

**Cognitive Linguistic Disorders**  
**SLP 513**  
**CRN 38734**  
**UFT 11 Chats Monday 6:30-7:30**

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**Class Meeting Day/Time Information:** We will meet Monday Evenings 6:30 PM to 7:30 PM CST. The Adobe Connect class link is <https://connect.wku.edu/neils-strunjas/> To prepare for class you will need to watch pre-recorded lectures, complete readings to prepare for quizzes and complete and upload assignments by the class listed. Prepare your planner with the class time and schedule yourself for days and times where you read the textbook and prepare assignments.

**Course Description:**

Designed to develop a working knowledge of neural based communicative linguistic disorders, with an emphasis on traumatic brain injury, dementia, and other etiologies that cause cognitive linguistic disorders. Students will gain knowledge in identification, assessment and therapeutic strategies of neuroanatomical bases and classification of cognitive linguistic disorders. The course will prepare students for clinical work in hospitals, rehabilitation settings, and nursing homes to work with patients who have cognitive disorders. (For the purpose of this course, cognitive disorders will be viewed separately from aphasia although language may be considered a subcategory of cognition.) Students are likely to encounter patients with primary cognitive disorders as a result of traumatic brain injury, right cerebral vascular accidents (RCVA), and Alzheimer's disease (and related dementias.) In addition, students will encounter patients who have a

specific aphasia with additional cognitive and emotional deficits.

### Course Objectives:

1. Students will become familiar with the characteristics of cognitive disorders and emotional deficits that might occur as a result of neurological damage. (Met by 80% or better on exam 1).
2. Students will become familiar with current recommendations to prevent cognitive disorders that might occur as a result of neurological damage. (Met by 80% or better on exam 1 and a minimum of five 2001-2005 printed readings on prevention of head injury, anoxic brain injury, stroke OR Alzheimer's disease in the on-call notebook).
3. Students will become familiar with the leading etiologies of cognitive disorders. (Met by 80% or better on exam 1).
4. Students will gain experience administering standardized and nonstandardized tests of cognition with the realization that time often limits test administration in acute care and rehabilitation settings. (Met by attending in-class practice day, **completion of a test administration to a person over the age of 65** and 80 % or better on exam 2).
5. Students will develop evaluation strategies. (Met by 80 % or better on exam 2 and five different informal evaluation strategies in the on-call notebook).
6. Students will generate cognitive (cognitive-linguistic) goals based on patient descriptions. (Met by 80% or better on exam 3).
7. Students will develop therapy activities that are appropriate given the cognitive goals, background, and interests of the patient. (Met by 80% or better on exam 3 and a minimum of 25 therapy activities that appeal to the interests and background of a widely variable cultural and education patient population and can be performed by severely impaired patients and mildly impaired patients). You should provide a written paragraph in your on-call notebook describing how you have incorporated a variety of ethnic, religious, and cultural contexts for therapy. You should flag 5 activities that can be performed by the severely impaired patient.

8. Students will learn approaches for dealing with the challenging behavior that often follows serious traumatic head injury. (Met by 80% or better on exam 3).

### **Requirements:**

1. Completion of readings (and related study guides).
2. Watch pre-recorded lectures prior to class (We will discuss the highlights of the lectures during our class meeting times, divided equally depending on the number of meeting times).
3. Development of “on-call” evaluation/ therapy activity notebook. (10% of the course grade)-assignment discussed on the first day of class.
4. Three student examinations (30% X 3).
5. Class discussion and attendance are required.
6. Students will administer a standardized test of cognition to a person who is 65 years of age or older. A copy of the test form should be handed in on **6-13-16**

### **Course Examinations:**

Each examination will cover the course notes and any assigned readings from the textbook or other publications posted on Bb or listed on the Required Readings. As part of the exam you will be required to interpret clinical cases, develop evaluation procedures, integrate information across deficits in speech, language, swallowing and cognition, write goals and propose therapy activities. The examination format will be primarily essay.

