

CSD 786 Cleft Palate and Craniofacial Disorders

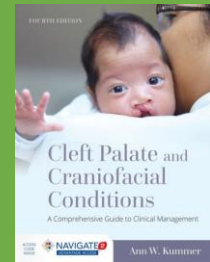
Summer 2019: June 17-July 11
Monday-Thursday 8:00-9:50 am, CPS 024

Instructor Info

Professor: Pamela Terrell, Ph.D., CCC-SLP
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Office Hours: TBA

Required Textbook

Kummer, A. W., (2014). Cleft palate and craniofacial conditions: A comprehensive guide to clinical management. Burlington, MA: Jones and Bartlett Learning.



Course Overview

When new parents have their baby placed in their arms for the first time, they are expecting the Gerber baby personified—perfect and beautiful. However, when that baby has a craniofacial anomaly or a cleft lip and palate it can be very alarming and bewildering. Fortunately, with incredible advances in surgical techniques, orthodontia, and speech therapy many of these children can be have beautiful smiles, clear speech, and bright futures.

Craniofacial Disorders include a variety of syndromes and sequences and often result in clefts of the lip and/or palate. In this course you will learn about the embryological development of the face, head, and mouth and how genetics contribute to the process. You will understand and appreciate the team management of patients with these disorders and learn the timeline for treatment. You will understand how a cleft palate and/or craniofacial disorder can impact feeding, bonding, appearance, self-esteem, hearing, speech/language development, and dentition. Finally, you will be able to evaluate and treat disorders of articulation, language, voice, and resonance related to cleft palate and VPI.

The harder the conflict, the more glorious the triumph. What we obtain too cheap, we esteem too lightly; it is dearness only that gives everything its value. I love the man that can smile in trouble, that can gather strength from distress and grow.

Thomas Paine

Course Outline

(May be adjusted through the semester as need arises. (Let's be honest...*when* the need arises)

June 17-20	<p><u>Mon</u>: Syllabus and course overview; A & P review-Ch. 1; Cleft Palate Team-Ch. 20 <u>Tues</u>: Clefts of lip and palate-Ch. 3; Orafacial exam-Ch. 12 (Craniofacial terminology: Table 4-1, pp.79-80) <u>Wed</u>: Facial, Oral, and Pharyngeal Anomalies-Ch. 5; Genetics Eval and Dysmorphology/Craniofacial Syndromes—Ch. 4, pp. 77-82; 100-104 and only these syndromes in the chapter: hemifacial microsomia, Pierre Robin sequence, Stickler, Treacher Collins, Van der Woude, Velocardiofacial, Apert, Crouzon); <u>Thurs</u>: Catch-up; CSI 1 due (pairs)</p>
June 24-27	<p><u>Mon</u>: Genetics—Ch. 2 <u>Tues</u>: Feeding—Ch. 7; Psychosocial Issues-Ch. 9 <u>Wed</u>: Exam 1 (Chapters 1, 3, 4, 5, 12, 20 and related handouts); Language/Cognition/Phonology—Ch. 8 and articles <u>Thurs</u>: Catch-up/Review; <i>Every Smile is Perfect</i> movie</p>
July 1-4	<p><u>Mon</u>: Speech/Resonance Disorders and VPD-Ch. 10 <u>Tues</u>: Articulation/Resonance Evaluation-Ch. 11; article <u>Wed</u>: CSI 2 due (pairs) <u>Thurs</u>: INDEPENDENCE DAY—No Class</p>
July 8-11	<p><u>Mon</u>: Lip, Palate, VPI Surgery-Ch. 17, pp. 451-475 <u>Tues</u>: Orthognathic Surgery-Ch. 17, pp. 475-485; Prosthetics-Ch. 18, pp.500-504; Dental Issues/Orthodontia-Ch. 6 (scan and be familiar with) <u>Wed</u>: Speech Therapy-Ch. 19 <u>Thurs</u>: International Missions-Ch. 21; <i>Smile Pinki</i> movie</p>
July 16	<p>Final Exam: CSI 3 (individual)</p>

Big Ideas and Learning Outcomes



Think like a speech-language pathologist!

