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SLP Program Key Takeaways

3.1 MASTER OF ARTS PROGRAM IN SPEECH-LANGUAGE PATHOLOGY

Each student enrolled in the Master of Arts in Speech-Language Pathology program must meet a certain standard of Academic Requirements to ensure efficient completion of the program. Students must complete a minimum of 60 credit hours and meet the academic and practicum requirements for the Certificate of Clinical Competence of the American Speech-Language-Hearing Association. Most students complete at least 60 credit hours in their graduate programs. Students must maintain a specific minimum grade point average and will participate in examinations and research.

SLP Program Policy 301: Speech-Language Pathology Clinical Practicum Overview

This policy outlines the structure, expectations, and evaluation process for clinical practicum courses (AUSP 7200/7208) required for graduate SLP students. Students begin with AUSP 7200 in their first semester, followed by AUSP 7208 in subsequent semesters. Specific GPA thresholds must be met across practicum semesters, with emphasis on achieving at least a B in the final two terms. Practicum involves direct client contact, clinical coursework, and weekly supervision, progressing in complexity across semesters. Students are evaluated on intervention, assessment, communication, professionalism, and interaction skills using a detailed competency rating scale. Professionalism heavily influences final grades, with repeated minor issues escalating to major concerns, potentially triggering a Clinical-Academic Support Plan. The policy also stresses student accountability, clinical preparation, safe practices, and progression within their level of competence.

SLP Program Policy 302: Clinical Practicum Requirements in Speech-Language Pathology

This policy outlines the clinical practicum requirements for MA SLP students to meet ASHA certification standards, state licensure, and University of Memphis program expectations. Students must complete a minimum of 400 supervised clinical hours—375 in direct client contact and 25 in observation—with at least 325 earned during graduate study. Clinical experiences must cover a wide scope of practice, include diverse populations, and be supervised by ASHA-certified and licensed professionals. Specific hour requirements include voice, fluency, and hearing management. At least 125 hours must be supervised by University of Memphis faculty, including at least one semester in diagnostic practicum. Students are also responsible for understanding licensure requirements for states where they intend to practice and coordinating with faculty to ensure appropriate placements.

SLP Program Appendix 3.1: Curriculum for the MA Program

The MA in Speech-Language Pathology at the University of Memphis requires a minimum of 60 credit hours, combining core coursework, clinical practicum, and research. The curriculum is structured into key areas: Basic Communication Processes, Speech and Language Disorders, Clinical Practicum, Research, and Audiology. Some foundational courses may be waived for students with a background in Communication Sciences and Disorders. Electives allow for specialization, and graduate certificate options are available in Augmentative and Alternative Communication (AAC) and Public Health. Clinical and academic requirements are designed to ensure broad and in-depth preparation for professional practice.

SLP Program Appendix 3.2: Typical Course Sequence

The MA program in Speech-Language Pathology offers tailored course sequences for students with (WB) and without (WOB) an undergraduate background in Communication Sciences and Disorders. Both tracks span two years and integrate foundational coursework, clinical practicum, research, and electives. Students begin with introductory courses and gradually advance into specialized topics like dysphagia, motor speech disorders, and fluency. Clinical practicum is taken every semester, increasing in intensity. Required assessments include the Benchmark and Comprehensive Exams. Some courses may be waived based on prior coursework, and students have flexible options to pursue research or a thesis, as well as electives like AAC and Public Health.

SLP Program Appendix 3.3: SLP Clinical Competencies

This appendix outlines the clinical competencies required of MA students in Speech-Language Pathology, aligned with ASHA certification standards and CAA accreditation guidelines. Competencies are grouped into five key domains: Professionalism, Intervention, Clinical Interaction, Evaluation, and Oral & Written Communication. Students are expected to demonstrate professionalism through punctuality, policy adherence, and personal responsibility. Intervention competencies include developing and modifying effective treatment plans, using appropriate materials, and tracking client progress. Clinical interaction emphasizes rapport-building, emotional regulation, and client-centered care. Evaluation skills involve accurate assessments, diagnostics, and appropriate referrals, while strong oral and written communication skills are essential for effective clinical documentation and interaction.

SLP Program Appendix 3.4: External Evaluation of SLP Students

This appendix explains the external evaluation process for SLP students during clinical placements, conducted through the Typhon system. Site supervisors complete one evaluation per semester, along with a "Competency by Disorder and Age" assessment. These evaluations measure student performance in key clinical areas including evaluation, intervention, professional interaction, behavior and environment management, and communication skills. Ratings range from "below expectation" to "above expectation," with required narrative feedback for non-standard ratings. The evaluations help determine a student's readiness for Clinical Fellowship (CF) by graduation, using a three-point scale across disorder types and age groups to assess competence in prevention, evaluation, and intervention.

SLP Program Appendix 3.5: CAA Competencies as Listed by Course

This appendix outlines the course titles and numbers linked to key competencies required for CAA accreditation in Speech-Language Pathology. It connects academic, clinical, and research courses to professional practice, clinical reasoning, cultural competence, and intervention strategies across various speech, language, and swallowing disorders. Courses are aligned with standards for ethical conduct, clinical education, and collaboration, aiming to ensure that students gain expertise in areas such as articulation, fluency, voice, cognitive communication, and augmentative communication. Key courses support the development of professional behavior, clinical supervision skills, and self-evaluation, all integral to producing skilled, culturally competent, and ethical speech-language pathologists.

SLP Program Appendix 3.6: SLP Knowledge and Skills as Listed by Course

The key takeaways from the SLP Education Appendix outline the core competencies required for Speech-Language Pathologists (SLPs) to meet ASHA certification standards. These competencies encompass a wide range of knowledge areas, including the biological, neurological, psychological,

acoustic, and cultural bases of communication and swallowing. The courses listed, such as *Speech Science*, *Anatomy and Physiology of the Speech Mechanism*, and *Language Disorders*, emphasize the need for SLPs to understand both normal and abnormal development across the lifespan. Additionally, they must be proficient in evaluating and treating communication and swallowing disorders, using evidence-based practices in areas like articulation, voice, fluency, and cognitive communication. Effective professional writing, socio-cultural awareness, and interprofessional collaboration are also highlighted as essential skills for SLPs.

SLP Program Appendix 3.7: Goals and Expectations for Clinical Practicum in SLP

The *Goals and Expectations for Clinical Practicum in SLP* emphasize the importance of a personalized approach to clinical training, where the sequence is designed in collaboration with students to focus on their strengths and areas for growth. Clinical educators are responsible for providing relevant client background information, assessing students' skills, offering regular feedback, and encouraging critical thinking. Students are expected to prepare thoroughly for each session, actively engage in learning, apply course content, and seek guidance when necessary. The practicum ensures exposure to diverse populations and settings, including medical and pediatric environments, while meeting ASHA certification requirements and fostering continuous progress through self-assessment and faculty feedback.

SLP Program Appendix 3.8: The Clinical Practicum Progression in SLP

The *Clinical Practicum Progression in SLP* outlines a structured pathway for clinical education, emphasizing the integration of coursework with hands-on clinical experience. In the early semesters, students gradually increase their client contact hours, with first-semester students observing or providing therapy for speech/language disorders and accent modification. As they progress, they are exposed to more complex cases, including pediatrics, medical settings, and adult therapy. Students are expected to complete a minimum of 400 clock hours, including 25 observation hours, across various disorders and age groups, while focusing on competency in areas like articulation, language, fluency, and dysphagia. The practicum is designed to ensure students gain diverse experiences across different settings, preparing them for certification and licensure.

SLP Program Appendix 3.9

The *SLP Students Frequently Asked Questions/Comments* section addresses common concerns and clarifies the clinical practicum process for students. It emphasizes that the focus should be on gaining competency across a variety of disorder types and age groups, not just meeting clock hour requirements. Students are encouraged to monitor their progress, but the goal is to ensure a diverse clinical experience, which may involve assignments across different settings and with different supervisors. Requests for specific age groups or environments may not always be possible, as all students are expected to gain experience with both pediatric and adult cases, including medical and school settings. Communication with the clinic director is key in addressing concerns and preferences.

3.1 MASTER OF ARTS PROGRAM IN SPEECH-LANGUAGE PATHOLOGY

- I. Speech-Language Pathology (MA): Program Goals
 - a. Demonstrate the breadth and depth of foundational communication science, including biological, etiological, theoretical, acoustic, physiological, cognitive, and psychological bases of communication.
 - b. Understand and demonstrate the theoretical motivation for and practical applications of clinical reasoning for identification, assessment, and treatment of communication disorders.
 - c. Apply research analysis into evidence-based decision-making and clinical application.
 - d. Effectively communicate discipline-related knowledge in oral and written modalities, with families, clients, and other professionals.
 - e. Understand and accommodate cultural or linguistic differences related to communication development or to perceptions and attitudes toward communication disorders, differences, or intervention.
 - f. Exhibit attributes and abilities characteristic of competent speech-language pathologists, including accountability, integrity, adaptability, leadership, and professionalism.
- II. Non-CSD Course Requirements
 - a. Previous academic preparation in audiology/speech-language pathology is not a requirement for admission; however, it is assumed that all students will have completed basic science coursework in the following areas. ASHA requires transcript credit in the following areas:
 - i. Biological/Physical Science (3 credits)
 - ii. Statistics (3 credits)
 - iii. Behavioral/Social Science (6 credits of Psychology/Sociology/Anthropology)
 - iv. Physical Science (3 credits of Physics/Chemistry)
 - b. Students who have not met the above requirements in their undergraduate program must complete them during the graduate program. Depending on how many of these requirements have not been met, the student's graduate program may be extended.
 - c. To be counted toward the requirement, a grade of C (2.0) or better in the basic science coursework is expected.
- III. Program Requirements
 - a. Students must complete a minimum of 60 credit hours and meet the academic and practicum requirements for the Certificate of Clinical Competence of the American Speech-Language-Hearing Association. Most students complete at least 60 credit hours in their graduate program. Additional coursework will be required for those students without undergraduate preparation in Communication Sciences and Disorders (Appendix 3.3).
 - b. Full time study requires enrollment in clinical practicum and students must obtain a 3.00 or above in at least 9 semester hours of clinical practicum, and a 3.00 or above in their last two semesters of clinical practicum. A

minimum of 14 credit hours of AUSP 7200 and AUSP 7208 must be taken, but more hours may be required in order to meet certification standards. Clinical competencies expected by graduation are in Appendix 3.

- c. Students must complete a minimum of three semester hours of research activity. A thesis or non-thesis option is available. Students choosing the non-thesis option may fulfill their research experience with AUSP 7991 (Introduction to Research Activity) and AUSP 7990 (Research Activity).
NOTE: Students electing to write a thesis should familiarize themselves with the [Thesis/Dissertation Preparation Guide](#) before starting to write.
- d. All students must successfully complete Benchmark examinations (see Section VI of this document for details).
- e. All students must complete written comprehensive examinations (see Section VII of this document for details).

