# **Course Syllabus**

# **CSD 741 Cognitive Communication Disorders**

2 credits

Room: CPS 024

Monday 8:00 am to 9:50 am

Sept 12 (week 2) - Dec 12 (week 15) Final December 20 (Tuesday), 1230-2:30

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

Email: Jbarge@uwsp.edu

Office: 042b

Phone 715 346-3085

Office hours: Dependent upon TX schedule. Will be announced in week 2.

**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.

#### **Course Outline:**

Week 1: Labor Day

Week2: Introduction/Attention

Week 3: Attention

Week 4: Memory

Week 5: Executive Function

Week 6: Exam 1

Week 7: Right Hemisphere Dysfunction

Week 8: Primary Progressive Aphasia and other Neuro.

Week 9: Alzheimer's Disease

Week 10: Guest Speaker(s)

Week 11: mTBI, TBI

Week 12: VPP

Week 13: Evaluation

Week 14: Cognitive Intervention

Week 15: Presentations

Week 16 Final (12-20)

**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

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

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.

# Structure of each day:

800 to 840: Lecture 1a

840 to 900: Work on Virtual Patient Project (VPP), Investigation Project

900 to 940: 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.

# **Course Requirements:**

# **Virtual Patient Project**

# 90 points

14 elements, 5 point each. Pass/Fail for each element. Need to be turned in by due date to earn full points.

# Exam 1 (Tentatively week 6)

90 points

Multiple choice, short answer covering attention, working memory, long-term memory and executive functioning.

# **Investigation Project:**

90 points

Group project on one of three current issues relating to cognitive-communicative disorders. Outside of class meeting will be set up during first 3 weeks to assign specific roles to each student.

or,

Individually pursue a cognitive-communication topic of your choosing. Please confirm with Instructor prior to initiation of project.

#### **Exam 2:** (Final 12-20)

90 points

Multiple choice, short answer covering conditions causing cognitive-communication deficits, diagnosis and treatment.

# **Attendance Policy:**

Consistent class attendance is strongly encouraged. Please contact the instructor if you will be missing class.

# **Accommodations:**

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 <a href="https://www.uwsp.edu/rmgt/Pages/em/procedures/other/floor-plans">www.uwsp.edu/rmgt/Pages/em/procedures/other/floor-plans</a> (Links to an external site.) 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 <u>www.uwsp.edu/rmgt</u> (Links to an external site.) for details on all emergency response at UW-Stevens Point.