

Avinashilingam Institute for Home Science and Higher Education for Women (Deemed to be University Estd. u/s 3 of UGC Act 1956, Category A by MHRD) Re-accredited with A++ Grade by NAAC. CGPA 3.65/4, Category I by UGC Coimbatore - 641 043, Tamil Nadu, India

Conceptual Framework of Curriculum UG Programme

(With Language for one semester)

Bachelor in Audiology and Speech Language Pathology (B. ASLP)

(For Students admitted from 2022-2023 onwards)

I 2 II 4 1-6 2-6 1 5 5 7 7-8	Practical (1-2 per semester) Clinical observation	3 3-5 3-9 3-6	1 1 21-28 8-12	3 3 3-5 3-6	3 3 65-80
1-6 2-6 1 5 5 7	Part-II English Part-III Core Course(Theory) Practical (1-2 per semester) Clinical observation	3 3-5 3-9	1 21-28	3 3-5	3
1-6 2-6 1 5 5	Part-III Core Course(Theory) Practical (1-2 per semester) Clinical observation	3-5 3-9	21-28	3-5	
2-6 1 5 5 7	Core Course(Theory) Practical (1-2 per semester) Clinical observation	3-9			65-80
5 5 7	Clinical observation		8-12	3.6	05-00
5 5		3_6		7-17	40-50
5	Self Study Com	5-0	2	2-4	
7	Self Study Course	1	1	4	4-8
-	 Computer Based Test (CBT) (fundamentals/Principles of domain subject) 	1	1	2	2
7-8	 Internship Project 	6	7		
	 Internship* In Service Training, Internship Practicals 		1	2-4	4
1	Discipline Specific Elective	15-20	2-4	6-10	30-35
1-4	(DSE)Courses ❖ Allied courses One course / Semester Allied with practical MS Office (Subject related)	2T+3P 2T+2P 4T+1P 3T+1P	4	2-5	11-15
5		2	1		
	Generic Elective (GE) Course	4	1	2 Total	2 174

Part - IV COMPONENTS

Applicable for B.Sc. Physician Assistant, Bachelor of Optometry (B.Optom), Bachelor in Audiology and Speech Language Pathology (B.ASLP), Bachelor of Physiotherapy (BPT) students from the academic year 2023-2024 & onwards.

S.No.	Components	Subject Code	Semester	No. of Credits
I	A. Ability Enhancement Compulsory C	ourses		
	Environmental Studies	23BAES01	I	4
	Fundamentals of Research	23BAFU01	II	2
II	Skill Based Compulsory Courses	•		
	Communication Skills	23BSBCS1	III	2
	Soft Skills	23BSBSS1	IV	2
III	Skill Based Elective Course	1 Course	IV	2
IV	Value Based Elective Course I			
	NCC/ NSS/ Sports/	23BVBNC1-6 23BVBNS1-6 23BVBSP1-6		24 Credits 6 Credits 6 Credits
	Medical Camp (for B.Sc. Physician Assistant and Bachelor in Audiology and Speech Language Pathology Students)/	23BVBMC1-6/	1-6	6 Credits
	Eye Camp (for Bachelor of Optometry students) /	23BVBEC1-6/		6 Credits
	Workstation Ergonomics (for Bachelor of Physiotherapy students)	23BVBWE1-6		6 Credits
	Clinical Posting (For Bachelor in Audiology and Speech Language Pathology Students alone)	23BVBCP1-5	2-6	5 Credits
V	Value Based Elective Course II	1 Course	III	2
			Total Credits	38/20 / 43/25 (for B.ASLP)



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Bachelor in Audiology and Speech Language Pathology

Programme Outcomes

- Apply possessed knowledge of fundamental subjects to solve different problems.
- 2. Analyze various research and scientific problems.
- 3. Design rehabilitation services with appropriate consideration to safety, economy, health and environmental considerations.
- 4. To incorporate significant clinical and professional training opportunities, experience with real patients in a supervised environment.
- 5. Use modern therapeutic techniques, resources, equipment's and software.
- 6. Apply their responsibilities in social and environmental context.
- 7. Exhibit professional ethics and norms in rehabilitation services.
- 8. Function individually and in multidisciplinary team.
- 9. Communicate effectively in both verbal and written forms.
- 10. Manage and implement public awareness and education program.
- 11. Practice the use of lifelong learning

Programme Specific Outcomes

- 1. To understand the concepts and to evaluate, diagnose and assess the severity of different disorders related to speech, language, swallowing and hearing.
- 2. To rehabilitate persons with speech, language, swallowing and hearing disorders across
- 3. To prevent speech, language, swallowing and hearing disorders and to counsel persons with disorders and their family members.

Scheme of Instruction & Examinations (For students admitted from 2022-2023 & onwards)

art	Course Code	Title of the Course / Component	Hrs.			S	cheme o	ı Exan	oination	
art	Course Cours	Combonent	T	P	Hrs		CIA	CE	Total	No of Credits
					T	P				
			Seme	ster I						
		Core Course								
	22BASC01	Communication Sciences	3	2	3		50	50	100	3
	22BASC02	Anatomy and Physiology of Speech and Hearing	5		3		50	50	100	3
	22BASC03	Clinical Psychology	4		3		50	50	100	3
	22BASC04	Linguistics and Phonetics	4		3		50	50	100	3
	22BASC05	Electronics and Acoustics	4		3		50	50	100	3
Ш	22BASC06	Research Methods and	3		3		. 50	50	100	3
	22BASC07	Clinical Observation		3			50	-	50	2
	22BASC08	Clinical Observation (Audiology)	-	3			50	-	50	2
		Discipline Specific Ele	ective (I	SE) C	urse					
	22BASD01	DSE I: Digital Health	2	3	3		50	50		2
77.7	22BXMC01	Medical Camp-I					106)	100	1
IV	22BXIVIC01		Se	mester	Į.	1				
	22BLATA 22BLAFR 22BLAHII	of French	3			3	50	50	100	3
			C	ore Cou	rse					
	22BASC09	9 Neurology	4	1		3	50) 5	0 100	3

I	Part	Course (Code	Title of the Course / Component			rs. of ructio	- 1		-	Schen	ne (of Exa	mination	1
						T	P	>		s. of am	CI	A	CE	Total	No of
		22BASC1	10	Speech-Language Pathology		4			T 3	P	50				Credit
		22BASC1	1	Audiology	+		<u> </u>				50		50	100	3
II	ī	22BASC1	2	Practicals-I (Speech -		4	8		3		50	-	50	100	3
		22BASC1	- 1	Language Pathology) Practicals-I (Audiology)	+			-		3	50	50		100	4
		mil		Discipline Specific Ele) ctive	(DS	9 E) Co	11 200		3	50	5	50	100	4
	2	22BASD02		DSE II: Otolaryngology		T	2	T				T			
ΓV	, 2	22BXMC02		Medical Camp-II	+ -	-		+	3		50	5	0	100	3
		22BXCP0		Clinical Postings-I	-	+		-	-		100			100	1
					Sen	1ecto	rIII	1			100			100	1
			(Core Course		10010	1 111								
	22	2BASC14	V	oice and its Disorders	4	-1-	1	1 .							
	22	2BASC15		peech Sound Disorders	4		1	3	+	50		5	0	100	3
Щ	22	BASC16	D	iagnostic Audiology -	4		1	3			50	5	0	100	3
	22	BASC17	Pr	acticals-II (Speech- inguage Pathology)			8				50	50	-	100	3
	22	2BASC18	Pra	acticals-II (Audiology)			8		3	+	50	50		100	4
			Di	scipline Specific Electi	ve (T)SE)	Cone	*86	3			50		100	4
	22	BASD03	DS	E III: Amplification vices	4	T	1	3			50	50		100	3
			Medi	ical Camp-III						16	00		1	00	1
	22B	XCP02	Clini	cal Postings-II						10	vo				1
		1								1 (6)	71.1		1 1/	00	1

art	Course Code	Title of the Course / Component	Hrs. Instru		Scheme of Examination									
		Ci July Wand	T	P	Hrs Ex		CIA	CE	Total	No of Credits				
					T	P								
			Semest	er IV										
		Part II					1							
II	22BLEN02	English Language for Communication II	3		3		50	50	100	3				
		Core Course		T										
III	22BASC19	Motor Speech Disorders in Children	4	1	3		50	50	100	3				
	22BASC20	Child Language Disorders	4	1	3		50	50	100	3				
	22BASC21	Diagnostic Audiology -Physiological Tests	4	1	3		50	50	100	3				
	22BASC22	Practicals-III (Speech- Language Pathology)		7		3	50	50	100	4				
	22BASC23	Practicals-III (Audiology)		7		3	50	50	100	4				
	Discipline Specific Elective (DSE) Course													
	22BASD04	DSE IV: Implantable Hearing Devices	3	1	3		50	50	100	3				
-	22BXMC04	Medical Camp-IV					100		100	1				
IV	22BXCP03	Clinical Postings-III					100		100	1				
	ZZBACI 03		Sem	ester V										
		Core Course												
	22BASC24	Structural Anomalies and Speech Disorders	1 4	1	3		50	50	100	3				
	22BASC25	Fluency and its Disorder	·s 4	1	3		50	50	100	3				
	22BASC26	Paediatric Audiology	4	1	3		50	50	100	3				
	22BASC27	Aural Rehabilitation in Children	4	1	3	3	50	50	100	3				
II	I 22BASC28	Practicals-IV (Speech- Language Pathology)		6			3 50	50	100	4				
	22BASC29		gy)	6			3 50	50	100	4				

	Part	Course	e Code	Title of the Course / Component			Irs. of tructio	- 1			Schei	ne o	f Exa	minatio	on .
						T	P		E	rs. of xam	C	IA	CE	Tot	No of
		22BAS	C30	Audiological and Speed Management (Self-Stud	ch dv)		1	+	T	1		-			Crean
		22BASC	131	BASLP (Computer Based test)			1		1		100		100	100	4
				Generic Elective Cours	se	2			3		100			100	2
I	\mathbf{v}	22BXMC	1,	Medical Camp-V				+			100	-		100	2
		22BXCP	04 C	linical Postings-IV							100			100	1
_					Sei	nest	er VI					_		100	1
			-	Core Course											
	22	22DASC32 III		lotor Speech Disorders Adults	4		1	3		•	50	5	0	100	
	22	BASC33	A	anguage Disorders in dults	4		1	3			50	5(100	3
	22]	BASC34	Au in	ıral Rehabilitation Adults	4		1	3			50	50	+	100	3
TT	221	BASC35	Au	diology in Practice	4		1	3			50		+	100	3
II	22E	BASC36	Pra Lar	ecticals-V (Speech - nguage Pathology)			8		3	3	50	50		100	3
_		ASC37		cticals-V(Audiology)			8		3		50	50	-	100	
7		XMC06 XCP05		lical Camp-VI						1	00			.00	1
	221	ACFUS		ical Postings-V	emest	ter V	П			10	00		1	00	1
			Cor	e Course								-			
	22B	ASC38		nship Project		6								-	
	22BA	ASC39	In-se Speed Patho	rvice training in ch Language logy		15				50					6
	22BA	SC40	In-ser in Au	vice training diology		15				50					6