IV. Academic Advisor

- a. The academic advisor is responsible for developing, with the student, a plan of study. An advising checklist is maintained by the advisor. All coursework (both undergraduate and graduate) is logged on the checklist to ensure the student meets the academic requirements for the degree, ASHA certification, teacher certification and state licensure. Specific degree requirements may be found in the Graduate Catalog.
- b. Students meet with their advisor at least once a semester to determine their course assignments for the next term in accordance with their academic plan. It is the ultimate responsibility of the student to ensure that all requirements are met.

V. Research Experience

- a. Non-Thesis Option
 - i. Students who choose the non-thesis option complete 3 credits of research activity. These credits typically include:
 - ii. One credit of AUSP 7991 (Intro to Research Activity), in which first-year students are introduced to research being conducted by the faculty and matched with labs and projects of interest before beginning their second year in the program; and
 - iii. Two credits of AUSP 7990 (Research Activity) in which students complete supervised research activity in a faculty member's lab. The topic, procedure, and gradable product are jointly selected by the student and the faculty director. Ideally, there will be an interpretive component, although some projects may not lend themselves to that.
- b. Thesis Option
 - i. The thesis program gives the student experience in conducting research and scholarly writing. In addition, the thesis experience can help a student understand and better evaluate research literature in his/her field of study. Those students who intend to enter a doctoral program or whose major goal is to engage in research are encouraged to complete a thesis. The decision to select a thesis option should be made as early in the student's program as possible.

- ii. Students selecting the thesis option must enroll in AUSP 7996 for a minimum of 3 credits and a maximum of 6 credits to meet graduation requirements. Thesis students are responsible for organizing a thesis committee for purposes of approving a proposal. The thesis committee shall consist of the thesis advisor and at least two additional faculty members. All members of the thesis committee must be members of the University of Memphis Graduate Faculty. All students contemplating a thesis should read the [Graduate School publication](#) on policies for thesis and dissertations.
- iii. Once a student has enrolled for thesis credit, he or she must continue this enrollment and may not change this option to a non-thesis option. Thesis students must successfully complete an oral examination in defense of their thesis. The thesis committee is also responsible for determining that all written comprehensive examination competencies are also met. This is typically conducted by certifying at the oral examination that the student has mastered topics encompassed by the thesis experience and requiring that other topics are assessed.

VI. Benchmark Examination (Revised Fall 2021)

a. Purpose of the Examination

- i. The purpose of the benchmark examination is to provide an opportunity for students to review and integrate foundational information covered in the first year of the program.
- ii. The examination includes written questions covering four key areas: Anatomy and Physiology, Pediatric Language, Neurological Bases of Communication, and Speech Science. The examination will be scheduled after students' first Spring semester. Students who are unable to pass the qualifying exam in any of the four areas must complete remedial work during their next semester as outlined in a Clinical-Academic Support Plan (CIASP) form (Policy 503). They will have the opportunity to retake the examination following completion of their CIASP. Students completing CIASPs related to benchmark examinations may need to extend or adjust their program of study. Students must pass the benchmark examinations to be retained in the program.

VII. Comprehensive Examination (Under Revision Fall 2025)

a. Purpose of the Examination

- i. The comprehensive examination is a summative evaluation which provides an opportunity and a motivation for students to integrate information at a time when most of their program has been completed. The exam is taken by students in the spring and summer semesters. It is an opportunity to reflect on and discuss in a scholarly manner the current theoretical and applied literature in the profession.
- ii. The comprehensive examination also allows the faculty to evaluate the ability of students to grasp and apply a broad spectrum of

information. While adequate performance in academic coursework is a prerequisite to graduation, it is also essential that graduating students demonstrate the ability to retain, integrate, and apply the knowledge gained in this coursework.

b. Structure of the Examination

- i. Students write responses to two questions on each day of the examination and have one hour and 45 minutes per question on each day. A short break is provided between questions. After initial assessment of the essays, students will be informed of which questions they passed, which need to be revised and which need to be rewritten.
- ii. Students preparing revisions will be given a specific list of objectives in writing and will be allowed to review their original responses. They will not be allowed to review content with the faculty requesting revisions. This is partly because the identities of the students should remain blinded at this stage. It is also because the intent is for students to have completed their reviews of the information with faculty prior to completing the first round of exams. The expectation of a revision is that the original responses can be revised independently based on the faculty's written feedback.
- iii. After those revisions are assessed, students will be informed if any questions need to be rewritten. Once students have been informed of the necessity of rewrites their identities are revealed to the examiners requiring those rewrites, who may then make themselves available to provide further review preparatory to the rewrites.
- iv. Any questions not satisfactorily addressed in rewrites will then be assessed in an oral examination conducted by three SLP tenure-track faculty (to include the examiner and student's advisor).

c. Content of the Examinations

- i. Each of the following four topic areas represents 1.75 hours of written content.
 1. Speech Sciences: Physiology, Acoustics, Phonetics, and Hearing; Examiner: Buder
 2. Clinical Reasoning: The following three questions will require critical thinking and integration of basic and applied knowledge, including audiology, across the life span.
 3. Neurogenic Disorders of Language and Speech, and Hearing; Examiner: Feenaughty
 4. Child Language, Fluency, Evidence-Based Practice, and Hearing; Examiner: Eichorn
 5. Swallowing, Voice, Ethics, and Hearing; Examiner: van Mersbergen

d. Administration of the Examinations

- i. The examinations generally will be administered toward the beginning of the Spring and Summer semesters prior to graduation.
- ii. Notification of initial assessment (Pass/Revise/Rewrite) will be provided within 1 week of the first exam.
- iii. Students will have a 3-day period to prepare revisions.

- iv. Notification of revision outcomes (Pass/Rewrite) will be provided within 2 weeks of the first exam.
- v. Rewrites will be scheduled no later than 3 weeks after the first exam.
- vi. Outcomes of Rewrites (Pass/Fail) will be provided within 3 days of the second exam.
- vii. Oral exams will be conducted within 2 weeks of the second exam.

VIII. Retention Requirements

- a. All students enrolled in the School of Communication Sciences and Disorders are expected to attain high academic achievement and maintain professional and ethical conduct. In addition to Graduate School policy, the criteria listed below will be used to determine the retention status of students enrolled in the School.
- b. General Academic Performance
 - i. Grades below C (2.00) in required courses are considered unacceptable and must be repeated to meet graduation requirements.
 - ii. A student may count two grades of C (2.00) toward their degree. Students have the option of repeating two courses in which a grade of C (2.00) or less was earned. The student will be dismissed at the end of the semester in which a third grade of C (2.00) or less has been earned.
 - iii. Students are expected to maintain a cumulative grade point average of 3.00 at the end of each semester of enrollment at the University of Memphis. A GPA below 3.00 across two consecutive semesters may be grounds for dismissal. After one semester of suspension, continuation in the program may be granted only with recommendation from the academic unit, the Associate Dean of Graduate Studies, and the Dean of the Graduate School.
- c. Professional Performance
 - i. Because the MA in Speech-Language Pathology is a professional practice degree, satisfactory acquisition of knowledge and skills for certification as prescribed by the American Speech-Language-Hearing Association is required ([Appendix 3.3](#), [3.5](#), and [3.6](#)). Failure to achieve any of these standards for clinical performance may result in dismissal from the program.
 - ii. The cumulative grade of the first two semesters of clinical practicum (7200/7208) must be a B- (2.67) or greater. A cumulative clinical grade for the last five semesters must be at least a 3.00. Students must obtain a B (3.00) or better in each of their last 2 semesters.
 - iii. Students may be dismissed for any of the following:
 - 1. Failure to maintain appropriate standards of academic integrity or CSD Policies.
 - 2. Failure to follow the ASHA Code of Ethics.
 - 3. Failure to follow HIPAA guidelines.
 - 4. Failure to achieve competency as specified in CSD Policy 503.

5. A grade of 2.00 or less in clinic practicum will mandate a review within the School and may be grounds for dismissal.
6. Failure to pass the benchmark examination.
7. Failure to pass the comprehensive examination.

SLP Program Policy 301

Speech-Language Pathology Clinical Practicum Overview

Effective Date: July 30, 2009

Supersedes Date: July 30, 2006

Review Date: May 2026

Policy: All SLP students involved in clinical practicum will enroll in AUSP 7200, Introduction to Clinical Practice in Speech-Language Pathology, in their first semester and AUSP 7208, Clinical Experience in Speech Pathology, in each subsequent semester of full-time graduate study.

The cumulative grade of the first two semesters of clinical practicum (7200/7208) must be a B- (2.67) or greater. A cumulative clinic grade for the last five semesters must be at least 3.00. Students must obtain a B (3.00) or better in each of their last two semesters. Also, satisfactory acquisition of knowledge and skills for certification as prescribed by the American Speech-Language-Hearing Association is required. A minimum of 14 semester credit hours of AUSP 7200/7208 may be counted toward the 60-hour degree requirement.

Procedure:

I. Description of AUSP 7200 and AUSP 7208/8208

- a. These courses consist of a weekly class and a supervised clinical practicum in speech- language pathology. The content of the courses includes the theory of therapeutic process, policies and procedures of the Memphis Speech and Hearing Center, scope of practice, ethics, assessment, family/parent counseling, public school law, and professional issues. Attendance and participation in these classes are required.
- b. Grades in these courses include both class and practicum participation and performance.

II. Clinical Assignments

a. Clinical Practicum

- i. Students are assigned a clinical placement each semester. The load of client contact hours is generally expected to grow each semester as students progress through the 7200/7208 class series. In 7200, students should expect clinic to focus on completing guided observation hours if needed, and in-house clinical experiences as appropriate to the student's preparedness level and appropriate clinical need.
- ii. All students will complete a diagnostic rotation within the MSHC during their tenure in the program to establish a general knowledge of speech-language evaluations and family/caregiver/community support. Diagnostic placements that focus on specialty areas (such as voice, AAC, autism, feeding, literacy, or fluency) may also occur, but cannot supplant the speech-language evaluation rotation unless they incorporate a complete speech-language evaluation as part of the more specialized diagnostic.

