If it’s hard for patient to point, please use “partner-assisted scanning”

How:
Ask the patient to focus on the communication board.
Establish patient’s “yes” (i.e. nodding, blinking, thumbs up, etc.).

1. Proceed cell by cell across the communication board. Point to each item and ask if that is the patient’s response.
2. Patient will signal that you are pointing to the desired response using established YES response.
3. Confirm the selection & repeat if necessary

Additional Considerations:
• Hold this tool ~12 inches (~30 cm) from the patient’s face.
• Ensure good lighting, head positioning, and vision.
• Speak loudly and clearly using simple language.
• Wearing masks and other PPE may make it difficult to understand speech. Consider using communication tools when speaking to the patient as well.
• If the patient can’t use this tool effectively now, that does not mean the patient won’t be able to use it later today, tomorrow, or this week. Continue to provide opportunities to support communication.
<table>
<thead>
<tr>
<th>Nurse</th>
<th>Doctor</th>
<th>Time for medication</th>
<th>Wait here</th>
<th>Visitor times</th>
</tr>
</thead>
<tbody>
<tr>
<td>enfermera</td>
<td>médico</td>
<td>hora de la medicina</td>
<td>esperaré aquí</td>
<td>la hora del la visita</td>
</tr>
</tbody>
</table>

- **Eat** - comer
- **Drink** - tomar, beber
- **Bathroom** - baño
- **Bedpan** - bacinica, cómodo
- **Urinal** - orinal, urinario
- **Bedtime** - hora de acostarse
- **Blanket** - cobija, frazada
- **Pillow** - almohada
- **Uncomfortable** - incómodo
- **Tired** - cansado
- **Get out of Bed** - salga de la cama
- **Get Dressed** - vestirse
- **TV** - televisión
- **Book / Magazine** - libro / revista
- **Radio / Music** - radio / música
- **Bathe** - bañarse
- **Brush Hair** - peinar
- **Brush Teeth** - cepillarse los dientes
- **Wash Hands** - lavarse las manos
- **Wash Face** - lavar la cara

- **Yes** - sí
- **No** - no
<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>I’m sick</td>
<td>chest pain</td>
<td>dizzy</td>
<td>headache</td>
<td>throw up</td>
</tr>
<tr>
<td>nauseas</td>
<td>dolor de pecho</td>
<td>mareado</td>
<td>dolor de cabeza</td>
<td>vomitar</td>
</tr>
<tr>
<td>tooth ache</td>
<td>sore throat</td>
<td>backache</td>
<td>stomachache</td>
<td>body pain</td>
</tr>
<tr>
<td>dolor de muela</td>
<td>dolor de garganta</td>
<td>dolor de espalda</td>
<td>dolor de estómago</td>
<td>dolor de cuerpo</td>
</tr>
<tr>
<td>difficulty hearing</td>
<td>difficulty breathing</td>
<td>difficulty swallowing</td>
<td>difficulty seeing</td>
<td>diarrhea</td>
</tr>
<tr>
<td>dificultad para oír</td>
<td>dificultad para respirar</td>
<td>dificultad para tragar</td>
<td>dificultad para ver</td>
<td>diarrea</td>
</tr>
<tr>
<td>hot</td>
<td>cold</td>
<td>sad</td>
<td>angry</td>
<td>confused</td>
</tr>
<tr>
<td>acalorado</td>
<td>frio</td>
<td>triste</td>
<td>enojado</td>
<td>confundido</td>
</tr>
<tr>
<td>yes</td>
<td>no</td>
<td>I am hurt</td>
<td>I am fine</td>
<td>good</td>
</tr>
<tr>
<td>sí</td>
<td>no</td>
<td>me duele</td>
<td>estoy bien</td>
<td>bueno</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>bad</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>malo</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>repeat</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>repetir</td>
</tr>
</tbody>
</table>

Adapted from original ideas from Susan F. Rzucidlo, Speak Unlimited, 2009


www.papremisealert.com/about-speak.html
<table>
<thead>
<tr>
<th>adjust</th>
<th>up</th>
<th>on stomach</th>
<th>head</th>
<th>pain</th>
</tr>
</thead>
<tbody>
<tr>
<td>pillow</td>
<td>down</td>
<td>on side</td>
<td>arms</td>
<td>okay</td>
</tr>
<tr>
<td>out of bed</td>
<td>sit in chair</td>
<td>rub</td>
<td>legs</td>
<td>itchy</td>
</tr>
<tr>
<td>uncomfortable</td>
<td>IV</td>
<td>massage</td>
<td>feet</td>
<td>untie hands</td>
</tr>
</tbody>
</table>

