



# Ideas for cognitive therapy

Work with your patient to find specific things they want to work on. What do they want to be different after completing therapy with you?

## Remembering information

- Own name, address, date of birth, age, or wedding anniversary.
- Names, ages, birthdays, locations of family members.
- Current time, day, date, and year.
- Names of current president, vice-president, and governor.
- Where to look to find important information.
- Recent visitors and topics of conversation.
- Key pieces of information from things recently heard, seen, or read.
- Medication or therapy instructions.

## Activities of daily living (ADLs)

- Recalling and following the steps for using an assistive device.
- Following guidelines for safer swallowing.
- Verbalizing and demonstrating steps for self-care activities like washing hands.

## Instrumental activities of daily living (IADLs)

- Telephone and voicemail.
- Cell phone, computer, texting, emails.
- Food preparation and shopping.
- TV, radio, books, magazines, and other entertainment.
- Clock, calendar, personal schedule.
- Mail and financial management.
- Medication management.
- Planning or carrying out shopping, housework, laundry.

## ST complements PT and OT

- I approach ADLs and IADLs from a cognitive-communication standpoint. I don't duplicate what PT or OT do.
- Instead, I find out if they're having trouble with my patient remembering what they're teaching.
- If yes, then that could be a good opportunity for me to target the same activity from an ST angle.

## IADLs offer many possible targets for therapy

- Each IADL can be broken down into smaller steps.
- IADLs can be performed at various levels from basic to highly proficient.
- You can retrain the skill or activity, teach compensatory strategies, or introduce technology or environmental modifications to support independence with the task.

## Example: Using a calendar

- I may work on a specific skill, such as using a calendar, with several patients who are at different levels.
- One patient may want to remember what month it is. I may recommend an electronic calendar and train him to look at it whenever he wonders about the date.
- Another patient may want to get in the habit of writing down appointments that she used to keep in her head.
- A third patient may be writing all appointments on the calendar but is double-booking appointments. I may work on time-blocking with her using her current calendar or a planner. Or we may use the calendar on her phone or her voice assistant.
- A fourth patient may be able to read his calendar but can't answer logical, reasoning questions about how his appointments relate to each other and to the current date.

## More resources on Eat, Speak, & Think

Check out "Cognitive therapy: Easy to grasp, hard to master" for more details and resources: [eatspeakthink.com/cognitive-therapy-easy-grasp-hard-master](https://eatspeakthink.com/cognitive-therapy-easy-grasp-hard-master)