- iii. Students holding graduate assistantships are assigned responsibilities according to the terms of their contract which can include up to 10 hours a week of additional client contact.
- b. Progression of Clinical Assignments
 - i. Each semester the director of clinical education meets with the student to discuss their past clinical placements and plan for future assignments. The goal is for all students to have experience with prevention, assessment and treatment of disorders across the scope of practice and the lifespan; experience with diverse ethnic and cultural backgrounds; and exposure to multiple types of settings.
 - ii. Clinical assignments should follow a systematic knowledge and skill-building sequence in which basic course work precedes or is concurrent with practicum as much as possible. Preparation may consist of the formal courses in the SLP curriculum, laboratory assignments, and supplemental workshops as part of A USP 7208.
 - iii. Students are placed with a member of the University's clinical faculty in their first semester of clinic. Typical first placements are with young children with language and speech disorders and/or the Adult Services for Standard English Training (ASSET) program.
 - iv. Students with an undergraduate degree in communication disorders may be placed with clients with more complex disorders if they have had preparatory undergraduate coursework, clinical experiences, or are taking concurrent coursework that provides knowledge of the disorder.
 - v. Students who have undergraduate degrees in other fields of study obtain 25 observation hours in their first semester. Those who have had coursework in related areas (i.e., education or linguistics) may participate in the ASSET program in their first semester.
 - vi. The Director of Clinical Education in Speech-Language Pathology tracks each student's coursework and previous clinical experiences to ensure that a student is prepared for the current assignments. During orientation, before the beginning of a semester, the faculty meet with their assigned students to present an overview of the clients' needs and general information regarding the disorders they will be seeing.
 - vii. All clinical faculty meet with their students weekly to discuss the plans for assessment or treatment as well as provide education regarding the clients' disorders. If a student is assigned to a clinical experience that involves disorders for which he/she has limited academic preparation, the clinical faculty member is advised in advance so that additional instruction can be provided. Students may be given reading assignments to prepare for the experience.
 - viii. The assignment of students to external practicum takes into consideration the recommendation of the clinical faculty and the prerequisite coursework and experiences specified by the professionals at the off-site facility.
- c. Student Responsibilities
 - i. Students are expected to be prepared to see their client at the scheduled appointment time with all necessary paperwork and equipment preparation completed. They are to remain in the clinic for the entire block of hours scheduled. If a client does not show up, the student may be assigned other

duties by the faculty member. If for some reason a client is not scheduled during a student's regular clinic time, the student is still expected to be available unless dismissed by the faculty member.

- ii. Students are not required to attend offsite placements during University breaks/holidays, during the Mid-South Conference, on religious holidays, or on the day of the benchmark and comprehensive exams. For any other absences (illness, appts, inclement weather, car trouble, etc.), the offsite supervisor and clinic director must be informed, and the student is required to attempt to make up the time that is missed.
 - iii. If a student becomes ill and cannot see onsite patients, it is the student's responsibility to notify the responsible faculty member as far in advance as possible and to arrange for a substitute clinician. At the beginning of each semester, students are encouraged to identify other student clinicians who could back-up their clinics. If this is not possible, the responsible faculty member will cover the session. Cancellation of the client is not preferred, but it may be necessary to reschedule the appointment.
 - iv. Students are responsible for returning equipment and materials to the proper area immediately after use and for sanitizing toys (Phys-309) and cleaning up the session room after each appointment.
- d. Objectives for SLP Students in Audiology Clinic
- i. Students will be expected to demonstrate competency in screening hearing of individuals (children and adults) who can participate in conventional pure-tone air conduction methods. Students may become competent in screening for middle ear pathology through screening tympanometry for referral of individuals for further evaluation and management.
 - ii. Students will demonstrate an understanding of the interpretation of an audiogram and the procedures for gathering case history information.
 - iii. Students will be given opportunities to provide services to individuals with hearing loss and their families/caregivers (e.g., auditory training; speech reading; speech and language intervention secondary to hearing loss; visual inspection and listening checks of amplification devices for the purpose of trouble shooting, including verification of appropriate battery voltage).
- e. Practicum in Clinical Education
- i. Occasionally an experienced student may have the opportunity to assist a faculty member in the clinical education process. The responsibilities assigned to the student may include demonstration of therapy techniques and other areas of supervisory management.
 - ii. A student will not evaluate another student.
 - iii. When a clinical faculty member wishes to provide a student with this experience, a proposal defending its appropriateness is presented to the Director of Clinical Education in Speech-Language Pathology.
 - iv. Only the hours of demonstration therapy will be counted toward ASHA requirements.
 - v. The certified clinician must meet ASHA's minimum observation requirements for the student clinician providing direct services.

III. Clinical Education – Observation and Instruction

- a. The clinical faculty use the Continuum of Supervision (Anderson, 1988) as a guide regarding the amount of time and approach to supervision. The goal is for the student to acquire independence at the end of each semester with his/her assigned clients and confidence to practice professionally by the end of the program. The exception is when students work with clients covered by Medicare, and those require 100% in the room supervision.
- b. Observation and intervention on the part of the clinical educator can vary based on the skill level of the student and the complexity of the client's concerns. Assessment sessions are typically observed 100% to ensure that the procedures are accurate, and the client and family receive a clear explanation of the diagnosis and recommendation. Clients with significant behavior issues are monitored more closely to ensure safety for both the client and the student.
- c. Students and educators meet regularly to discuss the progress of their clients and plan sessions. Students are encouraged to initiate and contribute to the discussion regarding the planning and provision of services at the expected level of their knowledge and skills. The educator or student can request, and schedule additional time as needed.

IV. Evaluation of Clinical Competency

- a. Daily/Weekly Evaluations
 - i. The clinical faculty member will provide verbal and/or written feedback to students throughout the semester.
 - ii. Students receive feedback on a regular basis regarding their performance in the clinic. These can be in individual or group conferences each week with their clinical faculty member or a general debrief after a session. Additional meetings with the faculty member may be requested as needed.
- b. Mid-Semester and Final Evaluation Procedures
 - i. Each student will have the opportunity to meet with his or her faculty member at mid-term time and at the end of the semester. The student's performance in clinic to date will be discussed. In addition, each student may meet with the Co- Directors of Clinical Education in Speech-Language Pathology, if necessary. Students must plan to be available for meetings through the end of the exam period.
- c. Grading for A USP 7200 & A USP 7208
 - i. Participation and completion of A USP 7200/7208 class assignments are factored into overall grade.
 - ii. External off-site preceptors will be asked to give students a rating based on the Areas of Evaluation listed below. The grade can influence a student's final clinic grade. The Co-Directors of Clinical Education in Speech-Language Pathology will assign a final clinic grade for each student enrolled in clinical practicum in conjunction with the clinical faculty.
 - iii. Areas of Evaluation
 1. Each faculty member will evaluate the clinical performance of the students whom they supervise. A clinical competency rating will be determined for each student enrolled in clinical practicum (please refer to Speech- Pathology Clinical Competencies in Appendix 3.3). The competency ratings are based on a student's performance in:

- a. Intervention
- b. Evaluation
- c. Oral and Written Communication
- d. Clinical Interaction
- e. Professionalism

2. Rating Scale

- a. The Rating Scale provides a quantitative measure of student performance, gives students information regarding their areas of strength and challenge, monitors improvement, and provides supporting information for the final grade. Ratings describe clinicians who have limited clinical competence and/or need extensive support, as well as clinicians who are relatively competent and independent in various clinical areas.
- b. The rating scale can be found in Clinical Education [Appendix 5.1](#).
- c. These ratings are a descriptive measure and are not based on a percentage of compliance in a section.

3. Level of Experience based on Semester

- a. When assigning grades, the Level of Experience is taken into consideration, primarily based on the number of semesters of clinic the student has completed.
- b. The only exception is that Professionalism expectations are the same regardless of the number of semesters of clinic the student has completed.
- c. The Level of Experience chart can be found in Clinical Education [Appendix 5.1](#).

4. Professionalism Grading

- a. A professionalism grade of “Minor Concerns” pulls a student’s final clinic grade down by .5 letters (e.g., A to A-, B- to C+). A professionalism grade of “Major Concerns” pulls a student’s final clinic grade down by 1 full letter (e.g., A+ to B+, B to C).
- b. A “minor concern” is defined as an action/series of actions (of lack thereof) that a supervisor has addressed with a student in feedback at least once and yet is still not consistently corrected or feedback implemented going forward.
- c. “Minor Concerns” ratings across 2 semesters means that any concern after that becomes a “Major Concern”.
- d. Individual clinical supervisors will rate all skills except Professionalism independently. The Professionalism category will be decided by the whole clinical team.
- e. If the clinical team has “Major Concerns” regarding a student’s skills at any point in the program, a Clinical-Academic Support Plan form is initiated.

SLP Program Policy 302

Clinical Practicum Requirements in Speech-Language Pathology

Effective Date: August 19, 2012

Supersedes Date: July 30, 2009

Review Date: May 2026

Policy: All MA Speech-Language Pathology students are required to meet ASHA's clinical practicum requirements for the Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP), state licensure, and additional practicum. Those wishing to obtain clinical certification must also meet these requirements.

Procedure:

I. Practicum Requirements

- a. ASHA certification standards are described at:
<https://www.asha.org/certification/2020-slp-certification-standards/>.
- b. A minimum of 400 clock hours of supervised clinical experience is required, 375 of which must be spent in direct client/patient contact and 25 spent in clinical observation. All clock hours included in the 400 must be within the scope of practice for speech-language pathology.
- c. At least 325 of the 400 required practicum hours must be completed while engaged in graduate study. No more than 75 practicum hours can be counted from an undergraduate program.
- d. Students will obtain clinical experiences to prepare them to diagnose and treat communication disorders and differences across the scope of practice of speech-language pathology. Clients will include children and adults from culturally/linguistically diverse backgrounds. Experiences will be obtained in various settings.
- e. Supervision must be provided by individuals who hold the Certificate of Clinical Competence in the appropriate area of practice and hold the appropriate state license. The amount of supervision must be appropriate to the student's level of knowledge, experience, and competence with a minimum of 25% direct observation of the student's total contact with each client. This direct observation should take place periodically throughout the practicum to ensure the welfare of the client.
- f. Upon graduation, students "must possess skills in oral and written and other forms of communication sufficient for entry into professional practice" (ASHA, 2017).
- g. Additional practicum guidelines for the School of Communication Sciences and Disorders include:
 - i. At least 125 clock hours of the total 400 are to be obtained under the direct supervision of the faculty at the University of Memphis.
 - ii. Students will gain experience across the scope of practice. Student clinical journeys will be unique to them and may look different from other students' clinical journeys.
- h. It is the student's responsibility to investigate the licensure laws of states that they may seek employment in and inform the Co-Directors of Clinical Education in Speech-Language Pathology in sufficient time to arrange clinical experiences to

meet that state's unique requirements during the student's graduate experience at the University of Memphis.

- i. Students who are placed at an external practicum site should be assigned a minimum of one client under the direct supervision of a faculty member at the University of Memphis.
- j. Students must complete a minimum of one semester in a diagnostic practicum under the direct supervision of a faculty member at the University of Memphis.
- k. A detailed list of roles and responsibilities of the clinical faculty and student is listed in Appendix 3.7. A description of the progression of clinical experiences and expectations for each semester is listed as well.

