Functional Outcomes and LSVT LOUD®

I. Specific goals with the LSVT LOUD

1. Given (min/mod/max) clinician/family member cues Patient will increase vocal loudness to a sound pressure level of XX dB SPL at a 50 cm microphone to mouth distance from evaluation baseline XX dB during sustained phonation, which will help her to increase vocal respiratory support required to be understood without cues while expressing medical and personal needs and wants.

2. Patient will increase maximum phonation time to reach a duration of XX seconds with XX cues from XX seconds with max clinician cueing at time of initial evaluation during sustained phonation, which will help her to increase vocal respiratory support required to be understood without cues during a one-minute phone call.

3. Patient will increase phonational frequency range to XX-XX Hertz (Hz) with XX cues from XX-XX Hz with XX cues at time of initial evaluation during pitch range tasks, which will help her to reduce monotone pitch and increase vocal expressivity for functional communication (e.g., raise pitch to indicate she is asking a question; drop pitch to direct an action; change pitch when reading books to grandchildren).

4. Patient will increase vocal loudness to reach a target sound pressure level of XX dB at a 50 cm microphone to mouth distance with XX cues from baseline XX dB during reading at word and sentence levels, which will help her to increase vocal respiratory support to be understood without the need for repetition to convey information while presenting customer information at her workplace.

5. Patient will increase vocal loudness to reach a target sound pressure level of XX dB at a 50 cm microphone to mouth distance with XX cues from her baseline XX dB to communicate effectively during structured conversational speech, which will help her to increase vocal respiratory support to increase loudness and intelligibility so she is understood without the need for repetition when talking with (family/friends/fellow residents/nursing staff) during mealtimes.

6. Patient will reach a target sound pressure level of XX dB at a 50 cm microphone to mouth distance with XX cues from XX dB at time of initial evaluation during (longer/ more complex) paragraph level reading to help her increase vocal respiratory support to increase loudness to be understood without the need for repetition to instruct caregivers regarding needs, wants, or medical status updates.

7. Patient will reach a target sound pressure level of XX dB at a 50 cm microphone to mouth distance to communicate effectively during moderate to complex conversational speech with XX clinician cues to increase loudness which will help patient to increase vocal respiratory support to be understood without the need for repetition to maintain (presenting duties, customer service tasks, etc.) at work.

8. Caregiver(s) will demonstrate understanding of using communication strategies to help pt. increase loudness and intelligibility 100% of the time given minimal cues over three consecutive sessions.

II. Functional Outcome Assessments - to consider with creating and evolving communication goals via LSVT LOUD

1. ASHA FACS (Functional Assessment Communication Scale)

2. BOSS (Beaumont Outcome Software System)

3. FIM (Functional Independent Measurement)

III. Measures Used in LSVT LOUD to Document Functional Outcomes

1. LSVT Initial Interview

2. LSVT Evaluation Protocol Pre/Post Measures
   Duration, Sound pressure level (SPL) data, Frequency data

3. LSVT Daily Treatment Forms (duration, SPL, frequency data)

4. Perceptual scales Pre/Post Measures
   Visual analog scale, Voice Handicap Index (VHI), VHI-10, Communicative Participation Item Bank (CPIB)