**Course Schedule:** (each class will include a presentation of videotaped cases)-**Students, please print all of the notes on Blackboard during the first week of class. Also, number the pages as I review them and add a page at the end of a section prior to an exam, with Exam 1, 2, and 3. You are required to find the readings listed in the library or on-line. There will not be a study guide for the notes posted on Blackboard. There are some review guidelines for the readings but it is strongly recommended that you do the readings and not depend on these.**

Lecture 1      Overview of the syllabus. Discussion of On-Call Notebook requirement. Differential Diagnosis of aphasia and cognitive

disorders. Overview of Cognitive rehabilitation.

Lecture 2 Neurological bases of cognitive disorders.

Lecture 3 Patient evaluation strategies (limitations of time, aphasia, levels of consciousness, neurological information). Getting the background information on the patient. Neuroradiologic Tests

**Sohlberg & Mateer Chaps. 1-4**

Lecture 4 Levels of consciousness & attention

**Sohlberg & Mateer Chapt. 5**

### **Examination**

**Lecture 5** Severe Traumatic Head Injury: The early stages Managing Challenging Behaviors testing/ goals/ therapy ideas

**Sohlberg & Mateer Chapt. 11**

**Lecture 6** Orientation/Memory

**Sohlberg & Mateer Chapt. 6**

Lecture 7 Memory continued testing/ goals/ therapy ideas

**Sohlberg & Mateer Chapt. 7**

Lecture 8 Executive functioning/Later stages TBI/Self Awareness testing/goals/ therapy ideas

**Sohlberg & Mateer Chapt. 8 & 9**

Lecture 9 Pediatric TBI & Sequencing of tasks testing/ goals/ therapy ideas

**Sohlberg & Mateer Chapt. 14**

### **Examination**

Lecture 10 Overview of Alzheimer's disease and related dementias

**Read ASHA Leader article on goal writing (Swigert)**

**Read Bayles et al (2003)**

Lectures 11 Alzheimer's disease and related dementias  
testing/ goals/ therapy ideas –**On Call notebook due**

Lecture 12 Visual Behavior & Spatial behavior  
**Read Luaute et al. (2006) & Sacks Chapter 1**

Lecture 13 Right CVA- Neglect and Related Disorders  
**Read Kucharska-Pietura et al (2006)**  
**Read Horn et al. (2005)**

Lecture 14 Practice administering tests of cognition  
Test form on test administered to over 65-year old **due**

Lecture 15 Emotional processing

#### Main Text:

Sohlberg, M.M. and Mateer, C.A. (2001). Cognitive rehabilitation. An integrative neuropsychological approach. New York: The Guilford Press.

#### Other required readings:

Bayles, K.A. and Kim, E.S. (2003). Improving the functioning of individuals with Alzheimer's disease: Emergence of behavioral interventions. Journal of Communication Disorders, 36, 327-343.

Horn, S.D., Delong, G., Smout, R.J., Gassaway, J., James, R., and Conroy, B. (2005). Stroke rehabilitation patients, practice, and outcomes: Is earlier and more aggressive therapy better? Arch Phys Med, 86, Suppl 2, S101-S114.

Kucharska-Pietura, K., Phillips, ML, Gernand, W., and David, A.S. (2003). Perceptions of emotions from faces and voices following unilateral brain damage. Neuropsychologia, 1082-1090.

Luaute, J., Halligan, P., Rode, G., Rosseti, Y., Boisson, D. (2006). Visuo-spatial neglect: A systematic review of current interventions and their effectiveness. Neuroscience and Biobehavioral Reviews, 30, 961-982.

Sacks, O. (1985). The man who mistook his wife for a hat. New York:

Summit Books. (Chapt 1)

Swigert, N.A. (February 5, 2002). Documenting what you do is as important as doing it. ASHA Leader, 7, no.2.

Other books of interest:

Heilman, K.M. and Valenstein, E. (1993). Clinical neuropsychology (3<sup>rd</sup> ed.). New York: Oxford University Press.