SLP Program Appendix 3.1

Curriculum for the MA Program

Degree Requirements: 60 hours Minimum

All listed courses are required unless marked as electives. Courses with an asterisk may be waived for students with an undergraduate background in CSD. Other required courses can be waived under specific circumstances and with the instructor's permission.

Regular Offerings:

Basic Communication Processes (12 hours minimum)

AUSP 7000 Speech Science

AUSP 7003 Anatomy and Physiology of the Speech Mechanism

AUSP 7005 Language Sample Analysis

AUSP 7006 Language and Speech Development*

AUSP 7007 Communicative Interaction

AUSP 7010 Neurological Bases of Communication

Electives

AUSP 7002 Seminar in Communication Sciences

AUSP 7008 Acoustic and Perceptual Phonetics

AUSP 7011 Psycholinguistics

AUSP 7016 Socio-Cultural Bases of Communication

Speech Disorders (15 hours minimum)

AUSP 7203 Voice and Upper Airway Disorders

AUSP 7204 Speech Sound Disorders

AUSP 7205 Fluency Disorders

AUSP 7206 Developmental and Acquired Motor Speech Disorders

AUSP 7209 Dysphagia and Related Disorders

Electives

AUSP 7201 Cleft Palate and Craniofacial Disorders

AUSP 7202 Motor Speech Disorders in Children

AUSP 7210 Seminar in Speech Pathology

AUSP 7215 Pediatric Feeding and Swallowing

AUSP 7216 Endoscopy and Advanced Clinical Instrumentation

AUSP 7309 Speech Rehabilitation in Head-Neck Pathology

Language Disorders (9 hours minimum)

AUSP 7300 Language Disorders in Children

AUSP 7302 Language Disorders in Adults I

AUSP 7305 Language Learning Disabilities

Electives

AUSP 7212 Autism Spectrum Disorders and Related Disabilities

AUSP 7303 Language Disorders in Adults II

AUSP 7304 Seminar in Language Disorders

AUSP 7308 Augmentative and Alternative Communication

Clinical Practicum (14 hours minimum)

AUSP 7200 Introduction to Clinical Practice in Speech-Language Pathology

AUSP 7208 Clinical Experience in Speech-Language Pathology

Research-Related Requirements (6 hours minimum)

AUSP 7500 Evaluating Research in Communication Disorders (delivered in three 1 - credit modules I, II, III)

3 Credits of Research Activity* (AUSP 7990, AUSP 7996, or AUSP 7991) Other Courses (2 hours minimum)

AUSP 7501 Phonetic Transcription

AUSP 7502 Intro to Phonetic Transcription*

AUSP 7207 Clinical Instrumentation

Electives

AMSL 6205 Cultural Sensitivity for the Deaf and Hard of Hearing in Healthcare Settings

AUSP 7505 Introduction to Interprofessional Education & Practice

AUSP 7032 Professional Development in CSD

AUSP 7108 CSD and Public Health

AUSP 7015 Professional Writing

AUSP 7214 Advanced Clinical Laboratory

Assumed Audiology Coursework (6 hours)

Required audiology courses must be documented on transcript; equivalent undergraduate course with grade of B or better will count. Students with other backgrounds take these at the U of M.

7106 Intro Survey of Audiology

7113 Aural Rehabilitation

Graduate Certificate Options

[Augmentative and Alternative Communication \(AAC\)](#)

[Communication Sciences and Disorders and Public Health](#)

SLP Program Appendix 3.2

Typical Course Sequence in SLP: With CSD Background (under Revision, Fall 2025)

	SUMMER*	FALL	SPRING		SUMMER
Year 1	7006 Lang Dev (3, <i>online</i>) †7502 Intro Transcription (1)	7200 Intro Clinic (2) 7003 Anat/Phys (3) 7300 Ch Lang Dis (3) 7010 Neuro Bases (2) 7032 Prof Dev in CSD (1) †7500 Eval Research I (1) †7501 Transcription (1)	7208 Practicum (3) 7000 Speech Science (3) 7204 Speech Sound Disorders (3) 7305 Lang Learn Dis (3) †7005 Lang Sample Analysis (1) <i>Spring Choices</i> †7991 Intro to Research Activity (1) or 7990 Research Activity (1-3) or 7996 Thesis (3) AMSL 6205 Cultural Sensitivity (3) 7205 Fluency (3) 7308 AAC (3)	Benchmark Exam	7208 Practicum (2-3) 7209 Dysphagia (3) 7302 Lang Dis Adult (3) †7207 Clinical Instrumentation (1) <i>Summer Choices</i> 7308 AAC (3) 7505 IPE & IPP (1-3) 7132 CSD and Pub Health (3) 7015 Professional Writing (1) 7990 Research Activity (1-3) or 7996 Thesis (3)
Year 2		FALL 7208 Practicum (3) 7203 Voice (3) 7206 Dev & Acq Motor Sp (3) †7500 Eval Research II (1) <i>Fall Choices</i> 7007 Communicative Int (3) 7212 Autism Spectrum Dis (3) 7990 Research Activity (1-3) or 7996 Thesis (3)	SPRING 7208 Practicum (3) 7205 Fluency (3) †7500 Eval. Research III (1) <i>Spring Choices</i> 7007 Communicative Int (3) 7308 AAC (3) 7214 Advanced Clin Lab (3) 7215 Ped Feeding AMSL 6205 Cultural Sensitivity (3) 7990 Research Activity (1-3) or 7996 Thesis (3)		SUMMER

Note: Required in **Bold** † Delivered in a Part of Term

*Incoming students with a grade below B- on their equivalent undergraduate course are required to take the full course. Students with a grade of B- or higher complete an online assessment on key topics covered in 7006 to ensure preparedness for Child Language Disorders course in the fall. Those who do not earn a score of at least 80% before losing access to the assessment are required to take the full course.

**Incoming students who have not completed an undergraduate course covering Transcription are required to take Introduction to Transcription.

Typical Course Sequence in SLP: Non-CSD background

	SUMMER	FALL	SPRING		SUMMER
Year 1	7006 Lang Dev (3, <i>online</i>) †7502 Intro Transcription (1)	7200 Intro Clinic (2) 7003 Anat/Phys (3) 7300 Ch Lang Dis (3) 7010 Neuro Bases (2) 7032 Prof Dev in CSD (1) †7500 Eval Research I (1) †7501 Transcription (1)	7208 Practicum (3) 7000 Speech Science (3) 7204 Speech Sound Disorders (3) 7305 Lang Learn Dis (3) †7005 Lang Sample Analysis (1) <i>Spring Choices</i> †7991 Intro to Research Activity (1) or 7990 Research Activity (1-3) or 7996 Thesis (3) AMSL 6205 Cultural Sensitivity (3)	Benchmark Exam	7208 Practicum (2-3) 7209 Dysphagia (3) 7302 Lang Dis Adult (3) 7106 Intro Aud (3) <i>Summer Choices</i> 7308 AAC (3) 7505 IPE & IPP (1-3) 7132 CSD and Pub Health (3) 7015 Professional Writing (1) 7990 Research Activity (1-3) or 7996 Thesis (3)
Year 2		FALL 7208 Practicum (3) 7203 Voice (3) 7206 Dev & Acq Motor Sp (3) †7207 Clinical Instrum (1) †7500 Eval Research II (1) <i>Fall Choices</i> 7007 Communicative Int (3) 7212 Autism Spectrum Dis (3) 7990 Research Activity (1-3) or 7996 Thesis (3)	SPRING 7208 Practicum (3) 7205 Fluency (3) †7500 Eval. Research III (1) <i>Spring Choices</i> 7007 Communicative Int (3) 7308 AAC (3) 7214 Advanced Clin Lab (3) 7215 Ped Feeding AMSL 6205 Cultural Sensitivity (3) 7990 Research Activity (1-3) or 7996 Thesis (3)	Comprehensive Exam	SUMMER 7208 Practicum (2-3) 7113 Aud Rehab (3) <i>Summer Choices</i> 7308 AAC (3) 7505 IPE & IPP (1-3) 7132 CSD and Pub Health (3) 7015 Professional Writing (1) 7016 Sociocult Bases of Comm (3) 7990 Research Activity (1-3) or 7996 Thesis (3)

Note: Required in **Bold** † Delivered in a Part of Term

SLP Program Appendix 3.3

SLP Clinical Competencies

Items included in the assessment of competencies are based on the Standards for Certification in Speech-Language Pathology by the American Speech-Language-Hearing Association (2020); The CAA Standards for Accreditation of Graduate Education Programs in Audiology and Speech-Language Pathology (2023) and the input from the SLP clinical faculty at the University of Memphis. Items in italics refer to areas believed to be particularly important. Items that are specifically listed in the ASHA Certification Standards (2020) are referenced.

PROFESSIONALISM
<i>Attendance and Timeliness</i> <i>Professional Communication</i> <i>Compliance with Policies</i> <i>Personal Responsibility</i> <i>Infection Control and Cleanliness</i>
INTERVENTION
<i>Develops appropriate intervention plan/demonstrates understanding of intervention plan</i> <i>Implements intervention plan</i> <i>Selects/creates/uses appropriate materials/instrumentation for intervention</i> <i>Accurately measures/evaluates client performance and progress</i> <i>Modifies intervention plans, strategies, materials as appropriate to meet client/patient needs</i> <i>Identifies and refers for services as needed</i>
CLINICAL INTERACTION
<i>Establishes therapeutic alliance/rapport with client/patient and family</i> <i>Identifies and incorporates client/patient interests to the degree possible</i> <i>Manages own emotions and demeanor to center the client/patient needs</i> <i>Identifies and responds to client's physical, emotional, and sensory needs as necessary</i> <i>Demonstrates appropriate counseling skills based on client and/or family needs</i> <i>Responds to and redirects client behaviors as appropriate to meet client goals</i>
EVALUATION
<i>Hearing Screening</i> <i>Collects case history information</i> <i>Selects appropriate evaluation procedures</i> <i>Administers evaluation procedures correctly and efficiently</i> <i>Adapts evaluation procedures to meet the needs of the client</i> <i>Interprets, integrates, and synthesizes all information from the evaluation</i> <i>Develops appropriate diagnoses</i> <i>Makes appropriate recommendations for intervention</i> <i>Makes appropriate referrals as needed</i>
ORAL & WRITTEN COMMUNICATION
<i>Written communication meets content, organizational, grammatical, and word-choice expectations</i> <i>Oral communication meets content, quantity, rate, tone, and word-choice expectations</i>

SLP Program Appendix 3.4

External Evaluation of SLP Students

Administered on Typhon

External site supervisors enter the evaluation of a student's clinical skills into the Typhon system at the end of each semester. There are six forms of evaluation.

