

# **University of Wisconsin - Stevens Point**

## **CSD 741 Cognitive Communication Disorders**

**2 credits**

### **Winter session 2021**

**Synchronous class meeting dates and times:**

**Monday, Jan 4th 9-12:20**

**Tuesday, Jan 5th 9-12:20**

**Wednesday, Jan 6th 9-12:20**

**Thursday, Jan 7th 9-12:20**

**Monday, Jan 11th 9-12:20**

**Tuesday, Jan 12 9-12:20**

**Wednesday, Jan 13th 9-12:20**

**Friday, Jan 14th 9-12:20**

**Note: Each day's lecture will be recorded on zoom.**

**Instructor: James Barge M.S. CCC-SLP**

**Email: [Jbarge@uwsp.edu](mailto:Jbarge@uwsp.edu)**

**Office: 042b**

**Office hours: 8:00 to 9:00 am and 1:00 to 2:00 pm on each class day. Student to send zoom link**

**Textbook:**

Cognitive Communication Disorders, third edition

Michael L. Kimbarow

## Course Description:

This course examines the cognitive-communication disorders resulting from right hemisphere damage, traumatic brain injuries, and degenerative conditions such as dementia. In the context of the WHO-ICF, the course material will cover similarities and differences of the characteristics, assessment procedures, and treatment approaches for the above-mentioned disorders.

**ASHA standards:** ASHA standards must be met to apply for certification. Successful completion of the course requirements, that is a grade of B or better, will result in meeting the following standards:

### Standard III-C

1. Explain the etiology of cognitive-communication impairments in adults.
- 2a. Explain the anatomical correlates of cognitive-communication impairments.
- 2b. Explain the physiological correlates of cognitive-communicative impairments.
- 2f. Discuss how acquired cognitive-communication impairments impact adults on a daily basis.

Describe the characteristics of cognitive-and cognitive-communication impairments in adults.

- 2g. Identify how different cultures might react differently to cognitive-communication impairments.

### Standard III-D

#### Prevention

1. Identify risk factors for stroke, traumatic events and degenerative diseases leading to cognitive-communicative impairments.

#### Assessment

2. List examples of formal and informal assessment tools for language, communication, and cognitive skills.

#### Intervention

3. Explain intervention models, approaches, techniques, and/or strategies for adults with cognitive-communication impairments.

### Standard IV-G1

1.c. Accurately administer, score, and interpret a cognitive-communication test

## **Social Communication Area**

### Standard III-D

Assessment: Explain assessment methods used to determine social aspects of communication disorders for adults with cognitive-communication disorders.

Intervention: Explain intervention models, approaches, techniques, and/or strategies for adults with cognitive communication disorders.

## **Communication Modalities Area**

### Standard III-C

1. Explain all the different communication modalities that can be used by adults who have acquired cognitive-communicative impairments.

### Standard III-D

#### Assessment

2. Explain how to assess communication in individuals with cognitive-communication impairments.

#### Intervention

3. Describe intervention models, approaches, techniques, and/or strategies which address all possible communication modalities.

### Standard IV-G1

- 1.e. Assess all possible communication modalities and interpret which are effective and which require support of a communication partner.

## Course Objectives:

Growth in the following areas:

**Knowledge:** Growth in the **understanding of the cognitive underpinnings** of communication and daily activities,

**Efficiency:** Improving the knowledge of the **patterns of dysfunction** of cognitive-communication disorders associated with various medical diagnoses.

**Effectiveness:** **Acquisition of the skills** of Assessment and provision of interventions leading toward enhancement of patient participation in fulfilling activities of life.

**Empathy:** Development of increased **insight into the impact** of these disorders have upon the individual and their family members.

## Course Outline by days:

- 1) Introduction, Attention
- 2) Memory, Executive Function
- 3) Right Hemisphere Dysfunction x2
- 4) Primary Progressive Aphasia, other neurological conditions
- 5) Dementia x2
- 6) Explanations to Family
- 7) Mild Traumatic Brain Injury, Traumatic Brain Injury
- 8) Therapy x2

## Structure of each day:

900 to 1015: Lecture 1a

1015 to 1115: Work on Virtual Patient Project (VPP) with partner

1115 to 1220: Lecture 1b

## Grades:

I will determine grades by converting accumulated points into percentage scores. I will assign percentage scores to letter grades as follows: A grade of B or higher is considered passing in graduate school.

A	95 – 100	A-	90 - 94.99
B+	87 - 89.99	B	83 - 86.99
B-	80 - 82.99	C+	77-79.99
C	73 - 76.99	C-	70 - 72.99

## Grading elements:

**Virtual Patient Project** (14 elements, 10 points each) Pass/Fail 50% 140 points

**Exam 1** (available on 1/7, due midnight on 1/10) OPEN Book 25% 70 points

**Exam 2** (available on 1/14, due midnight on 1/17) OPEN Book 25% 70 points

## Description of the Virtual Patient Project (VPP):

VPP is based in Problem-based Learning

You and your partner will create a patient. You both will work through the process of symptom discovery, medical testing, diagnosis, SLP testing, interviewing, family conferences, identification of attention, memory and executive function deficits consistent with your patient's diagnosis, treatment of these conditions and discharge.

Ideally, you will be able to complete each day's portion between lectures and I will be able to "sign off" prior to the beginning of the second lecture.

- 14 teams chosen by chance.
- I will assign a condition to your client that is appropriate for their age and other factors
- You will investigate the possible etiologies for your patient's symptoms and eventually determine their diagnosis.
- You will select an appropriate test, determine interview questions and lead an educational meeting with the family and caregivers.
- You will write goals and treatment plans for your patient.
- You will decide upon a discharge status for your patient.

I expect students to inform me about any disability that may impact his or her performance in this class. I will make any necessary accommodations for each student according to her or his needs.

I will accommodate religious beliefs according to UWS 22.03 if you notify me within the first 2 days of the semester regarding specific dates which you will need to change course requirements.

*In the event of a medical emergency, call 911 or use red emergency phone located in the middle hallway in the department. Offer assistance if trained and willing to do so. Guide emergency responders to victim.*

*In the event of a tornado warning, proceed to the lowest level interior room without window exposure which is the middle hallway in the department. See [www.uwsp.edu/rmgt/Pages/em/procedures/other/floor-plans](http://www.uwsp.edu/rmgt/Pages/em/procedures/other/floor-plans) for floor plans showing severe weather shelters on campus. Avoid wide-span rooms and buildings.*

*In the event of a fire alarm, evacuate the building in a calm manner. Meet at the College of Professional Studies Sign on the Fourth Avenue. Notify instructor or emergency command personnel of any missing individuals.*

*Active Shooter – Run/Escape, Hide, Fight. If trapped hide, lock doors, turn off lights, spread out and remain quiet. Follow instructions of emergency responders.*

*See UW-Stevens Point Emergency Management Plan at [www.uwsp.edu/rmgt](http://www.uwsp.edu/rmgt) for details on all emergency response at UW-Stevens Point.*