Part	Course Code	Title of the Course / Component	Hrs. Instru							
			Т	P	Hrs. Exa		CIA	CE	Total	No of Credits
			_		T	P			3	
			Semester	VIII						
-		Core Course								
	22BASC41	Internship Practicals- VI (Speech Language Pathology)		18		3	50	50	100	10
	22BASC42	Internship Practicals VI (Audiology)		18		3	50	50	100	10
						1	Part	I, II &	Part III	174
				Part IV	(Medic	al Ca	mp + C	linical F	ostings)	11
					`				Total	

Communication Sciences

Semester I	Hours of Instruction/week: 3+2	
22BASC01	No of Credits: 3	
Objectives:		
 To understand the basic 	concepts in speech, hearing, language and concepts of hearing sensitivity and acoustics bout historic aspects of audiology and speech language	
Par	t A-Speech Language Pathology	
 Distinctions, similarial language Speech as an overlaid Speech chain Normal development Pre-requisites and fac Cultural and linguistic Unit II: Bases of speech and Overview of speech p Speech mechanism as aperiodic sounds Acoustic theory of speech 	, language, communication, and their components ties and functions of communication, speech and function of speech & language tors affecting speech-language development c issues in communication; bi/multilingual issues I language roduction – speech sub-systems a sound generator, vocal tract, periodic and	15
 Importance of reference Absolute and relative rand decibel sound pressored Relationship between it of decibels Unit IV Audibility and Hear Hearing range –intensi Up-down and staircase Minimum audible pressored Reference equivalent til 	concept of decibel ower, absolute and relative units. se sound intensity and intensity levels. measurements and bel and decibels, sound pressure issure levels. intensity and pressure characteristics and application ring.	15 15

Unit V Introduction to Audiology and Speech Language Pathology Part A: Speech and language

15

- · Historical aspects of the field of speech-language pathology
- · Development of speech and language pathology: Indian and global context
- Scope of practice in speech-language pathology Interdisciplinary nature of speech-language pathology

Part B: Audiology

- Audiology historical aspects, development of instrumentation in audiology
- · Development of audiology. Indian and global context
- Branches of audiology
- Scope of audiology

Total Hours 75

Recommended Books:

- 1. Bordon, G J., Harris, K S., & Raphael, L J. (2006). Speech science primer: Physi acoustics, & perception of speech. Lippincott-Williams & Wilkins.
- SubbaRao, T A. (1992). Manual for developing communication skills. NIMH. ISBN: 81-86594-03-5
- 3. Speaks, C. E. (1999). Introduction to Sound: Acoustics for the Hearing and Speech Sciences (3 edition). San Diego: Cengage Learning.
- 4. Martin, F. N., & Clark, J. G. (2014). Introduction to Audiology (12 edition). Boston: Pearson.
- 5. Gelfand, S. A. (2009). Hearing: An Introduction to Psychological and Physiological Acoustics (5 edition). London: CRC Press.
- Khara L. Pence, T., Laura M. & Justice (2011). Language Development: From Theory to Practice (2nd Ed.), Allyn & Bacon Communication Sciences and Disorders
- 7. Webb, W. G., & Adler, R. K. (2008). Neurology for the speech-language pathologist (5th Ed.). St. Louis, Mo: Mosby/Elsevier.

Course Outcomes: On the successful completion of the course, students will be able to

- 1. Understand the basic concepts of speech and hearing, the importance and development of speech and the factors affecting it.
- 2. Acquire knowledge about production of speech and its subsystems.
- 3. Gain knowledge about the basic units of acoustics, relationship, characteristics and its applications.
- 4. To obtain Hearing ranges and its procedures.
- To know about Historical aspects, development and scope of speech and hearing.

CO/ PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PSO	PSO 2	PSO 3
CO1	M	L	H	н	M	L	M	H		M	М	Н	Н	L
CO 2	Н		М	M	L	L	L	Н	L	L	M	н	Н	
CO3	Н	М	L	L	М		M.	Н		L	L	Н	Н	L
CO4	Н	М		L		M		Н			L	Н	М	
CO5	M	М	L		L	L	L	М	М	H	М	М	L	

Anatomy and Physiology of Speech and Hearing

Semest	ter I	Hours of Instruction/week: 5
22BAS	SC02	No of Credits: 3
Objec	ctives:	
•	To understand the anatomy of the auditory sy To obtain knowledge about physiology of hea To acquire knowledge about functioning of sp mechanism	aring mechanism
Ilnit I	Introduction	15
•	General anatomical terms	15
•	Anatomical positions and planes of reference	
	Cells, tissues and muscles	
•	Muscle connection and joints	
•	Tissue - vascular and neural	
Unit I	II Embryology	15
•	Basic terminologies related to embryology	
•	Development of external ear	
•	Development of middle ear	
•	Development of Inner ear and the auditory sy	stem
	Five examples of embryonic anomalies affect hearing	ing speech-language &
	Development of respiratory structures	
•	Development of larynx	
•	Development of facial region and palate	
	Development of tongue and teeth	
Unit l	III: Anatomy and physiology of speech produced owing	uction systems and 15
	Mechanisms of breathing with emphasis on s	peech breathing
	Supportive frame work of larynx	
•	Anatomy of larynx	
	Anatomy of oesophagus	
0	Brief mechanisms of swallowing	
	Mechanisms of phonation	
•	Anatomy of articulators and associated struct	ures
	Contribution of articulatory structures to spee	ch production
	Anatomy of resonatory mechanisms	
	Contribution of reconstant mechanisms to en	each production

	15
	-
	15
Total Hours	75
	Total Hours

Recommended Books:

- Seikel, J. A., King, D. W., & Drumright, D. G. (2010). Anatomy & Physiology for Speech. Language, and Hearing (4th edition). Delmar, Ceenage Learning, Division of Thomson Learning. NY.
- 2. Zemlin, W. R. (2010). Speech and Hearing Science: Anatomy and Physiology: International Edition (4 edition.). Boston: Pearson.
- 3. Chaurasia, B.D (2004). Human Anatomy, vol 3. Head Neck and Brain 4 th Eds, CBS Publishers and Distributors, New Delhi, ISBN 81-239-1157-2.
- 4. Kelley, M., Wu, D., & Fay, R. R. (Eds.). (2005). Development of the Inner Ear (2005 edition.). New York: Springer.

Course Outcomes: On the successful completion of the course, students will be able to

- 1. Understand the basics of anatomical terms and positions, and learn about cells, muscles, and tissues.
- 2. Acquire knowledge about the development of Ear and the auditory system.

- 3. Know the anatomy and physiology of subsystems of speech and swallowing
- 4. Obtain anatomy and physiology of external and middle ear
- 5. Gain knowledge about anatomy and physiology of cochlea, its innervations, electrical potentials and balancing mechanisms.

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1	Н	Н	Н	Н		H		L.		M	L	M	L	
CO2	Н	Н	Н	Н						M.	M	M	L	
CO3	Н	H	Н	H	M	M		L		M		М	L	
CO4	H	Н	Н	H		Н				М	L	M	L	
CO5	H	Н	Н	Н		H		L		M		M	L	

Clinical Psychology

	ster I SC03	Hours of Instruction/week: 4 No. of Credits: 3	
Obje	ectives: After completing this course, the student	will be able	
•	To understand the scope of clinical psychology a speech and hearing concept of normality, abnormal abnormal behavior cognitive, motor, emotional a Theories of learning and therapy techniques base	and its significance for mality and classification of and social development	
٠	Neuropsychological assessment and rehabilitation europsychology in the field of speech and heari	on application of	
Unit	I Introduction to Psychology		10
•	Introduction to psychology: definition, history Scope of psychology	and schools of psychology	12
•	Meaning and definition of clinical psychology		
•	Historical development, modern clinical psycho-	ology	
•	Significance of clinical psychology in health so	riences	
•	Role of clinical psychology in speech and heari	ing '	
•	Concept of normality		
•	Concept of abnormality		
	Models of mental disorders: biological, psycholar Assessment procedures in clinical psychological.	logical social models	
o inte			12
	Methods in clinical psychology: case history, conservation, definition and types of psychological desired in the conservation of the conservation	lmical interviewing, clinical cal testing	
•	Assessment of cognitive functions		
•	Adaptive functions,		
•	Personality		
•	Behavioral assessment		
	Classification of abnormal behavior		
	History, need & rationale of classification		
	Current classificatory system: DSM, ICD		
Unit I	III Development psychology		12
•	Child and developmental psychology: meaning,	definition and scope	14
•	Meaning of growth, development & maturation		
•	Principles of child development		
•	Motor development: general principals of moto	τ development	
•	Stages in motor development: early motor development during later childhood and adolescence, decline	opment, motor development with age	
•	Cognitive development: growth from early child Piaget's theory of cognitive development Emotional development	lhood to adolescence	

Unit IV Principles of learning and behavioral modification 12 Learning: meaning, definition and characteristics Theories of learning: introduction Pavlov's classical conditioning: experiments and principles Skinner's operant conditioning: experiments and principles Therapeutic techniques based on learning principles Skill behavior techniques Problem behavior techniques Unit V Neuropsychology and its relevance to study of speech 12 Neuropsychology: introduction and definition Neuropsychological assessment Neuropsychological rehabilitation Application of neuropsychology in the field of speech and hearing · Counselling: introduction and definition Types of counselling: directive and non-directive Characteristics of a good counsellor

Recommended Books:

- 1. Morgon C.T., King R.A., Robinson N.M. Introduction to Psychology. Tata McGraw Hill Publishing Co.
- 2. Anastasi, A. (1999). Psychological testing, London: Freeman
- 3. Baura, M (2004). Human Development and Psychlogy, Rehabiliation Council of India, New Delhi. ISBN: 81-7391-868-6
- 4. Coleman J.C. Abnormal Psychology and Modern Life, Taraporevala Sons & Co.
- Gregory, R.J. (2000). Neuropsychological and geriatric assessment in Psychological Testing: History, Principles, and Applications (3rd ed.). New York: Allyn & Bacon.
- 6. Hurlock, E.B. (1981). Child development. (VI Ed.). Mc Graw Hill International Book Co.
- 7. Kline, P. (1993). The Handbook of Psychological Testing. Routledge
- 8. Lezak, M., Loring, D.W., and Hannay, H.J. (2004). Neuropsychological Assessment. Fourth Edition. New York: Oxford University Press
- 9. Siegal M.G. (Ed). (1987). Psychological Testing from Early Childhood Through Adolescence. International Universities Press

