

CSD 746 Dysphagia 3 credits

Spring 2018 Friday 9 a.m. – 11:45 p.m. Room 024 CPS

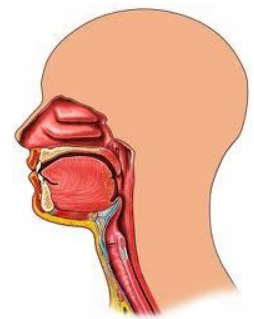
Instructor: Mary Day, M.S., CCC-SLP

Office: 42C CPS **Phone:** 346-3588 **Email:** mday@uwsp.edu

Office hours: See schedule posted on office door.

Text: Corbin-Lewis, K. & Liss, J. (2015). *Clinical Anatomy & Physiology of the Swallow Mechanism* (2nd ed.). Stamford, CT: Cengage Learning.

<https://asbaquez.blogspot.com/2011/06/dysphagia-understanding-and-definition.html>



Additional Resources

Arvedson, J. C., & Brodsky, L. (2002). *Pediatric swallowing and feeding: Assessment and management* (2nd ed.). Albany, NY: Thomson Learning Singular.

Arvedson, J. C., & Lefton-Greif, M.A. (1998). *Pediatric Videofluoroscopic Swallow Studies. A Professional manual with Caregiver Guidelines*. San Antonio, TX: Communication Skill Builders.

Ball, K.A., & Riquelme, L.F. (2016). The Graduate Dysphagia Course: *Opening the Door to New Frontiers*. Perspectives on Swallowing and Swallowing Disorders (Dysphagia), 1, 104-112. doi: 10.1044/perspl.SIG13.104

Barkmeier-Kraemer, J., & Leonard, R. (2014). *Dysphagia assessment and treatment planning workbook: A team approach* (3rd ed.). San Diego, CA: Plural Publishing.

Carl, L. L., & Johnson, P. R. (2006). *Drugs and dysphagia: How medications can affect eating and swallowing*. Austin, TX: PRO-ED.

Dikeman, K. J., & Kazandjian, M. S. (2003). *Communication and swallowing management of tracheostomized and ventilator-dependent adults* (2nd ed.). Clifton Park, NY: Delmar Learning.

Evans Morris, S., & Dunn Klein M. (2000). *Pre-feeding skills: A comprehensive resource for mealtime development* (2nd ed.). San Antonio, TX: Therapy Skill Builders.

Hall, K.D. (2001) *Pediatric Dysphagia Resource Guide*. Clifton Park, NY: Delmar, Cengage Learning.

Klein, M.D. & Delaney, T.A. (1994). *Feeding and Nutrition for the Child with Special Needs*. San Antonio, TX: Therapy Skill Builders.

Logemann, J. A. (1998). *Evaluation and treatment of swallowing disorders* (2nd ed.). Austin, TX: PRO-ED, Inc.

Logemann, J. A. (1993). *Manual for the videofluorographic study of swallowing* (2nd ed.). Austin, TX: PRO-ED, Inc.

Wolf, L. S. & Glass, R. P. (1992). *Feeding and Swallowing Disorders in Infancy: Assessment and Management*. San Antonio, TX: Therapy Skill Builders.

Course Description: This course examines feeding and swallowing disorders in adults and feeding and swallowing development and disorders in children. You will learn the anatomy and physiology of normal and disordered swallowing. The course also covers the topics of assessment and treatment of individuals with dysphagia.

ASHA Standards and Competencies. [If the following competencies are not met by the conclusion of the course, you will receive an 'incomplete' grade.]

Standard III-C

1. Identify potential etiologies of dysphagia in children and adults.
2. a. Explain the anatomical bases of normal and disordered swallowing in children and adults.
b. Explain the physiological bases of normal and disordered swallowing in children and adults.

Standard III-D:

Prevention: Identify causes and risk factors for dysphagia in children and adults.

Assessment: Describe the formal and informal assessment tools used to assess dysphagia in children and adults.

Intervention: Explain intervention strategies, techniques, and approaches for children and adults with dysphagia.

Standard IV-G1

1. c. Conduct a clinical swallowing assessment, including a preparatory (clinical) swallowing assessment.

Standard IV-G2

2. c. Learn, instruct, and use dysphagia strategies, techniques, and maneuvers.

Course requirements*

1. **Exams.** Two examinations, each exam will be approximately 50 points.

