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| **Domain:** | Speech and Hearing |
| **Measure:** | Family History of Speech and Language Impairment |
| **Definition:** | This measure is a questionnaire to identify family history of speech and language impairment. |
| **Purpose:** | This measure can be used to assess familial risk factors related to speech and language impairment. |
| **Essential PhenX Measures:** | Current Age |
| **Related PhenX Measures:** |  |
| **Collections:** | DevelopmentFamily Health History |
| **Keywords:** | Family history, Speech, Language, Speech and Hearing |

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| **Protocol Release Date:** | October 8, 2010 |
| **PhenX Protocol Name:** | Family History of Speech and Language Impairment |
| **Protocol Name from Source:** | This section will be completed when reviewed by an Expert Review Panel. |
| **Description:** | The Family History Questionnaire is a 9-item proxy-administered questionnaire completed by a parent for their young child. It asks about the child's personal and family history of speech and language impairment. |
| **Specific Instructions:** | Rosa's Law, enacted in October 2010, changes references in federal laws and acts from "mental retardation" to "intellectual disability," and references to a "mentally retarded individual" to "an individual with an intellectual disability." The PhenX Working Group notes that this protocol was developed and tested using previously accepted terminology. Replacing this terminology with the newly enacted standard is at the researcher's discretion. |
| **Protocol:** | **Family History Questionnaire****Target child/person items**:1. By age 2, was your child talking in short phrases or sentences? [ ] 0 No[ ] 1 Yes[ ] 99 Don't Know2. When your child was 2 years old, were you concerned that he/she was having difficulty learning to talk?[ ] 0 No[ ] 1 Yes[ ] 99 Don't Know3. At this time, do people frequently have trouble understanding your child?[ ] 0 No[ ] 1 Yes[ ] 99 Don't Know4. Has anyone in your child's family had speech or language therapy?[ ] 0 No[ ] 1 Yes[ ] 99 Don't Know**If Yes**, Relationship to child? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_What for? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Family items****Family**: **Parents and biologically related siblings**5. Has anyone in your child's family had difficulty learning to read or had problems with school work? (e.g., repeated a grade)[ ] 0 No[ ] 1 Yes[ ] 99 Don't Know**If Yes**, what are the details? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_6. Has anyone in your child's family been diagnosed as mentally retarded?[ ] 0 No[ ] 1 Yes[ ] 99 Don't Know7. Does anyone in your child's family have a hearing difficulty?[ ] 0 No[ ] 1 Yes[ ] 99 Don't Know8. Has anyone in your child's family been slow in learning to talk?[ ] 0 No[ ] 1 Yes[ ] 99 Don't Know9. Has anyone in your child's family had any other type of communication disorder such as: 9.1. Stuttering?[ ] 0 No[ ] 1 Yes9.2. Is less talkative?[ ] 0 No[ ] 1 Yes9.3. Has a hard time carrying on a conversation?[ ] 0 No[ ] 1 Yes9.4. Doesn't like to read?[ ] 0 No[ ] 1 Yes9.5. Doesn't read well?[ ] 0 No[ ] 1 Yes9.6. Has difficulty thinking of words (s)he wants to say when talking?[ ] 0 No[ ] 1 Yes9.7. Has a poorer vocabulary than other family members?[ ] 0 No[ ] 1 Yes9.8. Is a poor speller?[ ] 0 No[ ] 1 Yes9.9. Has awkward sentence structures when writing or talking?[ ] 0 No[ ] 1 Yes9.10. Mispronounces long words?[ ] 0 No[ ] 1 Yes9.11. Is hard to follow when (s)he tells you something, such as a personal experience?[ ] 0 No[ ] 1 Yes9.12. Has difficulty explaining things?[ ] 0 No[ ] 1 Yes |
| **Selection Rationale:** | The Family History Questionnaire was selected because it is a simple, reliable protocol that can be quickly and easily administered to capture a child's personal and family history of speech and language impairment. |
| **Source:** | Mabel L. Rice, author. Family History Questionnaire. Language Acquisition Studies Lab. University of Kansas, Lawrence, KS. |
| **Life Stage:** | ChildAdolescentAdult |
| **Language of source:** | English |
| **Participant:** | The parents of children and adolescents, ages 3-21 years old |
| **Personnel and Training Required:** | None |
| **Equipment Needs:** | The respondent will need a copy of the questionnaire. |
| **Standards:** |

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| **Standard** | **Name** | **ID** | **Source** |
| Common Data Element (CDE) | Family Medical History Speech And Language Impairment Assessment Description Text | 3139293 | [CDE Browser](https://cdebrowser.nci.nih.gov/CDEBrowser/search?elementDetails=9&FirstTimer=0&PageId=ElementDetailsGroup&publicId=3139293&version=1.0) |
| Logical Observation Identifiers Names and Codes (LOINC) | Fam hx speech lang impair proto | 62984-0 | [LOINC](http://s.details.loinc.org/LOINC/62984-0.html?sections=Web) |

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| **General references:** | Rice, M. L., Haney, K. R., & Wexler, K. (1998). Family histories of children with SLI who show extended optional infinitives. *Journal of Speech, Language, and Hearing Research, 41,* 419–432. |
| **Mode of Administration:** | Proxy-administered questionnaire |
| **Derived Variables:** | None |
| **Requirements:** |

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| **Requirement Category** | **Required** |
| Major equipment | No |
| Specialized training | No |
| Specialized requirements for biospecimen collection | No |
| Average time of greater than 15 minutes in an unaffected individual | No |

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| **Process and Review:** | This section will be completed when reviewed by an Expert Review Panel. |