**body comfort**
### Help Needed Communication Board

#### I need help with something.....

<table>
<thead>
<tr>
<th>head</th>
<th>up</th>
<th>fix my pillow</th>
<th>bathroom</th>
<th>TV remote</th>
<th>nurse call button</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image1" alt="head" /></td>
<td><img src="image2" alt="up" /></td>
<td><img src="image3" alt="fix my pillow" /></td>
<td><img src="image4" alt="bathroom" /></td>
<td><img src="image5" alt="TV remote" /></td>
<td><img src="image6" alt="nurse call button" /></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>feet</th>
<th>down</th>
<th>Please wash &amp; change me.</th>
<th>blanket</th>
<th>glasses</th>
<th>clean glasses</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image7" alt="feet" /></td>
<td><img src="image8" alt="down" /></td>
<td><img src="image9" alt="Please wash &amp; change me." /></td>
<td><img src="image10" alt="blanket" /></td>
<td><img src="image11" alt="glasses" /></td>
<td><img src="image12" alt="clean glasses" /></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>turn lights on</th>
<th>turn lights off</th>
<th>open/close curtains</th>
<th>telephone</th>
<th>listen to music</th>
<th>doctor</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image13" alt="turn lights on" /></td>
<td><img src="image14" alt="turn lights off" /></td>
<td><img src="image15" alt="open/close curtains" /></td>
<td><img src="image16" alt="telephone" /></td>
<td><img src="image17" alt="listen to music" /></td>
<td><img src="image18" alt="doctor" /></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>lip balm</th>
<th>lotion</th>
<th>eye drops</th>
<th>wash my face</th>
<th>sit in the chair</th>
<th>go to bed</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image19" alt="lip balm" /></td>
<td><img src="image20" alt="lotion" /></td>
<td><img src="image21" alt="eye drops" /></td>
<td><img src="image22" alt="wash my face" /></td>
<td><img src="image23" alt="sit in the chair" /></td>
<td><img src="image24" alt="go to bed" /></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>stop</th>
<th>that's okay</th>
<th>thank you</th>
<th>Get me off this board!!!</th>
<th>leave me alone</th>
<th>don't leave</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image25" alt="stop" /></td>
<td><img src="image26" alt="that's okay" /></td>
<td><img src="image27" alt="thank you" /></td>
<td><img src="image28" alt="Get me off this board!!!" /></td>
<td><img src="image29" alt="leave me alone" /></td>
<td><img src="image30" alt="don't leave" /></td>
</tr>
</tbody>
</table>
This is how I feel.....

- I'm OK
- tired
- nauseated
- frustrated
- worried
- mad
- I hurt somewhere
- please blow my nose
- I want ice chips
- swab
- eat
- drink
- headache
- mouth
- tongue
- sore throat
- stiff neck
- too hot
- arm
- elbow
- hand
- knee
- feet
- too cold
- bottom ache
- breathing trouble
- gas pains
- backache
- side
- heart problem

FORM 2.11

Pictorial Hospital Communication Board

- come back later
- uncomfortable
- fix pillow
- swab mouth
- lips dry
- hold hand
- stay with me
- light on
- light off
- washcloth on head
- suction mouth
- I love you
- cold
- hot
- open curtain
- close curtain
- bathroom
- When tube out mouth
- television
- listen to music
- read book
- leave me alone

Adapted by permission of John M. Costello, M.A.

In Augmentative Communication Strategies for Adults with Acute or Chronic Medical Conditions by D.R. Beukelman, K.L. Garrett, & K.M. Yorkston (Brookes Publishing, 2007).
<table>
<thead>
<tr>
<th>WHAT IS MY PROGNOSIS?</th>
<th>WHAT ARE MY OPTIONS?</th>
<th>WILL I GET BETTER?</th>
<th>AM I GOING TO DIE?</th>
</tr>
</thead>
<tbody>
<tr>
<td>WHAT WILL HAPPEN NEXT?</td>
<td>WILL I HAVE PAIN?</td>
<td>I WANT TO DISCUSS MY DECISIONS</td>
<td>I WANT MY FAMILY TO DECIDE</td>
</tr>
<tr>
<td>I AM NOT READY TO MAKE A DECISION.</td>
<td>WHEN WILL I COME OFF THE VENTILATOR?</td>
<td>WHAT HAPPENS IF I AM TAKEN OFF THE VENTILATOR?</td>
<td>I HAVE ANOTHER QUESTION</td>
</tr>
</tbody>
</table>

**MAYBE** | **I DON’T KNOW** | **LATER**
If it’s hard for patient to point, please use “partner-assisted scanning”
This is how:

Ask patient to focus on the communication board and find the message they want to communicate.
Establish patient’s “yes” (i.e. nodding, blinking, thumbs up, etc.)