- Evaluation of Clinical Skills (1st Semester)
- Evaluation of Clinical Skills (2nd Semester)
- Evaluation of Clinical Skills (3rd Semester)
- Evaluation of Clinical Skills (4th Semester)
- Evaluation of Clinical Skills (5th Semester)
- Competency by Disorder and Age

EVALUATIONS & SURVEYS

The following evaluations and surveys can be completed by you. Click on a link to begin:

- ➔ Competency by Disorder and Age (All students)
 - [Begin new evaluation of \[REDACTED\]](#)
- ➔ Evaluation of Clinical Skills (1st Semester Stud.)
 - [Begin new evaluation](#)
- ➔ Evaluation of Clinical Skills (2nd Semester Stud.)
 - [Begin new evaluation](#)
- ➔ Evaluation of Clinical Skills (3rd Semester Stud.)
 - [Begin new evaluation](#)
- ➔ Evaluation of Clinical Skills (4th Semester Stud.)
 - [Begin new evaluation of \[REDACTED\]](#)
 - [Begin new evaluation not listed above](#)

One evaluation for each semester of study and a Competency by Disorder and Age evaluation that all educators complete. The clinic director sends an electronic invitation to the supervisor for the appropriate evaluation tool for each student assigned. Each evaluation assesses skills in evaluation, intervention, professional interaction, management of behavior and clinical environment, and oral and written reporting. The evaluations follow the Clinical Competencies for SLP Students to be CF Ready Rubric (Appendix 3.3).

There are differences between the format of these evaluations and the ones used by the CSD clinical faculty in Student Competencies and Grading System (SCAGS).

The Typhon version lists only the expected level of skill for each area assessed.

The external supervisor designates whether that skill is below expectation, slightly below expectation, meets expectation, slightly above expectation, or above expectation.

The supervisor enters a comment to provide a narrative/example of the skill.

A comment is required if the rating is below or above expectation.

Example of Evaluation from Clinical Skills (1st Semester)

2 EVALUATION

Prepares for the diagnostic evaluation or other assessment activity

Expected Level: Reviews background information and asks the supervisor questions regarding unclear areas. Suggests diagnostic tools to assess clients similar to past experience and attempts rationale for selection. Administers tests according to protocol. Prepares case history questions based on available information. Suggests clinical questions to be answered by evaluation.

Below Expectation	Slightly Below Expectation	Expected Level	Slightly Above Expectation	Above Expectation	N/A
a. Reviews and interprets background information					
☐	☐	☐	☐	☐	☐
Comment:					
b. Selects appropriate evaluation procedures, such as behavioral observations, nonstandardized and standardized tests and instrumental procedures					
☐	☐	☐	☐	☐	☐
Comment:					
c. Can explain the rationale for the selection of the chosen test measures and procedures (e.g. awareness of culture, gender, age, parental, client, schools, etc.)					
☐	☐	☐	☐	☐	☐
Comment:					
d. Prepares the clinical questions to be answered by the evaluation (e.g. interview questions, areas to assess)					
☐	☐	☐	☐	☐	☐
Comment:					

<https://www.typhongroup.net/eval/create/preview.asp?survey=14435&facility=9061>

Skills By Disorder

Please check the student's level of performance for each disorder area and age group that you observed them work with this semester in the domains of prevention, evaluation, and intervention. The three-point scale suggests three levels of accomplishment: "1" minimal experience and in need of more; "2" skills are emerging; and "3" skills are at a level to begin the CF experience. The goal is to have the student "CF Ready" by the time of graduation. Not all areas require the "3" rating for the student to graduate. Complete the form as you see the student at the end of their experience with you this semester.

		Prevention			Evaluation			Intervention		
		1	2	3	1	2	3	1	2	3
Articulation	Child	o	o	o	o	o	o	o	o	o
	Adult	o	o	o	o	o	o	o	o	o
Fluency	Child	o	o	o	o	o	o	o	o	o
	Adult	o	o	o	o	o	o	o	o	o
Voice & Resonance	Child	o	o	o	o	o	o	o	o	o
	Adult	o	o	o	o	o	o	o	o	o
Expressive & Receptive Language	Child	o	o	o	o	o	o	o	o	o
	Adult	o	o	o	o	o	o	o	o	o
Hearing	Child	o	o	o	o	o	o	o	o	o
	Adult	o	o	o	o	o	o	o	o	o
Swallowing	Child	o	o	o	o	o	o	o	o	o
	Adult	o	o	o	o	o	o	o	o	o
Cognitive Aspects of Communication	Child	o	o	o	o	o	o	o	o	o
	Adult	o	o	o	o	o	o	o	o	o
Social Aspects of Communication	Child	o	o	o	o	o	o	o	o	o
	Adult	o	o	o	o	o	o	o	o	o
Communication Modalities	Child				o	o	o	o	o	o
	Adult				o	o	o	o	o	o

SLP Program Appendix 3.5

CAA Competencies as Listed by Course

CAA Accreditation Application and Annual Report Speech-Language Pathology Knowledge and Skills within the Curriculum

Instructions:

Enter the course number and title for the academic and clinical course(s), practicum experience(s) and other source(s) of experience that provide students opportunity to acquire knowledge and skills across the speech-language pathology curriculum.

	Academic Course Title and #	Clinical Course Title and #	Practicum Experience Title and #	Labs Title and # or Description	Research Title and # or Description	Other Title and # or Description
3.1.1B PROFESSIONAL PRACTICE COMPETENCIES						
Accountability	7007 (Communicative Interaction)	7200 (Intro Clinic) 7208 (Clinic Experience SLP)	All clinical placements			Mid-South Conference on Communicative Disorders
Effective Communication Skills	7003 (Anat & Phys) 7010 (Neuro Bases) 7006 (Nml Sp & Lng Dev) 7016 (Sociocultural Bases) 7113 (Rehab AuD) 7015 (Professional Writing)	7200 (Intro Clinic) 7208 (Clinical Experience SLP)	All clinical placements		7500 (Evaluating Research) 7991 (Intro to Research)	Mid-South Conference on Communicative Disorders

	Academic Course Title and #	Clinical Course Title and #	Practicum Experience Title and #	Labs Title and # or Description	Research Title and # or Description	Other Title and # or Description
	7206 (Dev & Acq Motor Spch Dis) 7203 (Voice & Upper Airway Disorders) 7204 (Speech Sound Dis) 7205 (Fluency Disorders) 7209 (Dysphagia) 7212 (Autism) 7215 (Pediatric Feeding & Swallowing) 7216 Endoscopy and Adv Cl Instrumentation 7300 (Child Lang. Disorders) 7302 (Lang. Dis. Adults) 7308 (AAC) 7505 (Intro to IPE/IPP) 7305 (Lang Learn Disabilities)					
Clinical Reasoning	7005 (Lang Sample Analysis) 7010 (Neuro Basis) 7206 (Motor Speech Disorders) 7203 (Voice & Upper Airway Disorders) 7207 (Clin Instrumentation) 7205 (Fluency Disorders) 7212 (Autism)	7200 (Intro Clinic) 7208 (Clinical Experience SLP)	Pediatric and Adult Placements		7500 (Evaluating Research)	

	Academic Course Title and #	Clinical Course Title and #	Practicum Experience Title and #	Labs Title and # or Description	Research Title and # or Description	Other Title and # or Description
	7216 Endoscopy & Adv Cl Instrumentation 7300 (Child Lang Disorders) 7302 (Lang Dis Adults) 7308 (AAC)					
Evidence-Based Practice	7006 (Nml Sp & Lng Dev) 7113 (Rehabilitatv Aud) 7203 (Voice and Upper Airway Disorders) 7204 (Speech Sound Dis) 7205 (Fluency Disorders) 7209 (Dysphagia) 7212 (Autism) 7215 (Pediatric Feeding and Swallowing) 7216 Endoscopy and Adv Cl Instrumentation 7300 (Child Lang Disorders) 7302 (Lang Dis Adults) 7308 (AAC)	7200 (Intro Clinic) 7208 (Clinical Experience SLP)	All clinical placements		7500 (Evaluating Research) 7990 (Research Activity)	
Concern for Individuals Served	7007 (Communicative Interactions) 7016 (Sociocultural Basis) 7203 (Voice and Upper Airway Disorders) 7204 (Artic and Phon Dis) 7205 (Fluency Disorders) 7209 (Dysphagia)	7200 (Intro to Clinic) 7208 (Clinical Experience SLP)	All clinical placements		7500 (Evaluating Research)	

	Academic Course Title and #	Clinical Course Title and #	Practicum Experience Title and #	Labs Title and # or Description	Research Title and # or Description	Other Title and # or Description
	7215 (Pediatric Feeding and Swallowing 7216 Endoscopy and Adv Cl Instrumentation					
Cultural Competence	7005 (Lang Sample Analysis) 7006 (Nml Sp & Lng Dev) 7308 (AAC) 7212 (Autism & related dis) 7016 (SocioCultl bases of Comm)	7200 (Intro Clinic)	All clinical placements			
Professional Duty	7032 (Professional Dev in CSD)	7200 (Intro Clinic) 7208 (Clinical Experiences)				Mid-South Conference on Communicative Disorders
Collaborative practice	7006 (Nml Sp & Lng Dev) 7010 (Neuro Bases) 7203 (Voice and Upper Airway Disorders) 7204 (Speech Sound Dis) 7216 Endoscopy and Adv Cl Instrumentation 7300 (Ch Lang Disorders) 7302 (Lang Dis Adults) 7308 (AAC)	7208 (Clinical Experience SLP)	AAC, Hospital, Long-Term Care, TBI			Mid-South Conference on Communicative Disorders
3.1.2B FOUNDATIONS OF SPEECH-LANGUAGE PATHOLOGY PRACTICE						

	Academic Course Title and #	Clinical Course Title and #	Practicum Experience Title and #	Labs Title and # or Description	Research Title and # or Description	Other Title and # or Description
Discipline of human communication sciences and disorders	7006 (Nml Sp & Lng Dev) 7000 (Speech Science) 7505 (Intro to IPE/IPP 7007 (Comm Interaction)	7200 (Intro Clinic)				
Basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases	7000 (Speech Science) 7003 (Anat & Phys) 7006 (Nml Sp & Lang Dev) 7007 (Communicative Interaction) 7010 (Neuro Bases) 7113 (Rehabilitative Aud) 7203 (Voice and Upper Airway Disorders) 7207 (Clin Instrumentation) 7216 Endoscopy & Adv Cl Instrumentation 7016 (SocioCultl bases of Comm)	7200 (Intro Clinic) 7208 (Clinical Experience SLP)	Preschool Screening, Diagnostics, AAC, Fluency	Practical Labs		
Ability to integrate information pertaining to normal and abnormal human development across the life span	7003 (Anat & Phys) 7006 (Nml Sp & Lng Dev) 7010 (Neuro Bases) 7206 (Dev & Acq Motor Spch Dis) 7203 (Voice and Upper Airway Disorders) 7205 (Fluency Disorders) 7209 (Dysphagia)					

