1. Provided with new communication device?

[ ]  Yes [ ]  No [ ]  Unknown

1. If YES, type(s) of communication devices (choose all that apply)

[ ]  Eye gaze [ ]  Touch screen [ ]  Voice recognition [ ]  Other

1. Communication Devices

|  |  |
| --- | --- |
| Name of Device | Device Used? |
| Speaking Communication Device | [ ]  Yes – If yes,[ ]  iPad[ ]  App used, specify:[ ]  Android[ ]  App used, specify:[ ]  Dedicated Speech Generating Device (used for communication)[ ]  Specify device manufacturer:[ ]  Specify device:[ ]  Other Specify:[ ]  No[ ]  Not Applicable |
| Non-Speaking Communication Device | [ ]  Yes – If yes,[ ] Communication Book or Board[ ] Pictures/Picture Exchange Communication System (PECS)[ ] Other, specify:[ ]  No[ ]  Not Applicable |
| Access Communication Device | [ ]  Yes – If yes,Uses:[ ]  Finger[ ]  Eye gaze[ ]  Another body part, specify:[ ]  Head or chin pointer[ ]  Brain-computer interface[ ]  One or more switches, device scans between messages[ ]  Other, specify:[ ]  No[ ]  Not Applicable |
| Other, specify |  |

## **General Instructions**

This form contains data elements to track assistive technologies used for communication by the participant.

Important Note: All data elements on this CRF are classified as NeuroRehab Supplemental – Highly Recommended for studies assessing use of communication related assistive technologies for someone who is being treated for a speech impairment.

## **Specific Instructions**

Please see the Data Dictionary for definitions for each of the data elements included in this CRF Module.

* Communication device type – Choose all that apply
* Communication devices category type – For each communication device type record if it is used
* Communication device type use indicator – For each communication device type record if it is used. Choose one for each device type.
* Speak communication device type – Only answer if speaking communication devices is answered Yes.
* Dedicate speech generating device manufacturer name – Specify manufacturer and device (e.g., Attainment GoTalk 20, Dynavox Maestro, PRC Accent 1000, Ablenet Step-by-Step)
* Dedicate speech generating device name – Specify manufacturer and device (e.g., Attainment GoTalk 20, Dynavox Maestro, PRC Accent 1000, Ablenet Step-by-Step)
* Nonspeak communication device type – Only answer if non-speaking communication devices is answered Yes.
* Access communication device type – Only answer if access communication devices is answered Yes.
* Access communication device type another body part specify text – Specify the type of another body part used.
* Communication device category type other text – Specify whether Communication devices other than Speaking Communication Device, Non-Speaking Communication Device, and Access Communication Device are used.