

CSD 786 Cleft Palate and Craniofacial Disorders

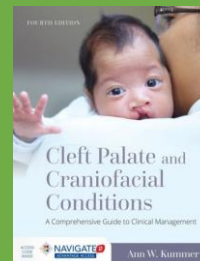
Summer 2021: June 16-July 9
Thursday and Friday, 8:00-11:45, CCC 101

Instructor Info

Professor: Pamela Terrell, Ph.D., CCC-SLP
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Email: pterrell@uwsp.edu
Office Hours: Thursdays, 12:30-2:00 pm or by appt

Required Textbook

Kummer, A. W., (2020). Cleft palate and craniofacial conditions: A comprehensive guide to clinical management, 4th ed. 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)

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|------------|---|
| June 16 | <ul style="list-style-type: none">• Syllabus and course overview• A & P review—Ch. 1• Cleft Palate Team—Ch. 20• Clefts of lip and palate—Ch. 3; Orafacial exam—Ch. 12• Facial, Oral, and Pharyngeal Anomalies—Ch. 5 CSI 1; orofacial exam |
| June 24-25 | <p><u>Thurs</u>: Genetics—Ch. 2; 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; Feeding—Ch. 7</p> <p><u>Fri</u>: Language/Cognition/Phonology—Ch. 8; Psychosocial Issues—Ch. 9; <i>Every Smile is Perfect</i> movie</p> CSI 2 |
| July 1-2 | <p><u>Thurs</u>: Speech/Resonance Disorders and VPD—Ch. 10; <i>Smile Pinki</i> movie</p> <p><u>Fri</u>: Articulation/Resonance Evaluation—Ch. 11; International Missions—Ch. 21; racial disparities in cleft treatment (readings on Canvas)</p> CSI 3 |
| July 8-9 | <p><u>Thurs</u>: Lip, Palate, VPI Surgery—Ch. 17, pp. 451-475; Orthognathic Surgery—Ch. 17, pp. 475-485</p> <p><u>Fri</u>:; Prosthetics—Ch. 18, pp.500-504; Dental Issues/Orthodontia—Ch. 6 (scan and be familiar with); Speech Therapy—Ch. 19</p> CSI 4 |

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.
- Participate in class through various modalities provided
- 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.)

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.</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. Between email, as well as my cell phone (715-572-2548) you should be able to contact me to arrange an extension. If there is an extenuating circumstance and you couldn't contact me prior to the due date, we can discuss on a case-by-case basis, erring on the side of grace.</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. **Cleft/Craniofacial Scenarios and Investigations:** There will be four 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. Some will be completed individually and others in pairs. Each CSI will be followed by metacognitive and reflective activities on learning (1b, 1c, 1d, 2a, 2b, 3a, 3b)
2. **Classwork:**
 1. There will be opportunities to reflect on the psychosocial implications of looking or sounding different from normative society through exposure to videos, podcasts, guest speakers, and/or writings. (1e)
 2. There will be quizzes that will cover terminology, types of clefts, genetics, embryology, anatomy/physiology, and syndromes throughout the class period via online polling or quiz apps. (1a, 1d, 2a, 2b)
 3. There will be formative learning opportunities to practice new skills in auditory discrimination, assessment, determining objectives, and transcription. (1b, 1d, 3a, 3b)



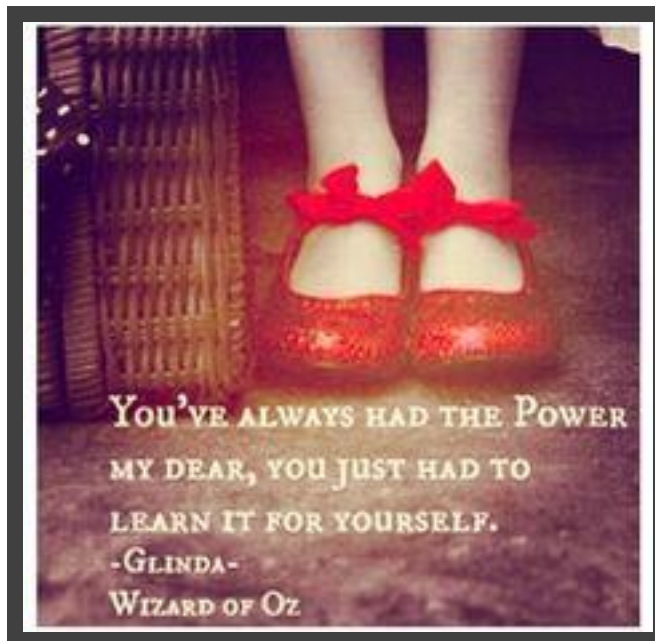
GRADING SCALE

I'm trying to continually grow in my evidenced-based teaching skills, so we'll be using "ungrading" for this course. I read the book, *Ungrading: Why Rating Students Undermines Learning (and What to Do Instead)* by Susan Blum (2020) and attended a workshop on ungrading during the semester break. Current research suggests that grading is arbitrary, does not truly represent learning, and is fraught with bias. Students also do not learn as much if they are graded versus if they are given written/verbal feedback. Additionally, metacognition is an important practice for improving learning of course content. We will discuss "ungrading" on the first day of class and what it means for this course.

In a nutshell, you will have 4 ungraded CSI assignments, that (un)ironically will be used to collaboratively determine your final grade in the course. You and I will together determine your learning progress and your grade in class through written feedback, metacognition activities, and personal learning reflections. It is my hope that this approach will decrease stress, increase academic "risk-taking," and result in deeper, meaningful, and personalized learning.

All exams will occur anonymously as a large group through iterative, massed practice.

Conceptually, we will construct what a final "A, A-, B+, B, and B-" looks like on the first day of class and this syllabus will be updated with that information.



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.