## **Critical Review:**

## Is the assessment of language skills via telerehabilitation comparable to face-to-face assessment in adults with acquired brain injury?

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This review examined the current literature regarding the equivalence of telerehabilitation methods to face-to-face methods of assessing language skills and disorders in adults with an acquired brain injury. Five studies that compared assessment outcomes for aphasia, functional communication, story-retelling ability, and discourse ability between telerehabilitation and face-to-face settings were selected for review. Overall, findings provided suggestive evidence that telerehabilitation methods of assessing language skills in adults with an acquired brain injury are comparable to face-to-face methods.

## Introduction

Following an acquired brain injury (e.g., stroke, traumatic brain injury), many individuals experience communication and language impairments (Mashima & Doarn, 2008). These impairments may include aphasia,

## Methods

Search Strategy

Tasks from the Mediated Discourse Elicitation Protocol were used in combination with protocol and stimuli from AphasiaBank to obtain assessment measures on four types of discourse: personal event description, story retelling, picture description, and procedural narrative. Each

assessment. The study suggests that although severity of aphasia may have an effect on the ability to accurately assess certain language clusters (i.e., naming and paraphasia), a good strength of agreement is still found within each severity level between the two assessment methods.

Discussion

and commented on their experience with telerehabilitation following their assessment. Overall, participants reported a high level of satisfaction with telerehabilitation methods of assessment and expressed their willingness to participate in telerehabilitation services again in the future. However, in the study by Georgeadis et al. (2004), participants with TBI were less likely to provide positive feedback about their experience with telerehabilitation. The authors suggested that participants' awareness of their poorer performance in the telerehabilitation setting may have

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