Course Outcomes: On the successful completion of the course, students will be able to

 Acquire the knowledge on the scope, history and role of psychology in speech and hearing

Total Hours 60

- 2. Understand the assessment procedures (DSM, ICD), different types of psychological testings and current classificatory system.
- 3. Gain Knowledge about psychology in cognitive, emotional and social development.
- 4. Obtain Therapeutic techniques based on learning and behavior
- 5. To know about Neuro psychological assessments and its managements

CO / PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O 2	PS O3
CO 1	Н		L	L	L	L	L	M				Н	M	M
CO2	Н	М	Н	M	M	Н	M	Н	M		M	Н	Н	M
CO3	Н		Н		Н	Н		H	Ĺ	M	L	Н	Н	L
CO4	H	L	Н	H	H	Н	M	H	L -			H	Н	M
CO5	M	M	Н	Н	Н	Н	H	Н	L			Н	Н	M

	Linguistics and Phonetics	
Semes 22BAS		
Objec	tives: After completing this course, the student will be able	
	To understand different branches and aspects of linguistics characteristics and functions of language	
	Fo understand different branches of phonetics, applied linguistics, and phonology morphology, syntax, semantics, pragmatics	
	Fo understand acquisition of language and factors affecting it pi/multilingualism and related issues	
Unit I	Linguistics	12
•	Introduction to linguistics and different branches of linguistics: applied linguistics, sociolinguistics, psycholinguistics, metalinguistics, neurolinguistics and clinical linguistics	
•	Language characteristics and functions, difference between animal communication systems and human language	
•	Morphology concepts of morph, allomorph, morpheme, bound free and compound forms, roots etc.	
•	Processes of word formation, content and function words	
•	Endocentric and exocentric constructions, form classes, grammatical categories	
•	Inflection and derivation, paradigmatic and syntagmatic relationship	
•	Principles and practices of morphemic analysis	
•	Langue versus parole	
Timie T	Competence vs. performance I Phonetics and Phonology	12
•	Introduction to phonetics	12
•	Articulatory, acoustic, auditory and experimental phonetics – an introduction	
•	Articulatory classification of sounds – segmental and supra-segmental	
	Classification description and recognition of vowels and consonants	
•	Pathological aspects of speech sound production Transcription systems with special emphasis on IPA.	
•	Transcription of samples of normal and disordered speech	
•	Introduction to phonology, classification of speech sounds on the basis of distinctive features and phonotactics	
•	Application of distinctive feature theory to speech pathology and speech therapy, phonotactics, phonotactic patterns of English and Indian languages	
•	Phonemic analysis – Principles and practices; their practical implications for speech pathologists	

	haplology, epenthesis, spoonerism, vowel harmony, nasalization, neutralization	
Unit l	III Morphology, syntax, semantics and applied linguistics	12
•	Morphology - concepts of morph, allomorph, morpheme, roots, compound	14
	forms - endocentric and exocentric constructions, free and bound	
	morphemes, inflection and derivation, principles and practices of	
	morphemic analysis	
•	Syntax - different methods of syntactic analysis IC analysis, phrase	
	structure, grammar, transformational generative grammar Introduction to the major types of transformations	
•	Sentence types, notions about competence versus performance	
•	Deep structure versus surface structure	
•	Acceptability versus grammaticality language versus parole etc.	
•	A brief introduction to semantics – semantic feature theory pragmatics	
•	Processes of word formation, content and function words, form classes, grammatical categories	
•	Syntax - concepts of phrases and clauses, sentence and its types	
•	Different methods of syntactic analysis – Immediate constituent analysis	
	Phrase structure, grammar, transformational generative grammar—deep	
	structure versus surface structure, acceptability versus grammaticality.	
	introduction to the major types of transformations	
•	Usefulness of morphemic and syntactic analysis in planning speech and language therapy	
•	A brief introduction to semantics, semantic relations, semantic feature theory	
•	A brief introduction to pragmatics and discourse.	
Unit I	V Language Acquisition	12
•	Issues in first language acquisition	
•	Pre-linguistic stages, linguistic stages	
•	Acquisition of phonology, morphology, syntax, semantics, and pragmatics	
•	Language and cognition	
•	A brief introduction to theories and models of language acquisition	
•	Biological maturation theory, linguistic theory, behavioral theory	
	information processing theory, social interaction theory	
•	An integrated approach to theories communicative competence and its development	
•	Applied linguistics with special reference to communication disorders	
•	Usefulness of morphemic and syntactic analysis in planning speech and language therapy	
	Bi/multilingualism	10
	Introduction to the language families of the world and India	12
	was and indiguage lamines of the world and India	

Issues related to second language acquisition & factors influencing it Inter-language theory, language transfer and linguistic interference

- · Differences between first and second language acquisition/learning
- Bilingualism/Multilingualism
- Meta phonology
- Writing systems types of writing
- History of writing systems Indian writing systems

Total Hours 60

Recommended Books:

- 1. Ball & Martin (1995). Phonetics for speech pathology. Delhi: AITBS Publishes, India.
- 2. Ball, Rahilly & Tench (1996). The phonetic transcription of disorderedspeech. San
- 3. Diego: Singular Publishing Group Inc.
- 4. Clark and Yallop (1999). An introduction to phonetics and phonology. Oxford: Blackwell Publishes Inc.
- 5. Karanth, P (2003). Cross-Linguistic study of Acquired Reading Disorders. Sage Publications, New Delhi. ISBN: 0-306-48319-X
- Ladefoged, P. (1982). A course in phonetics. New York: Harcourt Brace Jovanorich Inc.
- Shriberg & Kent (1982). Clinical phonetics. New York: John Wiley & Sons.

Course Outcomes: On the successful completion of the course, students will be able to

- 1. Understand the basic concepts of linguistics and its branches
- 2. Study about the components of language and its segments
- 3. Know about Transcription in of normal and abnormal speech in IPA
- 4. Knowledge about Language acquisition and theories based on it.
- 5. Acquire knowledge about Language families around the world and the factors affecting language

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1	Н	M	L	L			M	M	L		L	M	Ŀ	
CO2	Н	М	M	L	L	M	M	M				H	M	
CO3	M	М	M	М		L	L	M	Н		M	Н	Н	M
CO4	M	M	L	M	M	M	L	M	M		М	Н	M	M
CO5	Н	M	M		M	M		М	М		M	Н	М	M

_	Electronics and Acoustics	
	nester I Hou	rs of Instruction/week: 4
22BA	ASC05	No. of Credits: 3
01.		
Objec	ectives: After completing this course, the student will	be able
•	 To understand the concept and types of power suj instruments 	oply for biomedical
•	 Basic aspects of digital signal processing theoretic required for audiologists 	cal basis of acoustics
•	 Functioning of computers and computing systems 	3
Unit I	I Electronic components and power supply	
•	Resistors, capacitors, inductors	13
•	Transformers and potentiometers	
•	Semiconductor diodes and transistors	
•	Light emitting devices, seven segment displays Li	anid crystal displays
•	junction transistors and thyristors	ct Transistors, Uni-
•	Introduction to linear and digital integrated circuits	
•	Block diagram of a DC power supply	
•	Linear regulated power supplies, line regulation an specifications of a DC power supply unit, Switched	d load regulation,
	AC power supply, stabilizers, Uninterrupted Power	Mode Power Supply
	Basic electronic concepts such as Polarity, Groundi	Supply, and inverters
		.ng 12
Unit II	II Introduction to Acoustics	12
•	Calibrations and their characteristics	
•	Sound-generation and propagation	
	Characteristics of sound	
•	Amplitude, Frequency and phase of pure tones	
• .	Amplitude, Frequency and phase of complex tones	FFT and spectrum
	reactorism between time waveform. FFT and impu	lea rachanca)
•	Reflection and absorption, acoustic impedance reve	erberation
• 1	impedance and admittance	-
•]	Electro-mechano-acoustic transformers	
Unit III	II Acoustical treatment, transducers and basis of	computers 12
· 1	introduction to audiometric rooms	12
• /	Absorption coefficient, Sabine's formula	
• 1	Materials for construction of audiometric rooms	
• <u>I</u>	Lighting, grounding and other miscellaneous issues r	
• E	Evaluation of efficiency of sound proofing in the aud	diometric rooms

•	Microphones, loudspeakers - types and ninction	
	Fundamentals of digital electronics, binary number system, Hex code, bit,	
	byte, logic gates, counters, flip-flops etc.	
•	Introduction to computers	
•	Operating systems, hard ware, software, memory devices and other peripherals, care and preventive maintenance of computers	
Unit T	V Digital signal processing	12
•	Digital signal processing -introduction and need	
	Analog to digital converters, sampling and quantization	
	Fundamentals of digital filtering	
	Infinite impulse response and finite impulse response filters	
•	Time domain methods of speech processing	
•	Frequency domain methods of speech processing	
•	Linear predictive analysis of speech signals	
•	Digital coding of speech signals	
•	Automatic speech recognition	
•	Speech synthesis	
Unit V	Instrumentation in speech and hearing	12
	Introduction to electronic instrumentation in speech and hearing	
•	Electrodes, filters and preamplifiers	
٠	Principle of operations, block diagram, calibration, maintenance and troubleshooting of audiometers, immittance meters, oto-acoustic emissions, hearing aids, evoked potential system, speech and voice analyses systems, artificial larynx, electroglottograph	
	Total Hours	60
***	and d Darker	

Recommended Books:

Amplifiers

- 1. Haughton, P., & Haughton, P. M. (2002). Acoustics for Audiologists (1st edition.). San Diego, Calif. Emerald Group Publishing Limited.
- 2. Moser, P. (2015). Electronics and Instrumentation for Audiologists. Psychology Press.
- 3. Moser, P. J. (2013). Electronics and Instrumentation for Audiologists. Psychology
- Press. Rout, N and Rajendran, S. (2014). Hearing aid trouble shooting and Maintenance, Published by National Institute for Empowerment of Persons with Multiple Disabilities, Chennai. Freely downloadable from http://niepmd.tn.nic.in/publication.php. ISBN 978-81-928032-1-0.
- 5. Speaks, C. E. (1999). Introduction To Sound: Acoustics for the Hearing and Speech Sciences (3 edition.). San Diego: Cengage Learning.
- Villchur, E. (1999). Acoustics for Audiologists (1 edition.). San Diego, Calif: Delmar Cengage Learning.