1. Craniofacial disorders may impact growth and development, bonding, psychological well-being, cognition, hearing, feeding, speech, and language.
 - a. Describe embryological development of the face and mouth.
 - b. Describe characteristics and associated speech, language, feeding, hearing, and cognitive impairments of several more common syndromes.
 - c. Explain common feeding problems and strategies.
 - d. List and describe typical auditory, speech, language, and cognitive problems associated with cleft palate and common craniofacial disorders.
 - e. Appreciate the bonding, psychosocial and counseling issues associated with these conditions.
2. Craniofacial disorders and clefts of the face, lip, or palate require regular assessment and treatment from a multidisciplinary team of experts.
 - a. Explain the typical timeline of screening, evaluation, and intervention.
 - b. List and describe the composition and roles of a healthy cleft palate team.
3. Cleft palate can result in significant and distinctive articulation errors, voice disorders, and resonance problems.
 - a. Analyze the articulation, voice, and resonance of children with a variety of disorders.
 - b. Compare and contrast anatomical vs. physiological, surgical vs. non-surgical, and compensatory vs. obligatory disorders of speech.

EXPECTATIONS

Students are expected to:

- Complete assigned readings before class.
- Come to class promptly and prepared to actively participate in discussion and in-class assignments.
- Answer questions asked by the instructor.
- Ask the instructor for clarification when needed.
- Display appropriate respect and courtesy to other students, guest lecturers, and instructor. (This includes sleeping in class, texting, packing up early, etc.)
- No cell phones or laptops without instructor consent.

The instructor is expected to:

- Be thoroughly prepared for class with handouts, questions, knowledge of assigned readings
- Have a solid rationale for why she is teaching the material
- Begin and end class on time
- Announce any changes to the syllabus during the semester, including date changes, in advance
- Answer any student questions. If I don't know the answer, I will find it out.
- 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 efficiently.

Policy for Late Assignments	Disability Statement	Academic Misconduct
<p>All assignments are due at the beginning of class. Unexcused late assignments turned by 5 p.m. on the due date will receive a penalty of minus 5 percentage points. Unexcused assignments turned in the following day (and only due to extenuating circumstances) will receive a penalty of minus 10 percentage points. Assignments will not be accepted after the second day and the student will receive a grade of zero.</p> <p>I realize that life goes on while you are in school. You get sick, car accidents occur, etc. Excused late assignments will be allowed (without penalty) for illness, emergency, funerals, etc. In order for a late assignment to be excused, you must discuss this with me BEFORE it is due.</p> <p>Between email and my office phone, which are listed at the top of this syllabus, as well as my cell phone (715-572-2548) there is no reason that you should not be able to contact me. You may be asked to provide documentation of excused reasons.</p> <p>I will accommodate religious beliefs according to UWS 22.03 if you notify me within the first 3 weeks of the semester regarding specific dates that you will need to change course requirements.</p>	<p>If you have a disability that requires accommodation so that you may fully participate in class activities or meet course requirements, please contact me within the first week of class. Refer to http://www.uwsp.edu/special/disability/studentinfo.htm for further assistance.</p>	<p>Please refer to http://www.uwsp.edu/admin/stuaffairs/rights/rightsChap14.pdf for university policy regarding academic honesty and integrity.</p>
<p><u>EMERGENCIES</u></p> <p>In the event of a medical emergency, call 911 or use red phones in clinic hallways. Offer assistance if trained and willing. Guide emergency responders to victim.</p> <p>In the event of a tornado warning, proceed to clinic hallways. In the event of a fire alarm, evacuate the building in a calm manner. Meet in front of HEC building. Notify instructor or emergency command personnel of any missing individuals.</p> <p>Active shooter—Run/Escapes, Hide, Fight. If trapped, hid, lock doors, turn off lights, spread out, and remain quiet. Follow instructions of emergency responders.</p> <p>See UWSP Emergency Management Plan at www.uwsp.edu/rmgt for more details.</p>		

*Sometimes your joy is the source of your smile,
but sometimes your smile can be the source of your joy.*
Thich Nhat Hanh

