

SOAP NOTES

You will write a SOAP note at the end of every session. The idea of a SOAP note is to be brief, informative, focus on what others need to know (e.g., doctors, nurses, teachers, OT, PT, social worker, another SLP, etc.), and include whatever information an insurance company would need to see to justify your continued involvement with the patient.

SOAP notes are turned in with your treatment plans every week. Check with your supervisor for deadlines.

S: Describe your impressions of the client in the subjective section. Include your impressions about the client's/patient's level of awareness, motivation, mood, willingness to participate. You may also list here anything the patient and/or family may say to you during a session.

For example: The client appeared very alert and cooperative. He stated, *"I'm ready to work hard today."*

O: Write measurable information in the objective section. Your data goes here. Include any test scores, percentages for any goals/objectives worked on, and any quantitative information.

For instance: *The client produced four syllable phrases with 80% accuracy in 40 out of 50 trials (40/50).*

A: Describe your analysis of the session in the assessment section. This is the interpretation section. Insurance companies like it when you compare the client's performance across sessions.

For example: *(a) Production of /r/ increased from 65% accuracy during the last session to 90% accuracy during today's session. (b) Withdrawal of visual models resulted in a decrease in accurate production of single syllable words from 90% to 65%.*

P: Outline the course of treatment in the plan section. Any changes to objectives, activities, reinforcement schedules should be included.

You might simply state: *(a) Continue current treatment activities. (b) Continue training production of functional CVC words at the phrase level.*

Examples

Adult Aphasic

S: Patient's wife: "He seems to be speaking much more clearly today, and seems to understand me better.

O: Client completed word retrieval activities with 70% accuracy (7/10) with phonemic cueing needed on 4 items. He followed complex 2-step commands with 60% accuracy (6/10) with visual cueing needed for 2 items and repetition needed on 4 items. He wrote single words with 70% accuracy with no grammatical or spelling errors. Written homework assignment completed with only 2 errors. Criteria for all objectives is 80%.

A: Improvement observed in word retrieval and writing activities. Auditory comprehension remains at low level. Commands may be too hard or clinician's presentation may be too fast. Pace of session good.

P: Continue with all current objectives. Review auditory commands before next session. If auditory comprehension of commands continues to be low, could consider other types of auditory comprehension activities. Remember to slow down presentation of commands by noting on data sheet.

Fluency

S: Client reported reduction in overall fear level and tension in neck area during oral presentations in group meetings at work this week. Client is concerned about a telephone conference call scheduled for next Tuesday at work.

O: Client will monitor retrials during a two-minute monologue with clinician with 90% accuracy over 2 sessions, 12/30 = 40%. Client will make 2 phone calls per week in a bystander situation at work as reported in 3 homework logs, 6/6/08, 6/8/08 = goal met this week. Client will use pull-outs in 50% of opportunities during a two-minute conversation with the clinician, 4 pull-outs/6 opportunities = 66%.

A: Client continues to demonstrate difficulty distinguishing between core repetition and retrials. Also, he may be observing retrials but not signaling consistently. Pull-outs on fixations met target criteria, pull-outs on laryngeal closures did not.

P: Use gestural prompt to aid signaling during monitoring, then fade. Add direct modeling for pullouts on laryngeal closures.

Auditory Comprehension

S: John appeared alert today. He greeted the clinician with a smile.

O: The client responded to 20 yes/no questions with 70% accuracy.

A: John demonstrated progress in both treatment tasks today. Response to yes/no questions increased 60% to 70% (in 20 trials). Imitative.

P: Continue current activities.

Articulation

S: Client seemed less responsive today and difficult to engage.

O: Produced final consonants at sentence level with 85% accuracy during a structured activity. Produced /s/ in all positions during conversational speech with minimal auditory cueing.

A: Jason's progress on /s/ production objectives suggests he is beginning to master this skill. Skill is still present when visual and auditory cueing is reduced.

P: Plan to continue working on final consonants and baseline accuracy in structured speech activity. Remove all cueing during /s/ activity to see if successful production can be maintained.

Language

S: Client arrived on time and appeared ready and motivation to begin therapy.

O: Across a 55-minute session, client produced spontaneous utterances 65% of the time with imitated utterances occurring 35% of the time during structured science experiment activity. Auxiliary verb production worksheet was completed with 76% accuracy (19/25) following a book reading task with a high occurrence of auxiliary verb usage. Binary choices were given X6 when erred productions were made.

A: Spontaneous productions have increased by 5% over last week (averaged 60% spontaneous; 40% imitated). Eric seemed more confident during in offering inferences during the science experiment activity. Binary choices seemed to help Eric correct erred production of auxiliary verbs during worksheet activity.

P: Continue use of science experiments to increase Eric's use of spontaneous expressive utterances. Continue to target auxiliary verbs using book reading activities and decrease amount of scaffolding given. Prepare home program to be completed over spring break to decrease regression over break.