Final: 5/16/2018 12:30-2:30 p.m.

2. Written Assignments: There will be five writing assignments. These will be completed individually. With each writing assignment, you will need to follow the writing guidelines provided in class. Due dates are tentative and will be directly related to the timing of the presentation of course content.

- a. **Journal summary:** You will write a summary of a journal article from those posted on D2L and a personal reflection (25 points). **Due February 16 at 9 a.m.**
- b. **Clinical Dysphagia Examination:** You will perform a comprehensive oral-peripheral examination on a classmate (25 points). **Due March 16 at 9 a.m.**
- c. **Clinical Dysphagia Examination Observations:** You will submit the form you completed in #b with your observations and a summary of the results (25 points). **Due March 16 at 9 a.m.**
- d. **VFSS summary to patient/caregiver:** You will write a summary on how you will explain the results of a VFSS to a patient/caregiver (25 points). **Due April 28 at 9 a.m.**
- e. **Feeding Assessment:** You will complete a feeding evaluation on a classmate and request that your "patient" perform swallowing maneuvers. You will write a summary of the evaluation and then write a reflection on your own experience being fed and swallowing using the therapeutic techniques (25 points). **Due May 4 at 9 a.m.**

Note: You should keep copies of your assignments. You may consider using your assignments in your portfolio for meeting DPI teaching standards.

Student Expectations:

- Complete assigned readings prior to class.
- Arrive to class on time, prepared to actively participate during discussions and in-class assignments. **If a student is tardy more than once and/or is not consistently ready to begin at 9 a.m., the student's final grade may be lowered at the discretion of the instructor due to lack of professionalism.**
- Answer questions asked by the instructor.
- Ask the instructor for clarification when needed.
- Display appropriate respect and courtesy to other students and instructor. (This includes sleeping in class, texting, packing up early, etc.)
- Print power points and handouts from D2L and take notes during class.
- Students are expected to be honest in completing their assignments independently.

Instructor Expectations:

- Be prepared for class.
- Begin and end class on time.
- Announce any changes to the syllabus during the course, including exam and assignment changes, well in advance.
- Answer any student questions.
- Meet with students outside of class to discuss concerns or questions about the course requirements or the student's performance.
- Treat all students with courtesy, have set office hours, provide constructive feedback, and return assignments in a timely fashion. If there is a change in office hours, students will be notified either via announcement in class or an email.

Tentative Course Outline:

Topics	Reading/Assignment
Introduction, syllabus, writing guidelines	D2L Power Point – “Intro to Swallowing”
Examination of the Oral Swallow	Chapter 1; D2L Handouts
Examination of the Pharyngeal Swallow	Chapter 2; D2L Handouts
Examination of the Esophageal Swallow	Chapter 3; D2L Handouts
Control of the Normal Swallow	Chapter 4; D2L Handouts
Clinical Examination	D2L Hand-outs
Direct and Indirect Imaging	Chapter 5; D2L Handouts
Physiological Bases of Neurogenic Etiologies	Chapter 6; D2L Handouts
EXAM	
Physiological Bases of Structural Etiologies – H&N CA; Dysphagia in the ICU	Chapter 7; D2L handouts
Intervention – Evidence Based Pract.	Chapters 8 & 9; Articles – D2L
Pediatric Swallowing	D2L Hand-outs
Ethical conduct/practice	Will be addressed throughout course
If scheduling permits:	
Medications and Swallowing	D2L Hand-outs
Orofacial Myofunctional Disorders	D2L Hand-outs

Grading. Final grades will be based on the following:

Five assignments	125 points
Two examinations	100 points
Discretionary points	25 points
Total	~250 points

There may be additional in-class assignments (10-20 points each) which will be given when appropriate.

Discretionary Points: At the conclusion of the semester, you will be awarded 25 additional points based on participation, attendance, level of alertness throughout all class periods, adherence to “student expectations” and attitude.

Grades will be based on a percentage of the total point accumulation for the course. Grades will be given as follows:

A	95.5-100	C	74 -77.99
A-	91 -95.49	C-	71-73.99
B+	88 -90.99	D+	66.5-70.99
B	84 -87.99	D	61 -66.49
B-	81 -83.99	F	Below 61.0
C+	78 -80.99		

OF THE TOTAL POSSIBLE POINTS

It would be to your advantage to attend class and to participate. If a final percentage has a decimal ≥ 0.5 , I will consider adjusting your final percentage IF you have attended class, and participated putting forward your best effort. I reserve the right not to change the grade if I feel that you have not adequately prepared for class or contributed.

