset of post-swallow cough
☐ Increased diameter of UES opening during the pharyngeal swallow	Aim 6: Improved Functional Swallow Endurance
☐ Increased compliance of UES during swallowing☐ Decreased pharyngeal residue	☐ Increased oral intake
Aim 3: Increased Bolus Propulsive Forces	
☐ Increased contractile strength of tongue	
☐ Increased lingual propulsive force during swallow	
☐ Increased propulsion force of pharyngeal constrictors	
☐ Decreased loss of intrabolus pressure to velopharyngeal incompetence	

Voice (ages 18+) Treatment Aims and Targets

Aim 1: Improved Posture/Alignment	Aim 4: Improved Resonance
☐ Improved shoulder and neck alignment	☐ Increased strength of the velopharyngeal port
☐ Improved chin posture	
☐ Improved atlanto-occipital alignment	☐ Modify placement
	Aim 5: Improved Respiratory Function/Respiratory-Voicing
Aim 2: Modify Vocal and Musculoskeletal Effort	Coordination
☐ Widen thyrohyoid space at rest	☐ Increased strength of respiratory muscles
☐ Increased lateral cartilage movement at rest	☐ Increased respiratory control
☐ Increased lateral hyoid bone movement at rest	☐ Modify voicing onset
☐ Lowered thyroid cartilage at rest	☐ Modify respiratory support
☐ Lowered position of hyoid bone at rest	
☐ Decreased resting tension of neck, tongue, orofacial or postural muscles	Aim 6: Improved Naturalness or Prosody
☐ Increased strength of true vocal fold abduction/adduction	☐ Improved intonation (pitch and loudness)
☐ Increased range of motion of true vocal fold abduction/adduction	☐ Improved rhythm of speech-related activities (stress and breathing patterns)
☐ Decreased fatigue over exercise	☐ Improved rate (syllables or repetitions per time period)
☐ Maintain widened thyrohyoid space during voicing	Aim 7: Decreased Pain, Soreness, Discomfort/Improve Vocal Health
☐ Maintain lower thyroid cartilage or hyoid bone during voicing	☐ Improved vocal conservation
☐ Decreased strained vocal quality	☐ Modify lifestyle (e.g., decrease smoking, manage reflux)
☐ Increased loudness range	☐ Reduced pain, soreness, or discomfort at rest
☐ Increased pitch range	☐ Reduced pain, discomfort, soreness during voicing
☐ Modify habitual pitch	☐ Increased knowledge and/or affect related to vocal health
☐ Modify habitual loudness	
☐ Increased duration of voicing	
Aim 3: Improved Source-Related Voice Quality	
☐ Decreased breathiness	
☐ Decreased roughness	
☐ Decreased strain	
☐ Modify breathiness in volitional voicing tasks	
☐ Modify roughness in volitional voicing tasks	
☐ Modify strain in volitional voicing tasks	
☐ Decreased roughness or breathiness in skilled voicing tasks	