Course Outcomes: On the successful completion of the course, students will be able to

1. Understand electronic components and power supplies

2. To know about sound generation, propagation, reflection, absorption and reverberation.

3. To acquire knowledge about construction of audiometric rooms and basis of computers

4. To understand difference in Analog to digital and digital to analog and digital signal processing.

5. To gain knowledge about Handling instruments in speech and hearing

CO/ PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O2	PS O3
CO1	M		L		L							M		
CO2	M		L	L	M					M			M	M
CO3	M		Н				M	M		M		M	H	-
CO4	M	L										L	L	M
CO5	Н		H	Н	M	M	M	M		M		M	M	M

Research Methods and Statistics

	research methods and stansaes	
Semest		
22BAS	No. of Credits: 3	
_	tives: After completing this course, the student will be able	
	To understand the basic concept of research in the field of audiology and	
	peech-language pathology.	
	To design and execution of research ethical guidelines for conducting	
Г	esearch. Part A-Research Methods	
	1 att A-Rocai cu Methous	
Unit I	Introduction to research methods	9
•	Meaning and purpose of research: meaning	
	Need for research in audiology and speech-language pathology	
•	Funds/grants for research	
•	Steps in research: identification, selection	
•	Formulation of research questions: aims, objectives, statement of problem, hypothesis	
•	Types of variables; types of sampling procedures (random and non-random)	
•	Types/ methods of data collection and their advantages and disadvantages Reliability and validity (internal and external validity)	
Unit II	I Research design in audiology and speech-language pathology	9
•	Types of research: survey, ex-post facto research, normative research,	
	standard-group comparison	
•	Experimental and quasi experimental research: group design & single subject design	
•	Internal and external validity of research	
•	Between groups vs. repeated measures design	
•	Documentation of research: scientific report writing, different formats or	
	styles (APA, AMA and MLA),	
•	Ethics of research	
	Part B: Statistics	
Unit I	II Introduction to statistics and data collection	9
•	Application of statistics in the field of Audiology and speech-language pathology.	
•	Scales of measurement: nominal, ordinal, interval, ratio	
•	Classification of data: class intervals, continuous and discrete measurement	
•	Normal distribution: general properties of normal distribution, theory of probability, area under normal probability curve	

Variants from the normal distribution: skewness and kurtosis

• Measure of central tendency: mean, median, mode

Measures of variability: range, deviation (average and standard deviation), variance

Unit IV Statistics and research designs

- Choosing statistics for different research designs
- Correlational techniques: Pearson's Product Moment Correlation Coefficient;
- Spearman's Rank order correlation coefficient
- Statistical inference: concept of standard error and its use; the significance
 of statistical measures; testing the significance of difference between two
 means z-test, t-test; analysis of variance, post hoc tests,
- Non-parametric tests: Chi-square test, Wilcoxon test, Mann-Whitney U test,
- Reliability and validity of test scores: reliability and validity, Item analysis
- Analysis of qualitative data
- Software for statistical analysis

Unit V Epidemiology

- Basic epidemiologic concepts and principles
- Epidemiologic data sources and measurements
- Epidemiologic methods questionnaire survey, screening, personal survey, testing
- Media their advantages and disadvantages
- Incidence and prevalence of hearing, speech, language disorders as per different census (NSSO, WHO)

Total Hours 45

9

Recommended Books:

- Dane F. C. (2011). Sampling and Measurement. In Evaluating research: Methodology for people who need to read research. New Delhi: SAGE publication.
- Field, A. (n.d.). Discovering Statistics Using IBM SPSS (4th ed.). SAGE Publications.
- 3. Hegde M. N. (2010). A course book on Scientific and professional writing for speech language pathology (4thEdition), Singapore: Delmar publication.
- 4. Hegde, M. N. (2003). Clinical research in communicative disorders: Principles and strategies. (3rd Edition), Austin: Pro-ed
- Hesse-Biber, S. N. & Leavy, P. (2011). The Ethics of social research. In The Practice of qualitative research. (2nd Edition), New Delhi: SAGE publication.
- Jekel, F. J., Katz, L.D., & Elmore, G.J (2001). Basic Epidemiologic Concepts and Principles in epidemiology, Biostatistics, and Preventive Medicine (2nd Edition). Pennsylvian: Saunders
- 7. Meline, T. (2010). A research primer for communication sciences and disorders. Singapore: Pearson publication.

Course Outcomes: On the successful completion of the course, students will be able to

1. Understand the steps in research.

 Acquire knowledge about types of research and research designs in Audiology and Speech Language pathology

3. To know about Statistics- its introduction and application in the field of audiology and speech language pathology

4. Acquire knowledge about Types of statistical measures and choosing a correct statistics method for the research design

5. To obtain knowledge about Introduction to epidemiology, concepts, methods and incidence and prevalence of disorders in speech and hearing.

CO / PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O 2	PS O 3
CO1	Н		Н	L		L		M			Н	Н	M	
CO2	Н	L	Н			Н	M		L	M	M		Н	
CO3	Н		M			Н	L			M	Н		Н	
CO4	Н	L	Н		М	Н		M			Н	M	L	
CO5	H		M	Н		Н	M	M			Н	Н	M	

Clinical Observation (Speech-Language Pathology)

Semester I 22BASC07

Hours of Instruction/week: 3

No of Credits: 2

Objectives: After completing this course, the student will be able

- To record, observe and analyze normal aspects of language, speech, voice and fluency variations from typical individuals of different age groups
- To understand speech language stimulation techniques and other therapy techniques of various disorders

Observation:

- Observe normal aspects of speech and language, and analyze perceptually variations in voice, articulation and fluency in different recorded speech samples of typical individuals at different age groups (children, adults and older adults) and sex.
- Observe stress, rhythm and intonation and variations in rate of speech and analyze
 perceptually variations in prosody in different recorded samples of typical individuals at
 different age groups (children, adults and older adults) and sex.
- Observe Oral mechanism examination on 5 normal children and 5 normal adults.
- Prepare a diagnostic and therapy kit.
- Observe speech language stimulation techniques and other therapy techniques for various speech disorders.
- Prepare a report on the available clinical facilities and clinical activities of the institute.

Total hours: 45

Course Outcomes: On the successful completion of the course, students will be able to

- Analyze the normal aspects of language, speech, voice and fluency variations from typical individuals of different age groups
- 2. Understand speech language stimulation techniques and other therapy techniques of various disorders
- 3. To prepare diagnostic and therapy kit
- 4. To perform oral mechanism examination for children and adults
- 5. To prepare report on available clinical facilities and activities of the institute.

CO / PO	PO 1	PO 2	PO 3	PO.	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O2	PS O3
CO1	Н	L	Н	Н	Н	H	Н	М	Н		L	Н		
CO2	H	L	Н	Н	Н	Н	Н	M	Н		L	Н		
CO3	H	L	Н	Н	Н	Н	Н	M	Н		L	Н		
CO4	Н	Ļ	Н	Н	Н	Н	H	M	Н		L	Н		
CO5	H	М	Н	Н	Н	Н	н	M	н		L	Н		

Clinical Observation (Audiology)

Semester I 22BASC08 Hours of Instruction/week: 3

No of Credits: 2

Objectives: After completing this course, the student will be able

- To understand case history, tuning fork test, pure tone audiometry and speech audiometry of adults and children with normal and disabled individuals
- To understand and perform otoscopic examination

Observation:

- Observe the case history on 5 adults with hearing problem and correlate the information from case history to results of pure tone audiometry.
- Observe the case history on 5 children with hearing problem and correlate the information from case history to results of pure tone audiometry.
- Observe different tuning fork tests on 5 simulated conductive hearing loss individuals.
- Observe different tuning fork tests on 5 simulated sensori neural hearing loss individuals.
- Observe pure tone Audiometry on 10 normal hearing individuals.
- Observe speech Audiometry on 10 normal hearing individuals.
- Observe daily listening checks and subjective calibrations 20 times and observe objective calibration once
- Perform otoscopy and draw the tympanic membrane of 10 healthy normal individuals

Total hours 45

Course Outcomes: On the successful completion of the course, students will be able to

- 1. To understand case history for adults and children with normal and disabled individuals
- 2. To perform tuning for test
- 3. To understand pure tone audiometry and speech audiometry for adults and children with normal and disabled individuals
- 4. To understand and perform daily listening checks
- 5. To understand and perform otoscopic examinations.

CO / PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O 2	PS O3
CO1	M		Н	н	Н	Н	Н	L	М		L	Н		
CO2	М		Н	Н	Н	Н	Н	L	М		L	Н		
CO3	М		Н	Н	Н	Н	Н	L	М		L	Н		
CO4	М		Н	Н	H	Н	Н	L	М		L	Н		
CO5	М		Н	H	Н	Н	Н	Н	М		L	Н		

Discipline Specific Elective (DSE -I) Course Digital Health

Digital Health	
Semester I 22BASD01 Objectives: Hours of Instruction/week:2+ No. of Credits:	
 To know about the basics of Digital Health. To know about AI use in the healthcare systems. To know about 3D products in healthcare system. 	
Unit 1: Digital Health	
Introduction of Digital Health – Vision - Benefits of Digital Health – Digital Health Initiatives – National Digital Health Mission – Ecosystem – Architecture – Applications of Digital Health -Learning Health System – Characteristics of Learning Health Care System	1:
Unit 2: Digital Health Care Products	15
Categories of Digital Health Products and Services - Wearable Fitness Tracker Smart health watches - Wearable ECG Monitors - Wearable Blood Pressure Monitor - Wearable Biosensor mHealth Telehealth Telemedicine Difference between mHealth vs telehealth Difference between Telehealth vs Telemedicine	
Unit 3: ML and DL in Healthcare	15
About machine Learning - Benefits of ML in Healthcare - Cognitive Computing - Trend of ML in Medical Health - Applications of ML in Pharma and Medicine - Applications of ML in Healthcare - Big Data - Benefits of Big Data in Healthcare - Features of Big Data in Healthcare - Methods for analysing Big Data in Healthcare - Applications of Big Data in Healthcare - Introduction on Deep Learning - Deep Learning Algorithms - Deep Learning in Clinical Image Analysis.	
Unit 4: Artificial Intelligence in Healthcare	15
AI-assisted Robotic surgery – Virtual nursing assistant – Aid Clinical judgment or diagnosis – Administrative task – Image Analysis–Develop Medicines – Analyses Unstructured Data –Forecast Kidney Disease – Contributes to Cancer Research and Treatment – Supports Health Equity – AI in Neuroscience – AI in Thoracic Surgery – AI in Cardiac Management.	13
Unit 5: Robotics &3D Printing in Healthcare	15
Role of Robots in Healthcare – Benefits of robots in Healthcare - Types of Robots in	13

Healthcare - Surgical Robots - Exoskeletons - Care Robots - Hospital Robots - 3D Printing for Healthcare - Preoperative planning - Customized Surgery - Designing medical devices

Improving surgical instruments – Creating Protheses – 3D Printed implants – 3D Digital
 Dentistry – Streamlining drug administration

Total Hours 75

Reference Books:

- Dac-Nhuong Le, Chung Van Le, Jolanda G. Tromp, GiaNhu Nguyen, (2018).
 "Emerging Technologies for Health and Medicine Virtual Reality, Augmented Reality, Artificial Intelligence, Internet of Things, Robotics, Industry 4.0", ISBN 978-1-119-50981-3
- Thomas-Vazquez, Daniel & Singh, Deepti&Hatamleh, Muhanad&Tripathi, Anuj&Vishnoi, Tanushree& Bhat, Sumrita& Thompson, Andrew & Jason, Jeremy & Kim, Keekyoung&Gleadall, Andy & Ruiz, Laura. (2019). "3D Printing in Medicine and Surgery", Woodhead Publishing Series in Medicine, ISBN 978-0-85709-233-5.

