ComD 786 Cleft Palate and Craniofacial Disorders Summer 2018: June 18-July 12 Monday-Thursday 8:00-9:50 am, CPS 024

Instructor Info

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Course Description

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 <i>when</i> the need arises)					
June 18-21	Mon: Syllabus and course overview; A & P review—Ch. 1; Cleft Palate Team—Ch. 22 (11—2 nd ed) Tues: Clefts of lip and palate—Ch. 2 Wed: Craniofacial terminology; oral-facial exam—Ch. 12 (13—2 nd ed.); Thurs: Genetics Eval and Craniofacial Syndromes—Ch. 3, pp. 69-79 (Ch. 4, pp.86- 95—2 nd ed.) and only these syndromes in the chapter: hemifacial microsomia, Treacher Collins, Van der Woude, Velocardiofacial, Apert, Crouzon); Ch. 8, pp. 225-238 (Ch. 8, pp. 214-226—2 nd ed.); CSI 1 due (pairs)				
June 25-28	Mon: Genetics—Ch. 4, scan chapter with attention to pp. 118-127 (3, pp. 74-82—2 nd ed) Tues: Catch-up (Start feeding?) Wed: Feeding—Ch. 5; Exam 1 (all previous chapters/handouts, except feeding) Thurs: Psychosocial Issues—Ch. 10; <i>Every Smile is Perfect</i> movie				
July 2-5	Mon: Resonance—Ch. 7; Ch. 8, pp. 238-247 (7 & 8, pp.226-232—2 nd ed.) Tues: Articulation/Resonance Evaluation—Ch. 11 Wed: INDEPENDENCE DAY—No Class Thurs: Language/Cognition/Phonology—Ch. 6; articles; CSI 2 due (pairs)				
July 9-12	Mon: Palate Surgery—Ch. 18, pp. 538-559 (Ch. 18, pp. 516—532—2 nd ed.) Tues: Orthognathic Surgery—Ch. 19; Dental Issues/Orthodontia—Ch. 9 Wed: Speech Therapy—Ch. 21 Thurs: International Missions—Ch. 23 (Ch. 22—2 nd ed.); <i>Smile Pinki</i> movie				
July 16	Final Exam: CSI 3 (individual)				

Big Ideas

Think like a speech-language pathologist!

- 1. Craniofacial disorders may impact growth and development, bonding, psychological well-being, cognition, hearing, feeding, speech, and language.
 - Describe embryological development of the face and mouth.
 - Explain common feeding problems and strategies.
 - List and describe typical auditory, speech, language, and cognitive problems associated with cleft palate and common craniofacial disorders.
 - 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.
 - Explain the typical timeline of screening, evaluation, and intervention.
 - 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.
 - Analyze the articulation, voice and resonance of children with a variety of disorders.
 - Compare and contrast anatomical vs. physiological, surgical vs. non-surgical, and compensatory vs. obligatory disorders of speech.

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.

weeks of the semester regarding specific dates that you will need to change course requirements.

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	
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. I realize that life goes on while you are in school.	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.	Please refer to http://www.uwsp.edu/admin/stua ffairs/rights/rightsChap14.pdf for university policy regarding academic honesty and integrity.	
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. 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. I will accommodate religious beliefs according to UWS 22.03 if you notify me within the first 3	EMERGENCIES 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. 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. Active shooter—Run/Escape, Hide, Fight. If trapped, hid, lock doors, turn off lights, spread out, and remain quiet. Follow instructions of emergence responders. See UWSP Emergency Management Plan at		

www.uwsp.edu/rmgt for more details.

EXPECTATIONS

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

- 1. **Exam**—75 points: There will be one exam that will cover terminology, types of clefts, genetics, embryology, anatomy/physiology, and syndromes.
- 2. **Surgery Quiz**—30 points: There will be one quiz to quickly assess content knowledge, terminology, and concept understanding.
- 3. Cleft/Craniofacial Scenario 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. Although the largest portion of course points will come from these assignments, they 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 (50 point and 75 points, respectively), and the third will be completed individually (100 points). For the first two CSIs you will have the opportunity for an "extra life"—which means that you can resubmit your final version to earn up to half of the points that were originally missed.



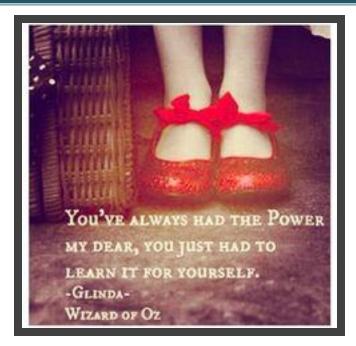
	Point Totals	
Exam	75 points	
Quiz	30 points	
CSI 1	50 points	
CSI 2	75 points	
<u>CSI 3</u>	<u>100 points</u>	
Total	330 points	

Grading Scale								
A: 95-100%	A-: 92-94%	B+ 88-91%	B 84-87%	B- 80-83%	C+ 77-79%			
C: 74-76%	C-: 70-73%	D+ 67-69%	D 64-66%	D- 60-63%	<60% = F			
If a percentage has a decimal >0.5, then I will round up IF you have attended class, participated in discussion, and put								
forth your best effort in class. I reserve the right not to round up if I feel that you have not actively prepared for and								
contributed to the class.								

Requesting a Revision, Extra Credit, or Make-up Work to Improve a Grade on a Graded <u>Assignment</u>

If you earned a grade below 84% on any exam or assignment, and if you would like to improve your understanding of the concepts and perhaps improve your grade, you may propose a make-up assignment. Here are the procedures/guidelines:

- You must initiate this process, and you must propose/design the make-up assignment.
- If you complete the make-up assignment satisfactorily, your grade on the original assignment may be changed to a maximum of 84%.
- You must complete a make-up assignment to demonstrate competency on the material below competency. It may be retaking an exam on similar content, revising a project or paper, or an oral exam.
- <u>This must be completed within one week</u> of the day I return or upload your graded assignment. If I do not receive your revision/exam within one week, then you may not complete a make-up assignment and you will not meet competency for that assignment.
- When you submit your proposal for a make-up assignment, you must include a brief explanation of how/why your proposed assignment will allow you to learn the material better.
- I will inform you via email once your make-up assignment proposal is accepted and finalized.
- Once your make-up assignment <u>proposal</u> is accepted and finalized, you will have <u>one week</u> to complete the make-up assignment.
- The goal for a make-up assignment is to ensure that you learn the material thoroughly and meet the ASHA competency; therefore, your make-up assignment should demonstrate that you understand the mistakes you made originally, and that you now thoroughly understand the material.



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.