1. **Proceed row by row. Point to each row and ask if the desired message is in that row**
   (e.g. point to 1st row and ask, “Is it in this row?” followed by 2nd row, and so on)
3. **Patient will select a row using the established YES response. Verify the choice out loud.**
4. **Point to each message within the selected row (“Are you in pain?” “Do you need oxygen?,” etc.).**
4. **Patient will signal that you are pointing to the desired message using established YES response.**
5. **Confirm the selection & repeat.**

**Additional Considerations:**

- Hold this tool ~12 inches (~30 cm) from the patient’s face.
- Ensure good lighting, head positioning, and vision.
- Speak loudly and clearly using simple language.
- Wearing masks and other PPE may make it difficult to understand speech. Consider using communication tools when speaking to the patient as well.
- If the patient can’t use this tool effectively now, that does not mean the patient won’t be able to use it later today, tomorrow, or this week. Continue to provide opportunities to support communication.
If it’s hard for patient to point, please use partner-assisted scanning

This is how:

Ask patient to think of a message to spell (simple, single word messages are often best).
Establish the patient’s “yes” (i.e. nodding, blinking, thumbs up, etc.).

1. Cue the patient to focus on the 1st letter of the word.
2. Proceed row by row. Point to each row and ask if the letter is in that row.
   (e.g. point to 1st row and ask, “Is it in this row?” followed by 2nd row, and so on)
3. Patient will select a row using the established YES response. Verify the choice out loud.
4. Point to each letter within the selected row (“Is it A, B, C, D?”).
4. Patient will signal the desired letter using the established YES response.
5. Confirm the selection & repeat.

Additional Considerations:

• Hold this tool ~12 inches (~30 cm) from the patient’s face.
• Ensure good lighting, head positioning, and vision.
• Speak loudly and clearly using simple language.
• Wearing masks and other PPE may make it difficult to understand speech. Consider using communication tools when speaking to the patient as well.
• If the patient can’t use this tool effectively now, that does not mean the patient won’t be able to use it later today, tomorrow, or this week. Continue to provide opportunities to support communication.
Today is ___________________.

Time: _____________

I am getting treatment at ________________________________.

I have been in the hospital for ___________ days.

Today I feel...

<table>
<thead>
<tr>
<th>Better</th>
<th>The Same</th>
<th>Worse</th>
<th>Not Sure</th>
</tr>
</thead>
<tbody>
<tr>
<td>stronger</td>
<td>okay</td>
<td>stressed</td>
<td>anxious</td>
</tr>
<tr>
<td>optimistic</td>
<td>tired</td>
<td>sad/upset</td>
<td>confused</td>
</tr>
</tbody>
</table>

Reminders:
- Nurses and doctors wear protective gear to help fight this virus and help people get better
- People are washing their hands and practicing ‘social distancing’ (staying 6 ft apart) to stop the spread of this virus
REMEMBER:
Please make sure that the kits are properly disinfected before they are brought to patients. One set of communication boards is designed for the use of one patient only. It should not be reused. It must be disposed of properly once the patient does not need to use it anymore. You may communicate with us if there is a need for more specific communication boards. Email us at pasp.aac.sig@gmail.com.

**FORM 2.7**

**Augmented Comprehension Instruction Card**

To convey more specific information to someone with comprehension difficulties:

- **WRITE** key words or concepts on a tablet and show them to the patient.
- Use large print.
- Use drawings (e.g., of the body, of the United States).
- **Write AS YOU TALK.**
- **POINT** to what you’re talking about (e.g., to things in the room, to give directions).
- **GESTURE** or PANTOMIME.
- **DRAW** key ideas or relationships between items and people (e.g., a quick map of the state and a stick figure labeled “son” with arrows between the two objects to augment a verbal utterance such as “Does your son live in Massachusetts or outside of Massachusetts?”).
COMMUNICATION BOARDS
Implementation Instructions

Patients in the ICU, particularly those on mechanical ventilators, experience difficulties communicating with their caregivers. By being unable to communicate, there’s a risk of causing adverse events to happen, events that may impact patients’ recovery. Patients who are unable to communicate cannot effectively participate in medical decision making. These in turn make their ICU stay more stressful for them and their caregivers.

Some hospitals in the Philippines possess tools that alleviate these communication barriers in acute care settings, but many other hospitals may lack these tools. The Philippine Association of Speech Pathologists through its Augmentative and Alternative Communication (AAC) Special Interest Group has come up with free, downloadable low-tech communication tools that can be quickly distributed to hospitals that are tasked to treat patients with Covid-19. The following is a guide on how to implement these tools.