Website links:

- 1. https://www.ncbi.nlm.nih.gov/books/NBK470260/
- 2. https://www.insiderintelligence.com/insights/wearable-technology-healthcare-medical-devices/
- 3. https://www.singlecare.com/blog/telehealth-vs-telemedicine/
- 4. https://www.mobihealthnews.com/news/contributed-top-10-use-cases-ai-healthcare
- 5. https://www.researchgate.net/publication/330724271 Big Data in Health Care A pplications and Challenges
- 6. https://www.mobihealthnews.com/news/contributed-top-8-healthcare-uses-3d-printing
- 7. https://amfg.ai/2019/08/30/3d-printing-in-healthcare-where-are-we-in-2019/

Course Outcome: On the successful completion of the course, students will be able to

- 1. Get familiar with Digital Health.
- 2. Understand the working nature of the Wearable Devices used in Digital Health.
- 3. Knowledge on Machine Learning techniques used in healthcare system.
- 4. Knowledge on AI embedded Healthcare system.
- 5. Get familiar with 3D Model Products and Robots in healthcare systems.

CO / PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O2	PS O3
CO1	M	M	H		Н	Н		M				M	Н	
CO2	M	M	H		Н	H		M				Н	Н	
CO3	M	Н	Н	Н	Н	Н	M	M		M		M	H	
C04	M	Н	H	Н	Н	Н	M	M		M		M	Н	
CO5	M	M	Н	Н	H	H		M		M		M	Н	

Neurology .

22BASC09	No of Credits: 3
Objectives: After completing this course, the student	will be able to understand
 Basic concepts, anatomy and physiology of n speech and hearing and neural organization – functions of various systems Neurosensory and neuromotor controls in spe mechanisms 	ervous system related to different structures and
 Basic principles and assessment procedures a 	nd management procedures
used in speech, language and hearing	
Unit I Anatomy and physiology of the nervous sys	
General introduction to basic neurological co Organization of the neurological system	ncepts
Organization of the neural system Control peripheral and systems are a system.	
 Central, peripheral and autonomic neural syst Neural structures - applied anatomy and physical 	
 Cranial nerves and those important for speed 	
balance	r, ranguage, nearing and
 Cerebral blood supply, nourishment and prot General principles of neural organization 	ection of the brain
 Transmission of information in neural system transmission, action potential, chemical transmisinhibitory potential &neuromuscular transmis Cerebral plasticity and development of neura 	mission, excitatory and
dominance	
Neurosensory organization of speech and hearing Neurosensory organization of speech and hea Central auditory nervous system Anatomy of oral sensation and oral sensory respectively.	ring
 Neuromotor control of speech The pyramidal, extra-pyramidal system, basa system Lower and upper motor neuron 	l ganglia and cerebellar
Alpha and gamma motor neurons	
 Sensory and motor examination, oral, periphe 	eral and other reflexes
 Swallowing mechanism and neural control 	
 Screening and bedside neurological examinate 	
Unit III Neural disorders associated with speech	and hearing disorders - I 12
Neural infections – meningitis, encephalitis	
 Developmental anomalies – spinal cord defect bulbia, Arnold chian malformations 	ts, syringomalacia and

- Hydrocephalus source and circulation of CSF, types and etiopathogenesis UMN lesions –spastic dysarthria LMN lesions –flaccid dysarthria Mixed lesions Extra pyramidal lesions – dyskinetic dysarthria Cerebellum and cerebellar pathway lesions – ataxic dysarthria
- Other diverse lesions and dysarthrias
- Unit IV Neural disorders associated with speech and hearing disorders II Cerebrovascular diseases – ischemic brain damage – hypoxic ischemic encephalopathy, cerebral infarction - intracranial hemorrhage intracranial, subarachnoid
 - Trauma to the CNS subdural hematoma, epidural hematoma, parenchymal brain damages
 - Demyelinating diseases multiple sclerosis, perivenous encephalomyelitis,
 - Degenerative, metabolic and nutritional disorders Alzheimer's disease, **Parkinsonism**
 - Metabolic, hereditary, acquired, neuronal storage disorders
 - Wilson's disease, Phenylketonuria
 - Nutritional Wernicke's encephalopathy, pellagra
 - Alcoholic cerebellar degeneration
 - Clinical-pathological methods and Neuro-imaging
 - Tumors of the CNS gliomas, embryonal tumors of meninges, metastasis, malignant tumors

Unit V Speech-language and swallowing disorders

- Central language mechanism and its disorders
- Developmental motor speech disorders cerebral palsy, muscular dystrophy
- Neurologic disorders with primitive reflexes, diagnosis and management
- Clinical neurological syndromes associated with speech and language disorders
- Childhood language disorders associated with neurologic disorders
- Swallowing associated with neurogenic disorders and assessing mastication and deglutition
- Agnosia and other conditions associated with speech and hearing disorders
- Cognitive disorders associated with neurologic disorders
- General management principles and options for childhood neurogenic speech, language and hearing disorders
- General management principles and options for adult neurogenic speech, language and hearing disorders

Total Hours 60

12

Recommended Books:

 Adams, R.D. &Sidman, R.L. (1968). Introduction to neuropathology. New Jersey: McGraw-Hill.

2. Bhatnagar, S.C. (2012). Neuroscience for the Study of Communicative Disorders. Lippincott, Williams & Wilkins

3. Garden, E. (1968). Fundamental of neurology, V Edn., Philadelphia: Sarenders Co.

4. Webb, W. G., & Adler, R. K. (2008). Neurology for the speech-language pathologist (5th Ed.). St. Louis, Mo: Mosby/Elsevier.

 Duffy, J. R. (2013). Motor Speech Disorders: Substrates, Differential Diagnosis, and Management (3rd Ed.). University of Michigan, Elsevier Mosby.

Course Outcomes: On the successful completion of the course, students will be able to

 Understand the basics of neuro anatomy and physiology, cranial nerves and blood supply

2. Know about Neuro sensory and neuro motor controls of speech and hearing

3. To acquire knowledge about neural disorders like infections, developmental anomalies, UMN, LMN lesions related to speech and hearing.

4. To know about cerebro vascular lesions, trauma, degenerative diseases, and metabolic disorders related to neural conditions.

 To obtain knowledge about central language acquisition, swallowing related neurogenic disorders.

CO / PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O 2	PS O3
CO1	M	L	Н	L	L	L	М	Н		M	M	Н	Н	L
CO2	Н		M	L	L	L	L	н	L	L	М	Н	Н	
CO3	Н	М	M	М	М		М	Н		L	L	Н	Н	L
CO4	Н	М	M	М		L		н			L	Н	M	
CO5	М	М	М	М	L	L	L	М	M	Н	М	М	L	

Speech-Language Pathology

Semester II	TY
22BASC10	Hours of Instruction/week: 4
	e disorders and basic concepts and tools
and language disorders	and intervention procedures for speech
disorders	
Unit I Basic concepts and methods of	liagnostics
* Introduction to Speech Language	Disorders 14
 Definition and descriptions of dela disability and handican 	ry, deviancy and disorders; impairment,
 Incidence and prevalence of speed Causes of speech and language dis 	Orders
Basic principles in assessment eve	lustion and annual 1
& & case history, i	nterview, self-reports, questionnaire
Diagnostic models - SLPM, Wepn Types of diagnoses	nan, Bloom and Lahev
diagnosis, diagnosis by treatment, diagnosis, provocative advantage/disadvantages	nosis, direct diagnosis, differential diagnosis by exclusion, team diagnosis, e diagnosis, tentative diagnosis
Characteristics of a diagnostic clini requirements for clinical set are	cian, Organization and basic
requirements for clinical set up and classification and ICF	team approach, DSM, ICD
Unit II: Basic concepts and methods of the	herapeutics 12
Basic concepts and terminologies in General principles of great little.	speech therapeutics
 General principles of speech and lar Speech therapy set-up 	nguage therapy
Individual and group therapy	
Procedures and types of farmers and types	
Procedures and types of for speech- Approaches to speech and learners.	language therapy
approaches	therapy - formal, informal and eclectic
 Planning for speech and language th activities 	
Importance of reinforcement princip language therapy types and schodul.	les and strategies in speech and
O O O O O O O O O O O O O O O O O O O	es of rewards and minishment
 AAC and other nonverbal methods of 	f theren.

