1 MSD Assessment
- based on medical model
  - localize disease
  - make diagnosis
  - define treatment plan
- speech viewed as sx of disease

2 General Guidelines
- history
- salient features
  - features that contribute most directly and influentially to dx
  - speech characteristics and neuromuscular substrates
- confirmatory signs
  - signs other than deviant speech characteristics
- integration of findings

3 Framework for Analysis
- speech - perceptual features
- neuromuscular - movement dimensions

4 Effect of Neuromuscular Features (Table 3-1)
- strength of movement
- speed
- range of motion
- steadiness
- tone
- accuracy

5 Confirmatory Signs
- additional clues
- signs other than speech characteristics -nonspeech in nature
- not diagnostic of speech dx
- confirm dx
- examples: atrophy, increased/decreased tone, pathologic/absent reflexes

6 Framework for Analysis: confirmatory signs
- derived from observation of nonspeech activity or event
  - gait
  - direct muscle observation
  - reflexes
  - atrophy and fasiculation
  - loss of automatic movement
  - difficulty initiating movement

7 Integration of findings
- final step in assessment
integration of history, salient speech features and confirmatory signs
final goal: diagnosis of disorder

8 Diagnostic Process
- history
- description of problem - features of speech
- oral mechanism examination
- perceptual characteristic
- standardized tests
- acoustic/physiologic components

9 History
- basic facts
- onset
- course
- awareness
- significance - handicap
- informal observation
- biographical information