If you find that there is an obvious error on an assignment, I would be happy to discuss and modify your grade when appropriate. However, if you choose to argue a point, I will re-evaluate your ENTIRE assignment but you may be subjected to further point deductions if I find that I “missed” point deductions during the initial assessment of the assignment. I will need at least 24 hours for review time before making a decision to adjust the grade.

Cell phones. All cell phones should be turned off before attending class. Students are not to use their cell phones in class for any purpose (talking, text messaging, etc.). Students found in violation will be asked to leave for the remainder of the class period. Repeated violators will have their semester grade lowered.

Laptops

You will not be allowed to use laptops in the classroom unless indicated for certain in-class projects and activities. You may be exempt from this policy with proper documentation from Disability Services. You will be notified in advance if you may bring your laptop. This means that for class discussion you will either need to print any articles and/or take very thorough notes prior to class. **Be sure to bring the required text to each class.** For evidence-based documentation regarding this policy, refer to:

Fried, C. B., In-class laptop use and its effects on student learning, *Computers & Education* (2007), doi:10.1016/j.compedu.2006.09.006

Hembrooke, H. & Gay, G. (2003). The laptop and the lecture: The effects of multitasking in learning environments. *Journal of Computing in Higher Education*, 15 (1), 46-64.
doi: 10.1007/BF02940852

Turkle, S. (2011). *Alone together: why we expect more from technology and less from each other.* New York: Basic Books.

Policy for Late Assignments

All assignments are due at the beginning of class. Unexcused late assignments will receive a penalty of minus five points for the first seven hours the assignment is not submitted. Assignments will not be accepted after the end of the day (4 p.m.) and the student will receive a grade of zero. An excused absence only covers the day of the absence. The assignment is due the following day (Saturday) via email at 8 a.m.

If you become sick (extended illness), are in a car accident, etc. excused late assignments will be allowed (without penalty). **If you anticipate an absence, in order for a late assignment to be excused, you must discuss this with me BEFORE it is due.** Between email and my office phone,

which are listed at the top of this syllabus, there is no reason that you should not be able to contact me. You will be asked to provide documentation for the excused reasons.

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

Disability Statement

If you have a disability that requires accommodation so that you may fully participate in class activities or meet course requirements, please contact me the first day of class.

Refer to <http://www.uwsp.edu/disability/Pages/toQualifyForDisabilityServices.aspx>. for further assistance.

Academic Misconduct

Please refer to <http://www.uwsp.edu/stuaffairs/Documents/RightsResposns/SRR-2010/rightsChap14.pdf> for university policy regarding academic honesty and integrity.

UWSP 14.03 ACADEMIC MISCONDUCT SUBJECT TO DISCIPLINARY ACTION.

(1) Academic misconduct is an act in which a student:

- a) Seeks to claim credit for the work or efforts of another without authorization or citation;
- b) Uses unauthorized materials or fabricated data in any academic exercise;
- c) Forges or falsifies academic documents or records;
- d) Intentionally impedes or damages the academic work of others;
- e) Engages in conduct aimed at making false representation of a student's academic performance; or
- f) Assists other students in any of these acts.
- g) Violates electronic communication policies or standards as agreed upon when logging on initially (See uwsp.edu/it/policy).

(2) Examples of academic misconduct include, but are not limited to: cheating on an examination; collaborating with others in work to be presented, contrary to the stated rules of the course; submitting a paper or assignment as one's own work when a part or all of the paper or assignment is the work of another; submitting a paper or assignment that contains ideas or research of others without appropriately identifying the sources of those ideas; stealing examinations or course materials; submitting, if contrary to the rules of a course, work previously presented in another course; tampering with the laboratory experiment or computer program of another student; knowingly and intentionally assisting another student in any of the above, including assistance in an arrangement whereby any work, classroom performance, examination or other activity is submitted or performed by a person other than the student under whose name the work is submitted or performed.

Emergency Procedures

"In the event of a medical emergency, call 911 or use red emergency phone located in the hall. 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. Go to the center hall in the Center for Communicative Disorders. Avoid wide-span rooms and buildings.

In the event of a fire alarm, evacuate the building in a calm manner. Meet 200 yards away from building). 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 for details on all emergency response at UW-Stevens Point.”