

Speech-Language Pathology Externship Application

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Name	of your graduate school externship coord	dinator: Click or tap here to enter text.	
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s this	your first graduate externship? Choose a	an item.	
	If not, where have you externed/are you	u externing and with what patient population?	
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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 <i>Modified Barium Swallow Impairment Profile (MBSImP)</i> 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, cough, globus, and throat clearing. Extensive exposure to acoustic, aerodynamic, & perceptual evaluations. Exposure to flexible and rigid video laryngostroboscopy. May involve singing voice rehabilitation (dependent on patient complaints, student background, and clinical educator). No 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 <i>KidsEat, NG Clinic, Cleft and Craniofacial Anomalies Clinic, Augmentative Alternative Communication (AAC) Clinic,</i> 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 team during the Cleft and Craniofacial Anomalies Clinic (3 clinics a month), with some receiving individual speech therapy. Includes MBS/PFS and assessment of velopharyngeal function/resonance 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,

Tell us what drew you to the field of speech-language pathology and why you selected the placement(s)/patient population(s) above.

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communication/language disorders

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 <u>ALL</u> 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: Requested placement:

March 1st Fall semester

August 1st Spring semester

December 1st Summer semester

Applications are disseminated to clinicians within each of the selected placement areas once the deadline for that semester has passed. Clinicians who are open to taking a student extern during that time frame interview selected applicants, with decisions typically determined within 3-6 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!