	Academic Course Title and #	Clinical Course Title and #	Practicum Experience Title and #	Labs Title and # or Description	Research Title and # or Description	Other Title and # or Description
	7501 (Phonetic Transcription)					
Fluency	7206 (Dev & Acq Motor Spch Dis) 7205 (Fluency Dis)	7208 (Clinical Experience SLP)	Diagnostics, Fluency	Practical Labs		
Voice and resonance, including respiration and phonation	7000 (Speech Science) 7003 (Anat & Phys) 7206 (Dev & Acq Motor Spch Dis) 7203 (Voice and Upper Airway Disorders) 7207 (Clin Instrumentation) 7216 Endoscopy and Adv Cl Instrumentation	7208 (Clinical Experience SLP)	Artic, Voice, Hospital, Aural Rehab, Long Term Care, Handicapped, Cleft Palate, Diagnostic	Practical labs, listening labs, Clinical Instrument		
Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication, and paralinguistic communication) in speaking, listening, reading, writing, and manual modalities	7005 (Lang Sample Analysis) 7016 (Sociocultural Bases) 7204 (Speech Sound Dis) 7300 (Ch Lang Disorders) 7212 (Autism & related dis)	7208 (Clinical Experience SLP)	Aphasia, Language Stim, TBI, Pediatric Language, Autism, Hospital, Long-Term Care, Aural			
Hearing, including the impact on speech and language	6106 (Intro Survey Audiology) 7113 (Rehabilitative Audiology) 7300 (Ch Lang Disorders)	7208 (Clinical Experience SLP)	Preschool Screening, Hospital,	Practical labs 6106 – Intro Audiology		

	Academic Course Title and #	Clinical Course Title and #	Practicum Experience Title and #	Labs Title and # or Description	Research Title and # or Description	Other Title and # or Description
	7505 (Intro to IPE/IPP)		Aural Rehab, Long Term Care,			
Swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding; orofacial myology)	7003 (Anat & Phys) 7010 (Neuro Bases) 7209 (Dysphagia) 7215 (Pediatric Feeding and Swallowing) 7505 (Intro to IPE/IPP)	7208 (Clinical Experience SLP)	Hospital, Long-Term Care, Feeding, Diagnostic			
Cognitive aspects of communication (e.g., attention, memory, sequencing, problem solving, executive functioning)	7006 (Nml Sp & Lng Dev) 7212 (Autism) 7300 (Ch Lang Disorders) 7302 (Lang Dis Adults) 7308 (AAC)	7208 (Clinical Experience SLP)	Aphasia, Voice, Language, TBI, Pediatric Language; Hospital, Aural Rehab, Long term Care, Lang. Stim., Multi-Diagnostic			
Social aspects of communication (e.g., behavioral and social skills affecting communication)	7005 (Lang Sample Analysis) 7006 (Nml Sp & Lng Dev) 7016 (Sociocultural Bases) 7203 (Voice and Upper Airway Disorders) 7212 (Autism) 7302 (Lang Dis Adults) 7308 (AAC)	7208 (Clinical Experience SLP)	All clinical placements			

	Academic Course Title and #	Clinical Course Title and #	Practicum Experience Title and #	Labs Title and # or Description	Research Title and # or Description	Other Title and # or Description
Articulation	7206 (Dev & Acq Motor Spch Dis) 7204 (Speech Sound Dis) 7300 (Ch Lang Disorders)	7208 (Clinical Experience SLP)	Diagnostics, Accent Modification, Aphasia, Pediatric	7207 (clinical instrumentation)		
Fluency	7206 (Dev & Acq Motor Spch Dis) 7205 (Fluency Disorders)	7208 (Clinical Experience SLP)	Diagnostics, Hospital			
Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication, and paralinguistic communication) in speaking, listening, reading, writing, and manual modalities	7005 (Lang Sample Analysis) 7016 (Sociocultural Bases) 7204 (Speech Sound Dis) 7212 (Autism) 7302 (Lang Dis Adults) 7308 (AAC)	7208 (Clinical Experience SLP)	Pediatric Language Program, Language & Literacy,			
Hearing, including the impact on speech and language	6106 (Intro Survey Audiol) 7113 (Rehabil Audiology)	7208 (Clinical Experience SLP)	Diagnostics			
Swallowing (oral, pharyngeal, esophageal, and related functions, including oral function	7209 (Dysphagia) 7215 (Pediatric Feeding and Swallowing)	7208 (Clinical Experience SLP)	Hospital			

	Academic Course Title and #	Clinical Course Title and #	Practicum Experience Title and #	Labs Title and # or Description	Research Title and # or Description	Other Title and # or Description
for feeding; orofacial myology)						
Cognitive aspects of communication (e.g., attention, memory, sequencing, problem solving, executive functioning)	7300 (Ch Lang Disorders) 7302 (Lang Dis Adults) 7308 (AAC)	7208 (Clinical Experience SLP)	All clinical placements			
Social aspects of communication (e.g., behavioral and social skills affecting communication)	7005 (Lang Sample Analysis) 7007 (Communicativ Interactn) 7016 (Sociocultural Bases) 7300 (Ch Lang Disorders) 7302 (Lang Dis Adults) 7308 (AAC)	7208 (Clinical Experience SLP)	All clinical placements			
Augmentative and alternative communication needs	7308 (AAC)	7208 (Clinical Experience SLP)	AAC Clinic; Aphasia bootcamp			
3.1.5B INTERVENTION TO MINIMIZE THE EFFECTS OF CHANGES IN THE SPEECH, LANGUAGE, AND SWALLOWING MECHANISMS						
Intervention for communication and swallowing differences with individuals across the lifespan to minimize the effect of those disorders and differences on the ability to participate as fully as possible in the environment						
Intervention for disorders and differences of the following:						
• Articulation	7206 (Dev & Acq Motor Spch Dis) 7204 (Speech Sound Dis)	7208 (Clinical Experience SLP)	Pediatric Language, School-			

	Academic Course Title and #	Clinical Course Title and #	Practicum Experience Title and #	Labs Title and # or Description	Research Title and # or Description	Other Title and # or Description
			Based placement, Accent Modification			
• Fluency	7206 (Dev & Acq Motor Spch Dis) 7205 (Fluency Disorders)	7208 (Clinical Experience SLP)	Fluency (private & group)			
• Voice and resonance, including respiration and phonation	7206 (Dev & Acq Motor Spch Dis) 7203 (Voice and Upper Airway Disorders)	7208 (Clinical Experience SLP)	Voice, Adult Tx			
• Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication, and paralinguistic communication) in speaking, listening, reading, writing, and manual modalities	7204 (Speech Sound Dis) 7212 (Autism) 7302 (Lang Dis Adults) 7308 (AAC)	7208 (Clinical Experience SLP)	Autism ; AAC; Hospital; Lang/Literacy; Lang. Stimulation; Aphasia bootcamp			
• Hearing, including the impact on speech and language	7113 (Rehabil Audiology) 7300 (Ch Lang Disorders)	7208 (Clinical Experience SLP)	Pediatric Language; Hospital;			

	Academic Course Title and #	Clinical Course Title and #	Practicum Experience Title and #	Labs Title and # or Description	Research Title and # or Description	Other Title and # or Description
			School-Based (Oral School for Th Deaf)			
• Swallowing	7209 (Dysphagia) 7215 (Pediatric Feeding and Swallowing)	7208 (Clinical Experience SLP)	Hospital			
• Cognitive aspects of communication	7300 (Ch Lang Disorders) 7302 (Lang Dis Adults) 7308 (AAC)	7208 (Clinical Experience SLP)	Autism tx; AAC; Hospital; Lang/Literacy; Aphasia bootcamp			
• Social aspects of communication	7007 (Communicative Interaction) 7016 (Sociocultural Bases) 7212 (Autism) 7302 (Lang Dis Adults)	7208 (Clinical Experience SLP)	Autism tx; AAC; Hospital; Lang/Literacy; Aphasia bootcamp			
3.1.6B GENERAL KNOWLEDGE AND SKILLS APPLICABLE TO PROFESSIONAL PRACTICE						
Ethical conduct	7016 (Sociocultural Bases) 7203 (Voice and Upper Airway Disorders) 7204 (Speech Sound Dis) 7209 (Dysphagia) 7215 (Pediatric Feeding and Swallowing) 7212 (Autism) 7302 (Lang Dis Adults) 7308 (AAC)	7200 (Intro Clinic) 7208 (Clinical Experience SLP)	All clinical placements		7500 (Evaluating Research)	

	Academic Course Title and #	Clinical Course Title and #	Practicum Experience Title and #	Labs Title and # or Description	Research Title and # or Description	Other Title and # or Description
Integration and application of knowledge of the interdependence of speech, language, and hearing	6106 (Intro Survey Audiology) 7005 (Lang Sample Analysis) 7007 (Communicative Interaction) 7010 (Neuro Bases) 7206 (Dev & Acq Motor Spch Dis) 7203 (Voice and Upper Airway Disorders) 7205 (Fluency Disorders) 7207 (Clin Instrumentation) 7216 Endoscopy and Adv Cl Instrumentation 7300 (Ch Lang Disorders) 7302 (Lang Dis Adults) 7308 (AAC)	7200 (Intro Clinic) 7208 (Clinical Experience SLP)	All clinical placements		7500 (Evaluating Research)	
Engagement in contemporary professional issues and advocacy	7006 (Nml Sp & Lng Dev) 7010 (Neuro Bases) 7113 (Rehabilitatv Aud) 7203 (Voice and Upper Airway Disorders) 7209 (Dysphagia) 7212 (Autism) 7302 (Lang Dis Adults) 7308 (AAC) 7016 (SocioCultrl Bases)	7200 (Intro Clinic) 7208 (Clinical Experience SLP)			7500 (Evaluating Research)	Mid-South Conference on Communicative Disorders
Processes of clinical education and supervision		7200 (Intro Clinic) 7208 (Clinical Experience SLP)				

	Academic Course Title and #	Clinical Course Title and #	Practicum Experience Title and #	Labs Title and # or Description	Research Title and # or Description	Other Title and # or Description
Professionalism and professional behavior in expectations for a speech-language pathologist		7200 (Intro Clinic) 7208 (Clinical Experience SLP)	All clinical placements			Mid-South Conference on Communicative Disorders
Interaction skills and personal qualities, including counseling, and collaboration	7007 (Communicative Interactn) 7010 (Neuro Bases) 7113 (Rehabilitate Aud) 7203 (Voice and Upper Airway Disorders) 7204 (Speech Sound Dis) 7209 (Dysphagia) 7215 (Pediatric Feeding and Swallowing) 7216 Endoscopy and Adv Cl Instrumentation 7212 (Autism) 7302 (Lang Dis Adults) 7505 (Intro to IPE/IPP)	7200 (Intro Clinic) 7208 (Clinical Experience SLP)	All clinical placements	Role play assignments		
Self-evaluation of effectiveness of practice	7007 (Communicative interaction) 7016 (SocioCultrl Bases)	7200 (Intro Clinic) 7208 (Clinical Experience SLP)	All clinical placements			

SLP Program Appendix 3.6

SLP Knowledge and Skills as Listed by Course

Note: Aspects of each Standard are addressed to varying extents in individual courses.