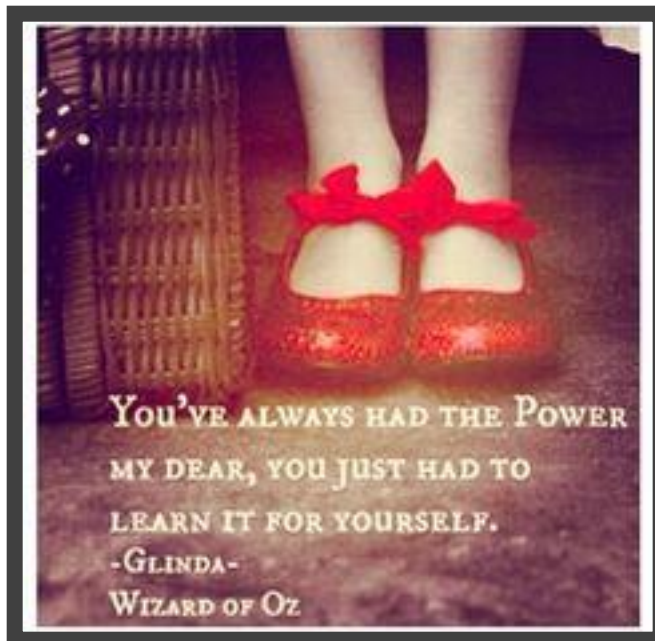
Assignments

1. **Exam:** There will be one exam that will cover terminology, types of clefts, genetics, embryology, anatomy/physiology, and syndromes. (1a, 1d, 2a, 2b)
2. **Cleft/Craniofacial Scenarios and Investigations:** There will be three CSI projects, which will give you an opportunity to practice *real-world* clinical problem solving. These CSI projects will be specific case studies involving children with clefts, syndromes, and/or VPI due to other issues. These are not exams, rather they are a way to help you understand the material in richer and more meaningful ways as you apply course content to actual clinical scenarios. The first two CSIs will be completed in pairs and the third will be completed individually. (1b, 1c, 1d, 2a, 2b, 3a, 3b)
3. **Metacognitive Reflections:** There will be three optional opportunities to reflect on your own learning with each CSI. Research (Medina, Castleberry, & Persky, 2017; Zepeda, Hlutkowsky, Partika, & Nokes-Malach, 2018) shows that explicitly thinking about what and how we learn improves learning. You will have a choice to respond to guided questions about your learning with each CSI. (“thinking like an SLP”)
4. **Psychosocial Reflection:** You have an optional opportunity to read a blog, watch a video, or read a book about someone with a cleft and craniofacial disorder and reflect on the psychosocial implications of looking or sounding different from normative society. (1e)



This course will use a specifications grading system (Nilson, 2014). This grading scheme is directly related to your demonstrated competencies across the various learning outcomes for the course, which also correspond to ASHA's standards, knowledge, and skills. This type of grading also gives you a choice in determining your desired grade and the necessary work and competency to achieve it. All assignments will be graded as pass/fail, or more specifically as "Met competencies" or "Did not meet competencies." You will have two "tokens" or opportunities to meet competency if you did not meet it initially. Thorough directions will be given for each assignment with clear criteria for meeting competency.

B-	B	B+	A-	A
Complete CSI 1, 2, and 3	Complete CSI 1, 2, and 3 competently	Complete all the requirements for "B" competently	Complete all the requirements for "B" competently	Complete all the requirements for "B" competently
Pass exam at 84% or higher	Pass exam at 84% or higher	Complete 1 reflection competently: CSI metacognition or psychosocial	Complete metacognitive reflection on 2/3 CSIs.	Complete metacognitive reflection on 3/3 CSIs.
Competence not met, even after use of 2 tokens	All competencies are met, but 2 tokens may be used to achieve mastery	Pass exam at 84% or higher on first attempt	Complete psychosocial reflection competently	Complete psychosocial reflection competently
		All competencies are met, but 2 tokens may be used to achieve mastery	Pass exam at 84% or higher on first attempt	Pass exam at 90% or higher on first attempt
			All competencies are met, but 1 token may be used to achieve mastery	All competencies are met, but 1 token may be used to achieve mastery



Competency across all areas in the course meets ASHA standards IV-C, IV-D, IV-E, IV-G, V-A as they relate to voice, resonance, articulation, hearing, cognition, and expressive/receptive language deficits associated with cleft palate and craniofacial disorders.