Common sense strategies:

It is best to assume that there will always be barriers in the way of effective communication. When the patient is unable to understand what you are saying, what they are trying to say or do is not reflective of their status nor of their needs. Since you are wearing PPE, it will be difficult for patients to hear and understand you, even more so by patients with visual and hearing issues.

Ask if the patient speaks in Tagalog or English / Taglish. Speak clearly and slowly. Speak directly to the patient. If the patient typically uses glasses or a hearing aid, make sure the patient is wearing them.

Masks, PPE and other equipment at the bedside will make it difficult for the patient to hear and understand you. Use visual cues along with your talking to support your communication attempts.

Mechanical ventilation will make it difficult, even impossible, for a patient to speak. Even if the patient mouths words, it is difficult to do in the situation. Lip reading is known to be prone to misunderstanding and errors.

A few tips to remember and use:

- To get a patient’s attention: touch patient’s shoulder or arm; establish eye contact
- Speak slow and loud: enunciate
- Establish how a patient can communicate YES-NO to you: is it head nod/shake? Thumbs up/down? Thumbs up/closed fist? Blink eye/close eyes?)
- When you have established the patient’s preferred YES-NO communication gestures, put a sign at the bedside to alert all providers:

  This Patient Communicates by:

  YES: _______________________

  NO: _______________________

  OTHER: ____________________
• Speak in simple phrases; repeat important words
• Use visuals while you talk
  o Point, gesture.
  o Write key words / phrases with bullet points on paper
  o Point to pictures or phrases on the communication board while you ask questions about needs or symptoms: Remember... keep your questions / phrases SHORT
• Whatever mode you use to communicate with the patient, always check with the patient if you were able to understand what they are saying by using YES-NO

Low Tech Communication Strategies

1. Writing: if your patient can read and write
  o Make sure paper and pencil, or whiteboard and whiteboard markers are at the bedside
  o A laminated white piece of paper can be used a whiteboard
  o Write legibly and position the paper / board properly so the patient can read what you wrote
  o Position the paper / board properly just so the patient can write easily on them

2. Message Boards
  o Pre-printed message boards let patients identify their needs or answer question faster
  o The Philippine Association of Speech Pathologists through its Augmentative and Alternative Communication (AAC) Special Interest Group has made several boards available for download and printing.
  o Each board is designed to be printed on two sides of the paper.
  o The reverse side includes instructions on how to use the board with the patient.

please email mrkean@mghihp.edu
OR meaghan_whalen@med.unc.edu to make more :)

PHILIPPINE ASSOCIATION OF SPEECH PATHOLOGISTS
AAC SIG
To avoid infection control issues, these boards are single-patient use only. They must be disposed of properly once the patient does not need to use it anymore.

In order to prevent early wear-and-tear, these boards may be laminated, put in plastic sleeves, or printed on waterproof printer paper.

When using the boards with the patients, position them where the patient can see them, and where they can use their hands to point. Position at the patient’s dominant and/or hand/arm that is least restricted by tubes/tape.

**If the patient cannot point**, use **partner-assisted scanning**:
- Hold up the board so the patient can clearly see it
- Hold the board ~12 inches (~30 cm) from the patient’s face
- Make sure there is good lighting
- Ensure that the patient’s head is positioned well, and the board is at his line of vision
- Ask the patient to focus on the communication board, and look for the message they want to communicate
- Use the patient’s established YES (i.e. head nod, eye blink, thumbs up, etc.)
- Go row by row on the board
- Point to each row, ask if the patient’s desired message is in that row
- Speak loudly, clearly, using simple / short phrases (ex: point to 1st row: “This row?” and so on)
- When the patient selects a row by communicating YES, verify: “Ah, this row.”
- Then, point to each message on the row: (say: “Suction?” “Hard to breathe?”)
- Patient will communicate YES if you pointed to the desired message
- Finally, confirm with the patient that that was the desired message before continuing

**Remember:**
- If the patient cannot use the tool now, the patient can try again later today, or tomorrow, or next week.
- Keep on providing opportunities to support communication

https://www.patientprovidercommunication.org/
This Patient Communicates by:

YES: ____________________________

NO: ____________________________

OTHER: __________________________

A few tips to remember and use:
- To get a patient’s attention: touch patient’s shoulder or arm; establish eye contact
- Speak slow and loud: enunciate
- Establish how a patient can communicate YES-NO to you: is it head nod/shake? Thumbs up/down? Thumbs up/closed fist? Blink eye/close eyes?)

- When you have established the patient’s preferred YES-NO communication gestures, put THIS sign at the bedside to alert all providers.