7000 - Speech Science
7003 - Anatomy and Physiology of the Speech Mechanism
7005 – Language Sample Analysis
7006 - Language and Speech Development
7007 - Communicative Interaction
7010 - Neurological Bases of Communication
7015 – Professional Writing
7016 - Socio-Cultural Bases of Communication
7032 – Professional Development in CSD
6106 - Introductory Survey of Audiology
7108 – CSD and Public Health
7113 - Rehabilitative Audiology I
7123 - Clinical Applications Sign Language
7200 - Introduction to Clinical Practice in Speech-Language Pathology
7201 - Cleft Palate and Craniofacial Disorders
7206 - Developmental and Acquired Speech Motor Disorders
7203 - Voice and Upper Airway Disorders
7204 – Speech Sound Disorders
7205 - Fluency Disorders
7207 - Clinical Instrumentation
7208 - Clinical Experience in Speech-Language Pathology
7209 - Dysphagia and Related Disorders
7212 - Autism Spectrum Disorders and Related Disabilities
7215 - Pediatric Feeding and Swallowing
7216 – Endoscopy and Advanced Clinical Instrumentation
7300 - Language Disorders in Children
7302 - Language Disorders in Adults
7305 - Language Learning Disabilities
7308 - Augmentative Communication
7309 - Speech Rehabilitation for Head and Neck Pathologies
7500 - Evaluating Research in Communication Disorders
7501 - Phonetic Transcription
7505 – Introduction to Interprofessional Education and Practice

7000 – Speech Science

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Articulation

Voice and resonance, including respiration and phonation

7003 – Anatomy and Physiology of the Speech Mechanism

IV-B The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

V-A The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

7005 – Language Sample Analysis

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, writing

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Evaluation

7006 – Language and Speech Development

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological,

acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Articulation

Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, writing

Cognitive aspects of communication (attention, memory, sequencing, problem-solving, executive functioning)

Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Evaluation

7007 – Communicative Interaction

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Interaction and Personal Qualities

7010 – Neurological Bases of Communication

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Articulation

Voice and resonance, including respiration and phonation

Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, writing

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of

anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Evaluation

7015 – Professional Writing

V-A The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

7016 – Socio-Cultural Bases of Communication

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases.

The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Articulation

Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, writing

Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

IV-G The applicant must have demonstrated knowledge of contemporary professional issues.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Evaluation
Intervention
Interaction and Personal Qualities

7032 – Professional Development in CSD

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Interaction and Personal Qualities

6106 – Introductory Survey of Audiology

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Hearing, including the impact on speech and language

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Evaluation

Intervention

7108 – Communication Sciences and Disorders and Public Health

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates across areas related to communication and swallowing.

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

The applicant must have demonstrated knowledge of contemporary professional issues.

V-A The applicant must have demonstrated skill in oral and written or other forms of communication sufficient for entry into professional practice.

7113 – Rehabilitative Audiology I

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Hearing, including the impact on speech and language

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Intervention

Interaction and Personal Qualities

7123 – Clinical Application of Sign Language

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Hearing, including the impact on speech and language

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Intervention

Interaction and Personal Qualities

7200 – Introduction to Clinical Practice in Speech-Language Pathology

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Articulation

Fluency

Voice and resonance, including respiration and phonation

Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, writing

Hearing, including the impact on speech and language

Swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding, orofacial myology)

Cognitive aspects of communication (attention, memory, sequencing, problem-solving, executive functioning)

Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)

Augmentative and alternative communication modalities

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

The applicant must have demonstrated knowledge of contemporary professional issues.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

Interaction and Personal Qualities

7201 – Cleft Palate and Craniofacial Disorders

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Articulation

Voice and resonance, including respiration and phonation

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

Interaction and Personal Qualities

7204 – Speech Sound Disorders

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological,

developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Articulation

Cognitive aspects of communication (attention, memory, sequencing, problem-solving, executive functioning)

Voice and resonance, including respiration and phonation

Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, writing

Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)

Hearing, including the impact on speech and language

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

The applicant must have demonstrated knowledge of contemporary professional issues.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

Interaction and Personal Qualities

7205 – Fluency Disorders

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Fluency

Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people

with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

IV-F The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

Interaction and Personal Qualities

7206 – Developmental and Acquired Motor Speech Disorders

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Articulation

Cognitive aspects of communication (attention, memory, sequencing, problem-solving, executive functioning)

Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)

Voice and resonance, including respiration and phonation

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

The applicant must have demonstrated knowledge of contemporary professional issues.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

Interaction and Personal Qualities

7203 – Voice and Upper Airway Disorders

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the

ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Voice and resonance, including respiration and phonation

Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

The applicant must have demonstrated knowledge of contemporary professional issues.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

Interaction and Personal Qualities

7207 – Clinical Instrumentation

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Articulation

Voice and resonance, including respiration and phonation

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

V-B The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

7208 – Clinical Experience in Speech-Language Pathology

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the

ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Articulation

Fluency

Voice and resonance, including respiration and phonation

Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, writing

Hearing, including the impact on speech and language

Swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding, orofacial myology)

Cognitive aspects of communication (attention, memory, sequencing, problem-solving, executive functioning)

Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)

Augmentative and alternative communication modalities

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant must have demonstrated knowledge of standards of ethical conduct.

The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

The applicant must have demonstrated knowledge of contemporary professional issues.

The applicant must have demonstrated knowledge of entry level and advanced certifications, licensure, and other relevant professional credentials, as well as local, state, and national regulations and policies relevant to professional practice.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

Interaction and Personal Qualities

7209 – Dysphagia and Related Disorders

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological,

acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding, orofacial myology)

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates. The applicant must have demonstrated knowledge of standards of ethical conduct.

The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

The applicant must have demonstrated knowledge of contemporary professional issues.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

7212 – Autism Spectrum Disorders and Related Disabilities

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, writing

Cognitive aspects of communication (attention, memory, sequencing, problem-solving, executive functioning)

Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

The applicant must have demonstrated knowledge of contemporary professional issues.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

Interaction and Personal Qualities

7215 – Pediatric Feeding and Swallowing

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding, orofacial myology)

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant must have demonstrated knowledge of standards of ethical conduct.

The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

IV-F The applicant must have demonstrated knowledge of contemporary professional issues.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

Interaction and Personal Qualities

7216 – Endoscopy and Advanced Clinical Instrumentation

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding, orofacial myology)

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

The applicant must have demonstrated knowledge of contemporary professional issues.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

7300 – Language Disorders in Children

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Articulation

Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, writing

Hearing, including the impact on speech and language

Cognitive aspects of communication (attention, memory, sequencing, problem-solving, executive functioning)

Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

The applicant must have demonstrated knowledge of contemporary professional issues.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

Interaction and Personal Qualities

7302 – Language Disorders in Adults

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, writing

Cognitive aspects of communication (attention, memory, sequencing, problem-solving, executive functioning)

Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates. The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

The applicant must have demonstrated knowledge of contemporary professional issues.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

Interaction and Personal Qualities

7305 – Language Learning Disabilities

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, writing

Cognitive aspects of communication (attention, memory, sequencing, problem-solving, executive functioning)

Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

IV-F The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

7308 – Augmentative Communication

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, writing

Cognitive aspects of communication (attention, memory, sequencing, problem-solving, executive functioning)

Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)

Augmentative and alternative communication modalities

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

The applicant must have demonstrated knowledge of contemporary professional issues.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

Interaction and Personal Qualities

7309 – Speech Rehabilitation for Head and Neck Pathologies

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Articulation

Voice and resonance, including respiration and phonation

Swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding, orofacial myology)

Augmentative and alternative communication modalities

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

Interaction and Personal Qualities

7500 – Evaluating Research in Communication Disorders

IV-D For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates. The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

The applicant must have demonstrated knowledge of contemporary professional issues.

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

Assessment

Intervention

Interaction and Personal Qualities

7501 – Phonetic Transcription

IV-B The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

7502 – Intro to Transcription

IV-B The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

7505 – Introduction to Interprofessional Education and Practice

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological,

developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, writing

Hearing, including the impact on speech and language

Cognitive aspects of communication (attention, memory, sequencing, problem-solving, executive functioning)

Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)

Swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding, orofacial myology)

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

SLP Program Appendix 3.7

Goals and Expectations for Clinical Practicum in SLP

- I. The Directors of Clinical Education in Speech-Language Pathology will:
 - a. Design an individualized clinical practicum sequence for the student with the input from clinical faculty and in collaboration with the student with the emphasis on the skills the student has obtained and still needs to learn as well as his/her areas of interest;
 - b. Retain and add external placements that will provide a rich learning environment for students;
 - c. Be available for students to express interests and concerns about their clinical training or education in general;
 - d. Keep all issues of concerns addressed with a student confidential;
 - e. Maintain currency of the practice trends in speech-language-swallowing disorders and business practices to ensure the best opportunity for learning for students.
- II. The clinical educator (supervisor) will:
 - a. Provide background information about the clients and procedures for specific programs;
 - b. Initially, inquire about the student's knowledge and experience with the disorder type/age of client assigned and determine the level of instruction needed for the student to succeed with the client;
 - c. Share expectations of skill level for a student at his/her level of study by the end of the semester;
 - d. Meet with students on a regular basis to plan and debrief the sessions as well as give feedback regarding the sessions;
 - e. Be open to student questions and suggestions;
 - f. Continuously assess the student's skill and knowledge to provide the optimal learning experience for the student;
 - g. Encourage questions and guide the student regarding the types of questions a learner at his/her level of study is expected to ask;
 - h. Foster critical thinking and problem-solving skills;
 - i. Guide the student to a level of expected skill for his/her level of learning with the ultimate goal of independence in the session;
 - j. Participate in self-assessment of clinical teaching methods and strategies and encourage feedback from students;
 - k. Ultimately be responsible for providing the best services to the client and families
- III. The student will:
 - a. Participate in clinic assignments that will expose them to the breadth of the scope of practice across the lifespan, with diverse populations, and in as many different settings as possible;
 - b. Work with each of the CSD clinical faculty in the majority of clinical programs offered at MSHC;
 - c. Understand his/her responsibility to provide the best and most efficient care/service to the client and their families;

