



## **Nice Speech Lady Tools— Prep-Communication Mechanisms (Provider Visits)**

When seeing a provider, some patients need help planning what to share.

What can be helpful is writing the reason for the visit and organizing what is needed.

Some patients may have a greater need for this, especially if there are difficulties with:

- focus,
- memory,
- pain,
- receptive/expressive deficits,
- recent changes in physical statuses,
- stress,
- lack of support,
- multiple medications,
- multiple diagnoses,
- too much change happening at once,
- mental health challenges, or
- other factors.

Medical SLPs can provide these prep-forms to patients, care-partners, as well as those with more-significant communication challenges.

These forms can be used for visits with:

- Medical primary care providers,
- Medical specialists,
- counselors,
- physical therapists,
- occupational therapists,
- speech-language pathologists,
- nursing visits,
- other caregivers.

Provided are printable options of the different versions (associated pages referenced):

- Patient Version (page 2)
- Care Partner Version (page 3)
- Version for Those with Communication Challenges (page 4)
- References/Research (page 5)

Due to the versions of different forms, clinicians can choose to print each form individually through printer setting preferences.



**Nice Speech Lady Tool — Prep-Communication Mechanism (Provider Visits)**

**Patient Version**

- My biggest issues are: \_\_\_\_\_  
\_\_\_\_\_
- Other factors to know: \_\_\_\_\_
- What changed recently: \_\_\_\_\_
- What I would like you to ask about: \_\_\_\_\_
- Something you don't know about me: \_\_\_\_\_
- What would help, when we communicate: \_\_\_\_\_  
\_\_\_\_\_
- What I need when we communicate: \_\_\_\_\_
- To explore, when time allows: \_\_\_\_\_
- In all transparency, it would help: \_\_\_\_\_
- My highest need at this point is: \_\_\_\_\_
- When I walk away from this appointment, I would like: \_\_\_\_\_  
\_\_\_\_\_

Discussed area (from before): \_\_\_\_\_

*Rating areas of difficulty; please circle the number in the 0-10 range:*

0 =	<i>no difficulty</i>	5 or 6 =	<i>moderate difficulty</i>
1 =	<i>very mild difficulty</i>	7 =	<i>moderate to severe difficulty</i>
2 or 3 =	<i>mild difficulty</i>	8 or 9 =	<i>severe difficulty</i>
4 =	<i>mild to moderate difficulty</i>	10 =	<i>profound difficulty</i>

\_\_\_\_\_  
Patient

\_\_\_\_\_  
date



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**Care Partner Version**

- The biggest issues are: \_\_\_\_\_  
\_\_\_\_\_
- Other factors to know: \_\_\_\_\_
- What changed recently: \_\_\_\_\_
- What we would like you to ask about: \_\_\_\_\_
- Something you don't know about the patient: \_\_\_\_\_
- What would help, when we communicate: \_\_\_\_\_  
\_\_\_\_\_
- What is needed during communication: \_\_\_\_\_
- To explore, when time allows: \_\_\_\_\_
- In all transparency, it would help: \_\_\_\_\_
- The highest need at this point is: \_\_\_\_\_
- When walking away from this appointment, we would like: \_\_\_\_\_  
\_\_\_\_\_

Discussed area (from before): \_\_\_\_\_

*Rating areas of difficulty; please circle the number in the 0-10 range:*

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\_\_\_\_\_  
Signature/printed name

\_\_\_\_\_  
your role

\_\_\_\_\_  
date



Nice Speech Lady

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**Version for Those with Communication Challenges (Circle/Fill-In):**

◦ **Big issues:** PAIN, ROUTINE VISIT, SICKNESS: \_\_\_\_\_ QUESTION: \_\_\_\_\_

INJURY: \_\_\_\_\_ NEW SYMPTOMS: \_\_\_\_\_ SEE A SPECIALIST: \_\_\_\_\_

FOLLOW-UP ON: \_\_\_\_\_ TALKING, UNDERSTANDING OTHERS, MEDICATION NEEDS

OTHER: \_\_\_\_\_

**Factors:** RECENT TRAGEDY: \_\_\_\_\_, CHANGES: EATING, SLEEP, ACTIVITY, \_\_\_\_\_

SITUATION: \_\_\_\_\_ PHYSICAL SYMPTOMS: \_\_\_\_\_ OTHER: \_\_\_\_\_

◦ **I want to ask:** HOW TO IMPROVE \_\_\_\_\_ WHAT TO DO ABOUT \_\_\_\_\_

◦ **When we communicate:** USE WRITING USE BREAKS USE MY A/AC TOOLS SLOW DOWN

ASK ME YES/NO QUESTIONS MY CARE PARTNER SPEAKS FOR ME BE PATIENT VALIDATE

EYE CONTACT IS HARD I NEED TIME TO ANSWER LISTEN; IT HELPS INTERPRETER NEEDED

OTHER: \_\_\_\_\_

◦ **Let's talk someday on:** PREVENTING ILLNESS PRIVATE/HARD TOPICS RESOURCE NEEDS

MENTAL HEALTH MY QUESTIONS: \_\_\_\_\_

◦ **I want to feel:** RESPECTED HEARD PATIENTLY LISTENED TO REFERRALS MADE

MY LOVED ONES ARE INVOLVED QUESTIONS ANSWERED PAIN/DISCOMFORT ADDRESSED

MEDICATION NEEDS ADDRESSED IT MATTERS WHAT I ASK CONCERNS ARE TENDED TO

I AM PREVENTING MEDICAL PROBLEMS A PLAN IN PLACE (other): \_\_\_\_\_

\_\_\_\_\_  
Patient

\_\_\_\_\_  
date



## **REFERENCES**

Roulstone, Sue. (2011). [Evidence, expertise, and patient preference in speech-language pathology. International journal of speech-language pathology](#). 13. 43-8. 10.3109/17549507.2010.491130.

Yu W, Li M, Ye F, *et al* [“Patient preference and choice of healthcare providers in Shanghai, China: a cross-sectional study.” BMJ Open](#) 2017;**7**:e016418. doi: 10.1136/bmjopen-2017-016418