 Causes of speech disorders Overview of assessment procedures for voice disorders; articulation and phonological disorders; and fluency disorders Overview of management procedures for voice disorders; articulation and phonological disorders; and fluency disorders Early identification and prevention of speech disorders Basic concepts in assessment and management of swallowing disorders Unit IV Overview of basic assessment and management of language disorders Types, characteristics and classification of language disorders Overview of assessment procedures for child language disorders; adult language disorders; and neurogenic language disorders Overview of management procedures for child language disorders; adult language disorders; and neurogenic language disorders Early identification and prevention of language disorders Issues related to bi-/multilingualism Unit V Other issues in practice as a speech - language pathologist Professional code of conduct - social, cultural and other ethical issues Scope of practice - different set ups and prerequisites Documentation of diagnostic, therapeutic and referral reports Counselling, guidance, facilitation of parent participation and transfer of skills Evaluation of therapy outcome and follow up Evidence based practice Community based rehabilitation Role of fitinerant speech therapist, Anganwadis, resource teachers etc. PWD act, National Trust, Consumer protection Act, noise pollution Act and other public laws, RCI, ISHA and other organizations controlling the field Facilities and concessions available for speech and hearing disabled 	Unit III Overview of basic assessment and management of speech disorders	12
 Phonological disorders; and fluency disorders Overview of management procedures for voice disorders; articulation and phonological disorders; and fluency disorders Early identification and prevention of speech disorders Basic concepts in assessment and management of swallowing disorders Unit IV Overview of basic assessment and management of language disorders Types, characteristics and classification of language disorders Overview of assessment procedures for child language disorders; adult language disorders; and neurogenic language disorders Overview of management procedures for child language disorders; adult language disorders; and neurogenic language disorders Early identification and prevention of language disorders Issues related to bi-/multilingualism Unit V Other issues in practice as a speech - language pathologist Professional code of conduct - social, cultural and other ethical issues Scope of practice - different set ups and prerequisites Documentation of diagnostic, therapeutic and referral reports Counselling, guidance, facilitation of parent participation and transfer of skills Evaluation of therapy outcome and follow up Evidence based practice Community based rehabilitation Role of itinerant speech therapist, Anganwadis, resource teachers etc. PWD act, National Trust, Consumer protection Act, noise pollution Act and other public laws, RCI, ISHA and other organizations controlling the field Facilities and concessions available for speech and hearing disabled 	Causes of speech disorders	
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	and other public laws, RCI, ISHA and other organizations controlling the	
	 Facilities and concessions available for speech and hearing disabled 	
Total Hours 60	Total Hours	60

Recommended Books:

- Owens. Jr, Kimberly, A. Metz, F.E. (2014). 5th Ed. Introduction to Communication Disorders: A life span based Perspective. Pearson Communication Science and Disorders Series.
- 2. Hegde, M. N., & Davis, D. (2005). Clinical methods and practicum in speech language pathology (4th Ed.). Australia; Clifton Park, NY: Thomson Delmar Learning.
- 3. Shipley, K. G., & Roseberry-McKibbin, C. (2006). Interviewing and counselling in communicative disorders: Principles and procedures (3rd ed.). Austin, Tex: Pro-Ed.

- Brookshire, R. H. (2003). Introduction to neurogenic communication disorders (6thed.). St. Louis, Mo: Mosby.
- 5. Hulit, L.M., Marle. R., Kathleen, R. H., & Fowey (2010). Born to Talk. Pearson Communication Science and Disorders Series 5th Ed.
- Roth, F. P., & Worthington, C. K. (2005). Treatment resource manual for speech language pathology (3rd ed.). Australia; Clifton Park, NY: Thomson Delmar Learning.
- Shipley, K. G., & McAfee, J. G. (2004). Assessment in speech-language pathology: A resource manual (3rd ed.). Australia; Clifton Park, NY: Delmar Learning.
- 8. Ysseldyke, J. E., & Algozzine, R. (2006). Teaching students with communication disorders: A practical guide for every teacher. Thousand Oaks, Calif.: Corwin Press.

- Acquire knowledge about the speech and language disorders and its causes, its tools to diagnosis.
- 2. To know about the principles of therapy and the procedures and types of therapyfor speech and language disorders
- 3. To know about the cause, assessment and management of the voice, fluencyand articulation disorders
- 4. To know about the cause, assessment and management of the child language, adult language and neurogenic language disorders
- Gain knowledge about the professional ethics, scope of speech language pathologist

CO/ PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O 2	PS O3
COI	Н	Н	Н	Н	Н	М	М	M		H	Μ.	26		
CO2	TT							-11		11	M	M	H	H
	H	H	H	H	H	M	M	M		Н	M	М		
CO3	Н									11	141	M	H	H
	п	H	H	H	H	M	M	M		H	M	М	77	
CO4	н	77				_	-			^*	147	IVI	H	H
	п	H	H	H	H	M	M	M		H	M	M	TT.	
CO5	н	TT	7.7				-				TAK	174	H	H
	п	Н	H	H	H	M	M	M	- 1	H	M	M	Н	Н

Audiology

Semester II	Hours of Instruction/week: 4
22BASC11	No of Credits: 3
Objectives: After completing this course, the stud	lent will be able to
Take case history, administer the tuning for	ark tests and interpret the results
Administer pure tone and speech audiome population and	try including masking on clinical
 Carryout subjective calibration and daily l 	istening checks of the
audiometer and get adequate theoretical in understand concepts involved in objective	formation necessary to calibration
Unit I Differential sensitivity	12
 Concept of differential sensitivity, just no 	ticeable difference
Weber's fraction	
Intensity discrimination	
Frequency discrimination	
 Duration discrimination and temporal reso 	olution
 Applications of jnd's 	
 Magnitude estimation and production 	
 Loudness – equal loudness level contours 	and its application
 Loudness scales - sone, phone, Steven's p 	ower law
 Pitch- scales of pitch 	
Unit II: Case history and tuning fork tests	12
 Need for case history 	
 Basics of history taking 	
 Essential factors to be included in case hi 	story for adults
 Essential factors to be included in case hi 	story for children
 Interpretation of case history 	
 Audiological evaluation – rationale and r 	purpose
 Principles, procedure, interpretation, adv. Rinne and 	antages and disadvantages of
 Schwabach tuning fork test 	
 Principles, procedure, interpretation, adv Weber and 	antages and disadvantages of
Bing tuning fork test	
 Audiometric version of Weber and Bing 	test 12
Unit III Pure tone audiometry	
Classification of audiometers, Parts of an specifications of transducers used (earph)	ones, bone vibrators, loud
speakers)Audiogram- concept and symbols used	

Factor of the should estimation	
- actors affecting air conduction in	
Dotte Condition threeholds	
Permissible noise levels in the audiometric room Unit IV Speech audiometric room	
Speech andtolligity	
Importance and nurpose	12
Different types of stimuli used in an analysis	
Factors affecting speech audiometry	
BC speech audiometry	
BC speech audiometry – procedure and its application Test materials available in a procedure.	
Test materials available in various languages Unit V Clinical masking and its application	
Unit V Clinical masking and instrumental calibration • Definition and different to the control of the control	
The state of the s	12
- 41 POSE GILL TALIANNIA OF Clinical - 1 -	
Different types of sliming amplaced:	
 Interaural attenuation and factors affecting interaural attenuation When to mask and how much to mask. 	
When to mask and how much to mask – importance of adequate noise	
levels adequate noise	
Different procedures for masking	
Wasking for speech audiometer	
• Calibration definition and purpose	
Daily listening checks and subjective at the	
TOTAL TO CONTROL OF THE TAXABLE AND A CONTROL OF	
of the cantilation of hone conduction to	
Frequency calibration	
Recommended B. 1	60
Recommended Books:	00
1. Durrant, J. D., &Feth, L. L. (2012). Hearing Sciences: A Foundational	

Clinical method of threshold estimation

L. (2012). Hearing Sciences: A Foundational Approach (ledition.). Boston: Pearson.

2. Emanuel, D. C., & Letowski, T. (2008). Hearing Science (1 edition.). Philadelphia: Lippincott Williams and Wilkins.

3. Gelfand, S. A. (2009). Hearing: An Introduction to Psychological and Physiological Acoustics (5 edition.). London: CRC Press.

4. Kaplan, H., Gladstone, V. S., & Lloyd, L. L. (1993). Audiometric Interpretation: A Manual of Basic Audiometry (2 edition.). Boston:

5. Katz, J. (2014). Handbook of Clinical Audiology (7th International edition edition.) Lippincott Williams and Wilkins.

6. Martin, F. N., & Clark, J. G. (2014). Introduction to Audiology. Boston:

 Silman, S., & Silverman, C. A. (1997). Auditory Diagnosis: Principles and Applications (Reissue edition.). San Diego: Singular Publishing Group

Course outcomes: On the successful completion of the course, students will be able to

1. To understand the basic concepts of differential sensitivity, discriminations in intensity and speech

 To obtain knowledge about the need, essential factors to be included in the case history and tuning fork test procedures and interpretations in Rinne, Weber, Bing, Schwabach

3. To know about the audiometer, its parts, characteristics, procedures and factors affecting the threshold estimation

4. To know about the purpose and importance of the speech audiometer, its procedures, applications and factors affecting speech audiometry

 Acquire knowledge about the purpose, rationale, type, procedure for masking. And also about the subjective and objective calibration, its purpose.

CO / PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O 2	PS O 3
CO1	Н	M	Н	М	L	M	Н	М		L	M	M	Н	H
CO2	Н	M	Н	М	L	M	Н	M		L	M	M	H	H
CO3	Н	М	H	М	M	М	Н	М		L	M	М	Н	Н
CO4	Н	M	Н	M	М	М	Н	М		L	M	M	Н	Н
CO5	Н	M	Н	M	М	M	Н	М		L	М	М	Н	H

Practicals-I (Speech-Language Pathology)

Semester II 22BASC12

Hours of Instruction/week: 8 No of Credits: 4

Objectives: After completing this course, the student will be able to

1. To demonstrate normal aspect of speech, language, voice, fluency variations of typical individuals of different age groups

2. To understand transcription using IPA

3. To administer standardized test for assessment

PRACTICAL

- Demonstrate normal aspects of speech and analyze perceptually variations in voice, articulation and fluency in different recorded speech samples of typical individuals at different age groups (children, adults and older adults) and sex.
- Demonstrate normal aspects of language and analyze perceptually variations in language in different recorded samples of typical individuals at different age groups (children, adults and older adults) and sex.
- Demonstrate stress, rhythm and intonation and variations in rate of speech and analyze perceptually variations in prosody in different recorded samples of typical individuals at different age groups (children, adults and older adults) and sex.
- Use IPA to transcribe spoken words. Record a standard passage, count number of syllables and words, identify syllable structure, syntactic structures in the passage.
- Oral mechanism examination on 5 normal children and 5 normal adults. Prepare a chart and show the developmental stages of speech and language behavior.
- Administer standardized tests for assessment of delayed speech and language development such as REEL, SECS, LAT, 3DLAT, ALD each on any 2 children.
- Study the available normative data (Indian/Western) of speech such as respiratory, phonatory, resonatory and articulatory parameters.
- Measure the following in 5 normal subjects: (a) Habitual frequency (b) Frequency range (c) Intensity (d) Intensity range (e) Phonation duration (f) rate of speech (g) Alternate Motion Rates and Sequential Motion Rates (h) s/z ratio.
- Study the available normative data (Indian/Western) of language such as phonology, semantics, syntax, morphology and pragmatic measures.
- Perceptual analysis of speech and language parameters in normal (2 children and 2 adults and persons with speech disorders (3 adults + 3 children).
- Prepare a model diagnostic report of a patient with speech and language disorder.
- Prepare a diagnostic and therapy kit.
- Make a list of speech language stimulation techniques and other therapy techniques for various speech disorders.
- Familiarize with the sources for referral and parent counseling procedures.
- Prepare a report on the available audiovisual material and printed material/pamphlets relating to speech-language pathology, public education of communication and hearing disorders, etc.
- Prepare a report on the available clinical facilities and clinical activities of the institute

Chnical Practicum

- Observe the evaluation process and counseling of at least 5 different speech and language disorders in children.
- Observe the evaluation process and counseling of at least 5 different speech andlanguage disorders in adults.
- Take case history of a minimum of 10 individuals (5 normal & 5 clients with complaints of speech-language problems). Observation of diagnostic procedures
- Observe various therapeutic methods carried out with children and adults with speech and language disorders.