- d. Come to the session prepared with the necessary plans, materials, knowledge, and practice of tests/techniques, and mindset to provide the best services for the client;
- e. Be open to learning new techniques and to be an active learner in the education process;
- f. Be familiar with the policies and procedures in the CSD Handbook and refer to it for information before asking questions;
- g. Apply course content in the clinic and ask insightful questions to assist the clinical educator in identifying any disconnect of knowledge and application;
- h. Gain meaningful insight, through self-assessment and instructor feedback, and achieve progress with each clinical placement;
- i. Express concerns about the clinical experience with the assigned clinical faculty member throughout the semester and not just at the end of the assignment;
- j. Participate in at least one placement in a medical setting and one in pediatric placement (i.e., school, private practice, etc.)
- k. Meet the knowledge and skills outlined for certification of clinical competence for ASHA, TN teacher licensure, and other state licensures;
- l. Exceed the minimum ASHA requirement of 400 clock hours

SLP Program Appendix 3.8

The Clinical Practicum Progression in SLP (under revision, 8.14.25)

In general, the progression of clinical education is based on the coursework taken by the student and the clinical experience the student has had. Students need to have had or are concurrently taking the courses that apply to the clinic assigned. Off-site medical placements require, at minimum, the Language Disorders in Adults I and preferably Dysphagia at least concurrently.

Each semester students will meet with the Co-Director of Clinical Education, SLP, Adele Dunkin, to discuss their progression of experiences and their requests for placements in the future. Efforts are made to accommodate the requests, when possible.

Students can request more clinic than the typical assignment. Students who are on clinical assistantships will be assigned an additional 10 hours a week, which can have an impact on the total number of clock hours accrued in the program.

- First Semester: (approximately 6 hours of client contact a week)
 - a. With-Background (WB) students will be assigned 6 hours of client contact per week. A specific number of clients are not specified because the schedule can vary if working with individuals or groups in clinic. Assignments will typically be diagnostics or therapy with children (speech/language disorders) or accent modification with adults (ASSET). On a rare occasion, a student who has had fluency disorders undergrad may have a fluency client. Total number of clock hours expected by the end of the semester is 50+.
 - b. With other Background (WOB) students may be assigned clinic in the role of observer or possibly the clinician. Clinician roles would be in the accent modification program (ASSET) and, on rare occasions, therapy with children. Assignments are determined based on the undergraduate area of study and experiences. The primary clinical assignment for the semester is obtaining 25 observation hours.
- Second Semester: (approximately 9 hours of client contact a week)
 - a. Spring graduates, with recommendation from supervisors, can be placed off-site in pediatric/school settings. Assignments will be different than the first semester, but with the same types of clients. Total number of clock hours expected by the end of the semester is 100+.
 - b. Summer Graduates (after the first semester students are no longer considered to be a WOB) assignments will typically be diagnostics or therapy with children (speech/language disorders) or accent modification with adults (ASSET). Total number of clock hours expected by the end of the semester is 50+.
- Third Semester: (approximately 9 hours of client contact a week)
 - a. Spring graduates, with recommendation from supervisors, can be placed off-site in pediatric/school settings. Assignments with disorders for which class work has been completed or concurrently taken can be assigned. Total number of clock hours expected by the end of the semester is 150+.

- b. Summer Graduates, with recommendation from supervisors, can be placed off-site in pediatric/school settings. Assignments will be different than the first semester, but with the same types of clients. Total number of clock hours expected by the end of the semester is 100+.
- Fourth Semester: (minimum of 9 hours of client contact a week)
 - a. Spring graduates will have their first opportunity to be placed in a medical setting. Those not placed in a medical setting will be placed in some type of offsite experience, if they have not been off-site in earlier semesters. Most off-site placements are for 2 full days a week. Students will also be assigned at least one client in-house. Total number of clock hours expected by the end of the semester is 250- 300+ (with off-site twice a week). When assigned to an adult off-site placement, the goal is to get as many of the adult clock hours as possible that semester.
 - b. Summer graduates will have their first opportunity to be placed in an adult/pediatric medical setting; however, the priority of placement will be to the spring graduates. Efforts are made to place as many as possible in some type of off-site placement. Total number of clock hours expected by the end of the semester is 150-250+ (depending on if assigned off-site twice a week). When assigned to an adult off-site placement, the goal is to get as many of the adult clock hours as possible that semester.
- Fifth Semester: (minimum of 9 hours of client contact a week)
 - a. Spring graduates who have not been placed in a medical setting will have first priority for those placements. Second priority will go to the summer graduates. If placements are available, students who have an interest in the medical setting may request a second placement. Complete all hours in all categories with a minimum total of 400 (including 25 observation) clock hours.
 - b. Summer graduates will have second priority for medical placements after those spring graduates who have not had that opportunity. Total number of clock hours expected by the end of the semester is 250-300+ (depending on if assigned off-site twice a week).
- Sixth Semester: (minimum of 9 hours of client contact a week)
 - a. Summer graduates who have not been placed in a medical setting will have first priority for those placements. If placements are available, students who have an interest in the medical setting may request a second placement. Complete all hours in all categories with a minimum total of 400 (including 25 observation) clock hours.

The following table is a breakdown of the clock hours by disorder and age group. These are suggested targets to ensure a clinical experience that involves the scope of practice. Some states require these clock hours for licensure. It is important to be aware of the requirements of the states where you may do your CF early in the program to ensure time to acquire what is needed. The ultimate requirement for clinical experience is the competency level of both knowledge and skills across the nine disorder areas determined by ASHA, not the hours in each category.

Category	Hours Required	Category	Hours Required
Child Speech Diagnostics • Artic • Voice • Fluency • Dysphagia/feeding • Speech screening	20 total • only 10 of the 20 can be screening hours	Adult Speech Diagnostics • Artic • Voice • Fluency • Dysphagia/feeding • Speech screening	20 total • only 10 of the 20 can be screening hours • only 10 of the 20 can be dysphagia
Child Language Diagnostics • Language screening • Cognitive • AAC	20 total • only 10 of the 20 can be screening hours	Adult Language Diagnostics • Language screening • Cognitive • AAC	20 total • only 10 of the 20 can be screening hours
Child Speech Therapy • Artic • Voice • Fluency • Dysphagia/feeding	20 total	Adult Speech Therapy • Artic • Voice • Fluency • Dysphagia/feeding	20 total
Child Language Therapy • Language therapy • Cognitive • AAC	20 Total	Adult Language Therapy • Language screening • Cognitive • AAC	20 Total
Fluency (hours are counted in the speech category and then noted separately for this requirement)	15 Total • Can be any age • Can be either dx or tx • A portion can be prevention	Hearing screening and Aural Rehab	20 total • No minimum in either • Need to have some of both
Voice (hours are counted in the speech category and then noted separately for	15 Total • Can be any age	Undergraduate Hours	75 Maximum • Require signed log of hours to

this requirement)	• Can be either dx or tx • A portion can be prevention		count
Counseling	No more than 25	Settings	3 different settings of 50 hours each
Staffing	No more than 25	Total with U of M Faculty	125
Observation	25 total	Total clock hours	375 minimum not including the 25 <u>observation</u>

SLP Program Appendix 3.9

SLP Students Frequently Asked Questions/Comments

The intent of this information is to help students understand some of the principles and processes used in the clinical practicum experience. It is in no way intended to suggest that students shouldn't express their interests, preferences, and fears about the clinical placements they receive.

- I. "I have all of my child language hours (or hours) and I'm concerned I won't get all of my hours with the assignment I have".
 - a. Students will have well more than the minimum of 20 hours in child language treatment, as well as other disorder type hours. It is impossible to experience the vast scope of language disorders with all ages of clients and feel confident in treating those cases independently in 20 hours. The goal is reaching competency in the disorder areas, not an hour count. The more you practice something, the better you will be. The 400 clock hours is a minimum.
 - b. Below is a table of average clock hours based on the graduating classes for 2012-2014. These are only graduate hours, so undergrad clock hours are not in the totals. Typically child hours are in the first year and adult hours are in the second year. You will get your hours; so rather than noting your progress by the number of hours; try to focus on the experiences and what you want to learn.

Total Hours	Total Child	Total Adult	Child Speech Therapy	Child Lang Therapy	Child Speech Diag	Child Lang Diag	Adult Speech Therapy	Adult Lang Therapy	Adult Speech Diag	Adult Lang Diag
459	232	215	52	75	30	35	52	79	33	22

- II. "I'm concerned about my clock hours."
 - a. Students are to monitor their clock hours and inform the Director of Clinical Education if numbers are lower than the expected number listed by semester (approximately 50 per semester for the first three) or the assigned placements are not yielding the expected totals due to poor client attendance.
- III. "My classmate has been assigned hours that I don't have. I'm concerned that I won't be ready to graduate on time."
 - a. To get a cohort the hours needed to graduate, the order of experiences will differ. Availability often determines assignments. Some students may get hearing/ diagnostic/fluency, etc. hours early in their study to get everyone what they need by the end. All students will get the required hours in the end.
- IV. "I have already worked with that supervisor, can you change my schedule?"
 - a. You will more than likely work with the same supervisor in more than one semester. The goal of the assignment is to allow you to work with different clients. If you have a significant problem working with a particular person, it is important to address those difficulties during the semester you are assigned to them. You may request a break in being assigned to a particular person; however, the request needs to be expressed before the assignment is made.

- V. “I prefer to work with adults, so can you just assign me to adult clinics?” or “I prefer to work with children, so can you just assign me to clinics with children?”
 - a. The simple answer is “no”. We have to ensure that you have the clinical skills to work with all ages and all disorders. I know that the first year of clinic can be frustrating if all of your clients are children and you want to work with adults, but the coursework order dictates that early assignments are with children and the second years have the adult assignments. Likewise, those who have concerns about working in a medical setting may be fearful of what the second year will bring. Keep an open line of communication with the Directors of Clinical Education, and they will work you through it. By the way, a little bit of peppermint oil under the nose can help with the smells in a medical setting.
- VI. “I have no interest in working in a (school, hospital, etc.). Do I have to?”
 - a. It is our experience that five years after graduation, SLPs are working in environments that they had no interest in as a graduate student. Our goal is to give students a broad exposure to a range of practice settings. All will experience a medical placement and an external pediatric/school placement. Students are often surprised that their assumptions about the setting are in error. If nothing else, it gives the student the opportunity to know what type of settings they would be happy working in in the future.