

Speech-Language Pathology Externship Application

Name: _____ **Phone:** _____ **E-mail:** _____
School: _____ **Graduate Coordinator:** _____ **Their e-mail:** _____
Requested Semester: _____ **Start date:** _____ **End date:** _____

Is this your first graduate externship?

If not, where have you externed/are you externing and with what patient population?

General Information

Externships are typically fulltime (8 hours/day Monday-Friday or 4 (10 hour) shifts. Inpatient placements may require 1 weekend shift. The OP clinics and hospital are in Winston-Salem, NC. *If you are requesting a placement < 40 hours a week or know you'll regularly be unavailable on a particular day each week, elaborate here:* [Click or tap here to enter text.](#)

Placement Selection

Review the descriptions of each placement. Check the box next to no more than three areas of interest then rank them below (#1=your first choice). *Externships are not available in each area every semester. It is dependent on which clinicians are interested in being a clinical educator during that semester.*

1. _____

2. _____

3. _____

INPATIENT

Acute (Inpatient) Adult: Patients are adults (18+) with swallowing, communication, and cognitive disorders. Swallowing disorders are most prevalent. Trachs and vents are frequent. FEES, PFS/MBS, and PMV evaluations are performed frequently. EMST and IOPI are intermittently utilized. NMES is infrequent. Intermittent interdisciplinary team attendance.

Suggested Coursework: Dysphagia, Neuro, Communication/Language Disorders, Trachs/Vents

Inpatient Rehab Adult (Sticht Center): Patients are adults (13+) with swallowing, communication, and cognitive disorders. Communication and cognitive disorders are most prevalent, with swallowing as a close second. Trachs are infrequent, no vents. FEES, PFS/MBS, and PMV evaluations are performed infrequently. NMES and IOPI utilized on a regular basis. EMST is infrequently utilized. Regular interdisciplinary team attendance.

Suggested Coursework: Aphasia, Neuro, Communication/Language Disorders

Inpatient Pediatric: Patients are pediatric (0-17) with swallowing/feeding, communication, and cognitive disorders. Feeding disorders are most prevalent. Trachs and vents are frequent. FEES, PFS/MBS, and PMV evaluations are performed regularly. Infrequent NMES, EMST, and IOPI. Regular interdisciplinary team attendance.

Suggested Coursework: Dysphagia, Communication/Language Disorders in Peds, Trachs/Vents, Language Development

OUTPATIENT ADULT

Patients are adults (16+) with swallowing, communication, and/or cognitive disorders. Both pediatric and adult patients are seen for upper airway and/or voice disorders.

Head and Neck Cancer/Dysphagia: Patients present with swallowing disorders largely related to H&N cancer. Exposure to laryngectomy/TEP management, modified barium swallow studies (MBS/PFS), flexible endoscopic examination of swallowing (FEES), esophageal and lingual manometry, and swallowing therapy. Experience or certification in using the *Modified Barium Swallow Impairment Profile (MBSImp)* a plus.

Suggested coursework: Dysphagia, Trachs/Vents/Lary, Head and Neck Cancer, Neuro

Neuro and Cognitive/Communication Disorders: Patients present with progressive neurological disease processes and/or are status-post TBI, TIA, CVA, or MVA. Central or peripheral disorders evaluated and treated, along with cognitive-linguistic function, language, phonological processes, pragmatic deficits, alternative augmentative communication (AAC), voice, and/or swallowing. SPEAK-OUT! or LSVT may be utilized.

Suggested Coursework: Aphasia, Dysphagia, Neuro, Communication/Language Disorders, Motor Speech, AAC, Voice

Voice and Upper Airway Disorders: Patients present with a wide range of functional, organic, and/or neurologic voice disorders (tremor, laryngeal dystonia). Upper airway disorders include ILO/EILO/PVFM/VCD, irritable larynx syndrome, chronic cough, globus, and/or chronic throat clearing. Regular acoustic, aerodynamic, & perceptual voice evaluations. Exposure to flexible and rigid video laryngostroboscopy. May involve singing voice rehabilitation (dependent on background of student, clinical educator, and patient complaints). No SPEAK OUT! or LSVT. Multidisciplinary collaboration.

Suggested Coursework: Voice Disorders, Care of the Professional Voice, Dysphagia, Neuro, Medical SLP

OUTPATIENT PEDIATRIC

Patients are pediatric (0-17) with swallowing/feeding, communication, language, articulation, and/or cognitive disorders. Specialty clinics may include KidsEat, NG clinic, cleft and craniofacial clinic, augmentative alternative communication (AAC) clinic, and work with the hearing impaired (HI) and/or cochlear implant (CI) team. Regular MBS/PFS with select patient populations. Trachs and vents are infrequent. The patient population is dependent on the area of subspecialty chosen.

General Pediatric Communication Disorders (may include Hearing Impairment/Cochlear Implant (HI/CI) or AAC): Extensive exposure to full pediatric evaluations and

therapy for patients with communication, language, articulation, and/or cognitive disorders. Dependent on supervisor, experience may include work with either the HI/CI population or AAC population.

Suggested Coursework: Communication/Language Disorders in Peds, Language Development, Articulation/Phonology Disorders, Motor Speech, AAC, and impairments secondary to HI/CI

Swallowing/Feeding: Patients present with swallowing/feeding disorders. May include KidsEat, MBS/PFS, and NG clinic. Minimal to no exposure to patients with general communication/language disorders.

Suggested coursework: Dysphagia, Trachs/Vents, Communication/Language Disorders in Peds

Cleft and Craniofacial Anomalies and Swallowing: Patients are followed by the multidisciplinary cleft/cranio team during 3 clinics a month, with some receiving individual speech therapy. Includes MBS/PFS and resonance evaluations via nasopharyngoscopy, with latter done jointly with physician. May involve evaluation and treatment of patients with general communication/language disorders.

Suggested Coursework: Cleft palate and craniofacial anomalies, voice, dysphagia, communication/language disorders

Tell us what drew you to the field of speech-language pathology and why you selected these externship placement(s).

Attach an evaluation and therapy note (ideally medically based) showcasing your report writing/documentation skills. These can be from two different patients or patient populations. Be sure to remove ALL patient identifiers.

Application Process

Placements fall into one of three areas: *Inpatient (Adult)*, *Outpatient (Adult)*, and *Pediatric Inpatient & Outpatient*. Submit this application, writing samples, list of graduate coursework (include courses in which you're currently enrolled), and CV to the appropriate externship coordinator via their e-mail address below. Put "Externship application," along with the requested semester/year, in the subject line. Depending on your areas of interest you may need to address it to more than one coordinator.

Externship Coordinators:

Inpatient (Adult)

Ana C. Tobón Little, M.S., CCC-SLP, CBIS: atobon@wakehealth.edu

Outpatient (Adult)

Amy K. Morris, MM, MA, CCC-SLP: amy.k.morris@wakehealth.edu

Pediatric Inpatient & Outpatient

Laura Mabry, MS, CCC-SLP: laura.mabry@wakehealth.edu

Deadline:

March 1st

August 1st

December 1st

Requested placement:

Fall semester

Spring semester

Summer semester

Once the deadline has passed, applications are disseminated to clinicians within each of the selected placement areas. SLPs interested in taking on an extern interview their top candidates, with decisions typically determined within 4-6 weeks. *As a reminder, not every area takes a student each semester.* Applications submitted after the deadline are considered on a case-by-case basis.

We look forward to getting to know you and being part of your clinical education!