Total hours-120 hours

- 1. To understand and demonstrate normal aspect of speech, language, voice, fluency variations of typical individuals of different age groups
- 2. To understand and use IPA for transcription of spoken words
- 3. To administer standard test for assessment
- 4. To study available normative data
- 5. To prepare report for diagnosing.

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1	н	L	н	Н	н	Н	н	M	Н		L	Н	М	
CO2	Н	L	Н	н	Н	Н	Н	M	Н		L	Н	M	
CO3	Н	L	н	Н	Н	н	н	М	Н		L	Н	М	
CO4	Н	L	н	Н	Н	н	Н	M	Н		L	Н	M	
CO5	Н	М	Н	Н	н	н	Н	M	Н		L	Н	М	

Practicals-I (Audiology)

Semester II **22BASC13**

Hours of Instruction/week:9 No of Credits: 4

Objectives: After completing this course, the student will be able to

1. Understand and carryout PTA for normal hearing individuals

2. Understand and carryout Speech audiometry for normal hearing individuals

3. Understand clinical masking and plotting of audiograms

PRACTICAL

Calculate/derive the answers for following

Calculate the relative intensities with different reference intensities.

Calculate decibels when sound intensities are doubled, increased by 4 times

Add decibels when two sounds with different intensities are produced simultaneously

Collect pictures of audiometers that existed between 1920 and 1990.

Perform the following experiments

Calculate reference equivalent sound pressure levels (RETSPL) for head phones and bone vibrator for any two frequencies using 30 participants.

Measure most comfortable level on 10 participants with normal hearing sensitivity.

Measure uncomfortable levels on 10 participants with normal hearing sensitivity.

Calculate the sensation levels of MCL and UCLs in above 10 participants.

Measure difference limen of intensity, frequency and duration on 10 normal hearing adults and plot it in graphical form and interpret the results.

Measure equal loudness level contours at minimum level, 40 dB SPL, 70 dB SPL (1 kHz) in 5 normal hearing adults.

Measure sone and mel in 5 normal hearing adults using scaling techniques.

 Take case history on 5 adults and 5 children with hearing problem and correlate the information from case history to results of pure tone audiometry.

 Administer different tuning fork tests on 5 simulated conductive and 5 sensori neural hearing loss individuals.

Carry out pure tone and speech audiometry on 10 normal hearing individuals.

 Carry out clinical masking on 10 normal hearing individuals with simulated conductive hearing loss and carry out clinical masking on 5 individuals with conductive hearing loss and 5 individuals with sensori-neural hearing loss.

 Carryout daily listening checks and subjective calibrations 20 times and observe objective calibration once Perform otoscopy and draw the tympanic membrane of 10 healthy normal individuals

Measure difference limen of intensity, frequency and duration on 10 normal hearing adults and plot it in graphical form and interpret the results

Measure equal loudness level contours at minimum level, 40 dB SPL, 70 dB SPL (1 kHz) in 5 normal hearing adults

Measure sone and mel in 5 normal hearing adults using scaling techniques

Clinical Practicum

- Observe case history being taken on 5 adults and 5 children with hearing problem and correlate the information from case history toresults of pure tone audiometry.
- Administer different tuning fork tests on 5 conductive and 5 sensori neural hearing loss individuals.
- Observe the pure tone audiometry being carried out on 30 clients.
- Plot the audiogram, calculate the pure tone average and write the provisional diagnosis of observed clients.
- Perform otoscopy (under supervision) on at least 1 client with following conditions: Tympanic membrane perforation, SOM, CSOM

Total hours-135 hours

- 1. Understand, measure and calculate MCL and UCL
- 2. Measure difference limen of intensity, frequency and duration
- 3. Carryout PTA and speech Audiometry.
- 4. To carryout masking and plotting of audiograms
- 5. To measure Sone and Mel

CO / PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O 2	PS O3
CO1	М		Н	н	Н	н	Н	L	М		L	Н		
CO2	М		Н	н	Н	Н	Н	L	М		L	Н		
CO3	М		Н	Н	Н	н	Н	L	М		L	H		
CO4	М		н	Н	Н	н	Н	L	M		L	Н		
C05	М		Н	Н	н	Н	Н	Н	М		L	Н		

Discipline Specific Elective (DSE - II) Course Otolaryngology

Otolaryngology	
Semester II 22BA SD02 Hours of Instruction/wee	وبرو دياه
No of C-	
 The causes, signs, symptoms, pathophysiology and management of diseases of external, middle and inner ear leading to hearing loss, and causes, signs, symptoms, pathophysiology and management of diseases of laryngeal 	uis, 3
 causes, signs, symptoms, pathophysiology and management of diseases of articulatory systems 	
Unit I External and middle ear and their disorders Clinical anatomy of the ear Congenital anomalies Diseases of the external ear Tumors of the external ear Perforation and ruptures of tympanic membrane Eustachian tube dysfunction Otitis media with effusion Cholesteatoma and chronic supparative otitis media Otosclerosis Trauma to temporal bone Facial nerve and its disorder	12
Unit II Inner ear and its disorders	
Congenital anomalies	12
Meniere's Disorder	
Ototoxicity	
• Presbycusis	
Disorders of vestibular system	
Vestibular Schwannoma	
Tinnitus and medical line of treatment	
Pre-surgical medical and radiological evaluations for implantable hearing devices	
Overview of surgical technique for restoration and preservation of hearing	
Overview of surgical technique, post-surgical care and complication of surgeries for implantable bone conducted hearing aids and middle ear implant	
nit III Oral cavity and its disorders	
Anatomy of the oral cavity	12
Common disorders of the oral cavity	
Tumors of the oral cavity	
Cleft lip and palate – medical aspects	
Clinical anatomy and physiology of pharynx	

• Tumors of the pharynx	10
Unit IV Larynx and its disorders	12
Clinical anatomy of larynx	
 Difference between adult and infant larynx 	
Clinical examination of larynx	
 Stroboscopy - technique, procedure, interpretation and precautions 	
Congenital laryngeal pathologies	
 Inflammatory conditions of the larynx 	
 Vocal nodule and other disorders of the vocal folds 	
Benign and malignant tumors of the larynx	
 Laryngectomy – overview of surgical procedure 	
 Phono surgery and other voice restoration surgeries 	
Unit V Esophagus and its disorders	12
Clinical anatomy and physiology of esophagus	
Clinical examination of esophagus	
Congenital anomalies of esophagus	
Esophageal fistula	
Inflammatory conditions of esophagus	
Benign conditions of esophagus	
Malignant conditions of the esophagus	
Airway management procedure.	
m . 177	
Total Hours	OU
Recommended Books:	
1. Chan, Y. and Goddard, J.C. (2015). K J Lee's Essential otolaryngology:	
head and neck surgery. (11th edition). New Delhi: Atlantic Publisher and	
Distributers	
2. Dhingra, P. L. (2013). Diseases of Ear, Nose and Throat (Sixth edition).	
Elsevier.	
3. O'Neill, J.P. and Shah, J.P. (2016). Self-assessment in otolaryngology.	
Amsterdam: Elsevier	
4. Postic, W.P., Cotton, R.T., Handler, S.D. (1997). Ear trauma. Surgical	
Pediatric Otolaryngology, New York: Thieme Medical Publisher Inc.	
5. Wackym, A. and Snow, J.B. (2015). Ballenger's oto rhino laryngology	

Inflammatory conditions of the pharynx, tonsils and adenoids

Course outcomes: On the successful completion of the course, students will be

head and neck surgery. (18th edition). United States: McGraw-Hill

1. Acquire knowledge about the anatomy of the ear and diseases of the external ear and middle ear

2. To know about the inner ear and its disorders and the pre and post-surgical evaluations for implantable hearing devices.

3. To know about the oral cavity and its disorders.

Medical

4. To know the anatomy of larynx and disorders and the Laryngectomy surgical procedures
5. To acquire knowledge about the anatomy and physiology of the esophagus and its disorders.

CO / PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O2	PS O3
CO1	Н	Н	Н	Н	Н	M	M	L		M	М	М	Н	Н
CO2	H	Н	Н	Н	Н	М	M	L		М	М	M	н	Н
CO3	Н	Н	Н	Н	н	M	М	L	- 111	М	М	M	Н	Н
CO4	Н	Н	Н	Н	Н	М	M	L		M	M	M	Н	_
CO5	Н	Н	Н	Н	Н	М	M	L		M	M	M	Н	H

Voice and its Disorders	
Semester III Hours 22BASC14	of Instruction/week: 4+1 No of Credits: 3
Objectives:	
 To understand and describe characteristics of normal voice 	
 To identify voice disorders and explain etiology related to voice pathophysiology 	problems, and its
 To assess voice disorders and to provide counselling and therapy voice disorders 	to individuals with
Unit I: Basic concepts in voice and its production	12
 Definition and functions of voice – biological and non-biological Structures and function of respiratory system for the purpose of Laryngeal anatomy – Structural support of larynx, muscles, vocablood supply, and innervations 	l Parameters of voice
Vocal tract resonance and voice quality	
 Development of voice: Birth to senescence; structural and voice Aerodynamic myo-elastic theory of voice production 	related changes
 Voice mechanics – Physiologic, acoustic and aerodynamic corre and loudness changing mechanism, voice registers and voice qu 	ality
 Description of normal and abnormal voice: Parametric, patholog 	ic/perceptual, social
 Unit II: Characteristics and pathophysiology of voice disorders Pathologies of the laryngeal mechanism: classification of voice disorders 	12.
and prevalence	
 Etiology of voice disorders: voice misuse and abuse, medical rela primary disorder etiologies and personality related etiologies 	
 Pathologies of vocal fold cover (infective and trauma related second muscular dysfunction 	
 Non-organic voice disorders: functional disorders, psychosomatic and physiological- voice abuse, Puberphonia) 	- functional aphonia
 Congenital voice disorders Neurological voice disorders 	
 Voice problems in systemic illnesses and endocrine disorders Voi transgenders 	
 Voice problems in the elderly, professional voice users: teachers a 	and singer
Unit III: Assessment of Voice	12
 Referral sources, medical examination and team approach 	
 Protocol for voice assessment: components and philosophies (ICF 	, ICD)
 Clinical voice laboratory: principles of instrumental measurement electrical safety, hygiene safety; recording of data; storage; paten wares 	s – electrical error.
 Perceptual evaluation of voice: GRBAS, CAPE -V 	
 Visualization procedures- indirect laryngoscopy, video laryngosco Acoustic analysis of voice: F0 related measures, intensity related related measures, phonetogram, DSI 	ppy &Stroboscopy measures, quality

