IM ADULT REHABILITATION BEST PRACTICES: COGNITIVE SKILLS
POST-TEST ANSWER KEY

1. <mark>True</mark> or False. IM tasks can be performed without sound as long as visual view with center flash is utilized.

2. True or <mark>False</mark>. Only adult patients can benefit from use of visual-only IM to improve visual processing skills.

3. <mark>True</mark> or False. Some patients may require a reduced tempo when performing visual-only IM tasks (without sound) due to impaired visual processing speed.

4. Visual-only IM (without sound) should be introduced in which phase of IM treatment?
   a. Phase 1: Learn the reference tone
   b. <mark>Phase 5: Improve Focus</mark>
   c. Phase 2: Learn the guide sounds
   d. Phase 3: Improve basic timing and rhythm

5. To effectively measure outcomes from visual-only IM, it is recommended that IM providers:
   a. <mark>perform objective assessment of visual processing skills before, during & after visual-only IM training</mark>
   b. perform only the Long Form Assessment, as that is an adequate measure of visual processing
   c. rely on the exercise averages (MS) during visual-only IM training to determine outcomes
   d. each of the above is appropriate

6. When introducing supplementary tasks during IM treatment, it is important to:
   a. begin with the metronome off
   b. begin with the reference tone alone
   c. begin with a reduced tempo
   d. <mark>each of the above is appropriate when introducing supplementary visual tasks</mark>

7. <mark>True</mark> or False. Use of supplementary tasks during IM treatment can lead to improvement in executive functions.

8. True or <mark>False</mark>. When using supplementary tasks during IM treatment, the tempo must remain at 54.

9. When should the provider introduce supplementary tasks?
   a. Phase 3: Improve basic timing and rhythm
   b. <mark>Phase 5: Improve focus</mark>
   c. Phase 2: Learn the guide sounds
   d. Phase 1: Learn the reference tone

10. <mark>True</mark> or False. Supplementary task stimuli and associated cognitive and motor tasks can be simplified or made more challenging depending upon individual patient needs.

11. Which of the following are components of Executive Function:
    a. Initiation
    b. Planning
    c. Judgment
    d. <mark>All of the above</mark>

12. When a person with Executive Dysfunction cannot effectively communicate their ideas, the areas of EF that are most likely impaired are:
    a. Time Management
    b. Organization
    c. Sequencing
    d. B and C

13. A patient is asked to write a paragraph on what they did over the weekend. They fill up a whole page with redundant statements as well as off topic information. All of the following areas are impaired with the exception of:
    a. Time Management
    b. Initiation
    c. Self-regulation
    d. Organization

14. True or False: A neuropsychological evaluation is the only way to determine Executive Functions abilities?

15. True or False: You should NOT introduce simultaneous cognitive tasks when the patient is learning how to respond to guide sounds.

16. True or False: If a patient has difficulty with the guide sounds during simultaneous cognitive tasks, then you can turn down the volume to see if that improves patient response.

17. Which is in the appropriate order based on the difficulty hierarchy:
    a. Light conversation, mental manipulation, orientation
    b. Automatic speech tasks, abstract divergent reasoning, concrete divergent reasoning
    c. Orientation, divergent reasoning, mental manipulation
    d. Calculations, counting, delayed recall

18. A way to target "initiation" during IM is to:
    a. Have the patient turn on the computer and find their IM file without prompting
    b. Have the patient use a timer during the session
    c. Set a realistic burst goal
    d. Have the patient rate their performance

19. Which of the following are indicators of progress:
    a. Patient/caregiver report
    b. Formal testing data
    c. Short-term and long-form assessments
    d. All of the above

20. True or False: Considerations for patients with EDF should include compensatory strategies, education, and counseling.

21. True or False: Language processing refers to the process of hearing, discriminating, attaching meaning to, and interpreting spoken information from simple words to complex discourse.

22. True or False: It is a good idea to allow the patient to become proficient with IM Hand Tasks using the speakers before introducing additional treatment stimuli.

23. True or False: It is important to emphasize the patient's millisecond score, even if performance deteriorates during the initial introduction of cognitive-linguistic stimuli.

24. **True** or False: It is acceptable for the patient to skip some beats when formulating verbal responses during IM.

25. True or **False**: IM should never be performed in a distracting environment.

26. **True** or False: Motor learning is an important component of treatment of those patients with Apraxia of Speech disorders.

27. Sensory treatments that are effective in the treatment of Apraxia of Speech can include:
    a. Visual Feedback
    b. Auditory Feedback
    c. Tactile Feedback
    d. Kinesthetic Feedback
    e. **All of the above**

28. **True** or False: Word Finding and confrontational naming deficits are often a common characteristic of aphasia.

29. Verbal tasks should be included in:
    a. Phase I
    b. Phase II
    c. Phase III
    d. **Phase IV**

30. True or **False**: There is no need to continue use of traditional speech treatment techniques when using Interactive Metronome as a modality or tool for the treatment of aphasia and/or apraxia.

31. Goals for treatment of the patient with dementia can include:
    a. Motor memory
    b. Initiation of activity
    c. Improved alertness levels
    d. **All of the above**

32. **True** or False: Modifying volume settings can have a positive impact on those patients with hearing impairments, sensory defensiveness, and/or poor attention.

33. True or **False**: The dementia population tolerates and is able to integrate all of the guide sounds well and they should be provided quickly and without modifications.

34. In order to increase the number of repetitions a patient is able to perform you can:
    a. Use on and off cycles of activation
    b. Use the visual mode only
    c. Alternation of activity mid repetitions
    d. **Both a and c**

35. **True** or False: Interactive Metronome is affective with the dementia population even with modifications in place throughout their course of treatment.

36. True or **False**: The Long Form is always an appropriate data collection tool for those nursing home residents.

37. Signs of fatigue can include:
    a. Decreased attention to task
    b. Headaches
    c. Changes in respirations
    d. All of the above

38. True or False: Interactive Metronome is an appropriate tool to be used concurrently with other treating modalities and/or with traditional treatment techniques.

39. True or False: The use of auditory and/or visual feedback is not appropriate with this population.

40. Some of the ways to combat physical/positioning limitations are:
    a. Modifying access to the triggers
    b. Ignore autonomic changes
    c. Provide rest breaks
    d. Both a and c