- Electroglottography and inverse filtering procedures Aerodynamic analysis of voice: static & dynamic measures Self-evaluation of voice: PROM, VHI, V-DOP Reporting of voice findings, normative comparisons, differential diagnosis Unit IV: Management of voice 12 · Voice therapy orientation: basic principles, goal setting and approaches Vocal hygiene and preventive counselling Symptomatic voice therapy - voice facilitation techniques Psychological approaches to voice therapy – psychoanalysis, rational emotive therapy and cognitive behavior therapy Physiological approach - breathing and postural techniques Holistic voice therapy approaches -1: accent therapy, confidential voice therapy, Holistic voice therapy approaches - 2: vocal function exercises, resonant voice therapy, Lee Silverman voice therapy Medical and surgical procedures in the treatment of benign vocal fold lesions: pharmaceutical effects on voice, phono surgery: re-innervation techniques, laryngeal framework surgeries, micro laryngeal excision Professional voice care Unit V: Intervention strategies for voice disorders 12 Vocal trauma related disorders • Functional voice disorders - inappropriate vocal components Functional aphonia • Puberphonia/mutational falsetto Muscle tension dysphonia Sulcus vocalis Vocal fold palsy Spasmodic dysphonia GERD/LPR Benign vocal fold lesions requiring surgical intervention Post-operative care for benign vocal fold lesions disorders Documenting voice therapy outcomes **Practicals** Record phonation and speaking samples (counting numbers) from five children, adult men, adult women, geriatric men and geriatric women. Note recording parameters and differences in material. Make inferences on age and sex differences across the samples obtained in the previous experiment using perceptual voice profiling. Make a note of differences in pitch, loudness, quality and voice control. Explain how voice reflects one's personality
 - and other social needs.
 Perform an acoustic voice analysis on phonation sample and generate a voice report based on acoustic findings. Compare findings between men & women.
 - Perform MPT and s/z ratio. Infer differences across age and sex.
 - Perform spirometry or any other appropriate aerodynamic procedure. Infer differences across age and sex.
 - Perform acoustic analysis on five abnormal voice samples.
 - Observe and document findings from five laryngeal examinations (pre-recorded or live) such as VLS, stroboscopy or any other relevant.
 - Administer a PROM on five individuals. Prepare a vocal hygiene checklist.
 - Demonstrate therapy techniques such as vocal function exercise, resonant voice therapy, digital manipulation, push pull, relaxation exercises.

Total Hours 75

Text Books:

- 1. Stemple, J.C., Glaze, L.E., & Gerdeman, B, K. (2014). Clinical voice pathology: Theory & Management (5thEd.). San Diego: Plural publishers.
- 2. Aronson, A.E. & Bless, D.M. (2009). Clinical Voice Disorders. (4thEd.). New York: Thieme, Inc.
- 3. Boone, D.R., McFarlane, S.C, Von Berg, S.L. & Zraick, R, I. (2013): The Voice and Voice Therapy. (9thEd.). Engle wood Cliffs, Prentice- Hall, Inc. New Jersy.
- Professional Voice: Assessment and Management. Proceedings of the national workshop on "Professional Voice: Assessment and management", 9-10 Dec 2010. All India Institute of Speech & Hearing, Mysore. 2010.
- 5. Andrews, M.L. (2006). Manual of Voice treatment: Pediatrics to geriatrics (3rdEd.). Thomson Delmar Learning.
- 6. Colton, R. H, Casper, J. K. & Leonard, R. (2006). Understanding voice problems. Baltimore: Williams Wilkins.
- 7. Sapienza, C.M., & Ruddy, BH. (2013). Voice Disorders. (2ndEd.). San Diego: Plural Publisher.
- 8. Voice: Assessment and Management. Proceedings of the national workshop on "Voice: Assessment and management", 14-15 Feb 2008. All India Institute of Speech & Hearing, Mysore. 2008.

- 1. Understand the parameters of the voice, its development, its subsystem required for phonation.
- 2. Differentiate what type of voice disorders, its etiology and pathophysiology behind it
- 3. To analyze the voice disorders by perceptual, visualization, acoustic, aerodynamic and self reporting.
- 4. To know how to give voice therapy, its techniques, preventive measures, counselling and vocal hygiene programs.
- 5. To acquire knowledge about the voice disorders and formulating its intervention strategies.

CO/ PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O2	PS O3
CO1						Н	М					Н		
CO2	М	M	M		М	Н	M	M				M	Н	
CO3	н	М	Н	М	Н	М	M	М	M	M	M	M	M	Н
CO4	Н	М	М	М	М	L	L	L	Н	L	н	н	M	М
CO5	M	M	Н	Н	М	Н	Н	Н	L	M	M	М	М	Н

Speech Sound Disorders

Semester III 22BASC15

Hours of Instruction/week: 4+1 No. of Credits: 3

Objectives

- To describe normal speech sound development and characterization of individuals with speech sound disorders.
- To perform phonological analysis and assessment of speech sound disorders
- To plan intervention for individuals with speech sound disorders.

Unit I: Speech sound acquisition and development

12

- Fundamentals of articulatory phonetics phonetic description of vowels & consonants.
- Phonology & phonological theories generative phonology, natural phonology.
 Phonology & phonological theories non-linear phonology, optimality theory.
 Methods to study speech sound acquisition diary studies, cross sectional studies and longitudinal studies.
- Speech sound acquisition and factors influencing speech sound acquisition
- · Acoustics of speech sounds
- Speech intelligibility, factors affecting speech intelligibility, assessment of speech intelligibility
- Co articulation: types and effects
- Phonological development in bilingual children. Phonological development in Indian languages.

Unit II: Assessment of speech sound disorders- I

12

- Current concepts in terminology and classification of speech sound disorders
 Organically-based speech sound disorders, childhood apraxia of speech. Speech sound
 disorders of unknown origin, classification by symptomatology.
- Factors related to speech sound disorders
 - o Structure and function of speech & hearing and oro-sensory mechanisms.
 - Cognitive linguistic, psychosocial and social factors.
 - Metalinguistic factors related to speech sound disorders.
- Introduction to assessment procedures: aims of assessment, screening and comprehensive assessment.
- Speech sound sampling procedures issues related to single word and connected speech samples; imitation and spontaneous speech samples, contextual testing, recording of speech samples.
- Review of tests in English and other Indian languages Single word articulation tests, deep articulation of articulation, and computerized tests of phonology.
- Influence of language and dialectal variations in assessment.
- Transcription of speech sample transcription methods -IPA and extension of IPA;
 broad and narrow transcription.

Unit II	I: Assessment of speech sound disorders-II	12
•	Introduction to independent and relational analysis.	
	Independent analyses – phonetic inventory, phonemic inventory and phonotactic inventory (utility of independent analysis for analysis of speech of young children and	
	children with severe speech sound disorders).	
•	Relational analyses – SODA, pattern analysis, (distinctive features, phonological process analysis).	
•	Phonological processes analyses - language specific issues, identification and classification of errors.	
•	Assessment of oral peripheral mechanism.	
	Speech sound discrimination assessment, phonological contrast testing. Stimulability testing.	
	Determining the need for intervention – speech intelligibility and speech severity assessment.	
	Factors influencing target selection – stimulability, frequency of occurrence, developmental appropriateness, contextual testing, and phonological process analysis.	
	Case study - Documenting the assessment findings and determining the need for	
	intervention.	4.4
	V: Management	12
	Basic considerations in therapy – target selection, basic framework for therapy, goal-attack strategies, organizing therapy sessions, individual vs. group therapy.	
•	Treatment continuum – establishment, generalization and maintenance; measuring	
	clinical change.	
	Facilitation of generalization.	
•	Maintenance and termination from therapy.	
•	Motor-based treatment approaches - Principles of motor learning. Discrimination/ear	
	training and sound contrast training.	
•	Establishing production of target sound – imitation, phonetic placement, successive approximation, context utilization.	
•	Traditional approach, contextual/sensory-motor approaches.	
•	General guidelines for motor-based treatment approaches	
•	Use of technology in articulation correction	
Unit V	V: Management -II	12
•	Core vocabulary approach.	
•	Introduction to linguistically-based treatment approaches- Distinctive feature therapy. Minimal pair contrasts therapy.	
•	Metaphon therapy, Cycles approach. Broad-based language approaches.	
•	General guidelines for linguistically-based approaches. Phonological awareness and phonological disorders.	
	Phonological awareness intervention for preschool children.	
•	Adapting intervention approaches to individuals from culturally and linguistically	
	diverse backgrounds.	
Parad*	Role of family in intervention for speech sound disorders.	4.5
Practic		15
•	List the vowels and consonants in your primary language and provide phonetic and	
	acoustic descriptions for the speech sounds.	44
		4.4

- Identify the vowels and consonants of your language on the IPA chart and practice the IPA symbols by transcribing 25 words.
- Make a list of minimal pairs (pairs of words which differ by only one phoneme) in English.
- Make a list of minimal pairs in any language other than English.
- Identify the stages of speech sound acquisition by observations from videos of children from birth to 5 years of age.
- · Record the speech of a two year old typically developing child, transcribe and analyze the speech sample.
- Record the speech of one typically developing child from 3-5 years of age (include single word and connected speech samples), transcribe the sample, and perform phonological assessment.
- Analyze transcribed speech samples of typically developing children practice independent and relational analysis.
- Practice instructions for phonetic placement of selected sounds.
- Develop a home plan with activities for any one section of phonological awareness in English and in one Indian language.

Total Hours 75

Course outcomes: On the successful completion of the course, students will be able to

- 1. Acquire knowledge about the phonological theories and speech sound development
- 2. To obtain knowledge about the classification of speech sound disorder, and the factors affecting it
- 3. To administrate the assessment procedures for the speech sound disorders and the factors affecting it
- 4. To execute the therapy plans for articulation and phonology, and basic considerations in
- 5. To gain knowledge about the therapeutic techniques for the articulation and phonology and the role of family members in the intervention procedures.

Text Books:

- 1. Bernthal, J.E., Bankson, N.W., & Flipsen, P. (2013). Articulation and phonological disorders. (7th Ed.). Boston, MA: Pearson.
- 2. Dodd, B. (2013). Differential diagnosis and treatment of children with speech disorder.(2nd Ed). NJ: Wiley,
- 3. Rout, N (Ed)., Gayathri, P., Keshree, N and Chowdhury, K (2015). Phonics and Phonological Processing to Develop Literacy and Articulation; A Novel Protocol. A publication by NIEPMED, Chennai. Freely downloadable from http://niepmd.tn.nic.in/publication.php. ISBN 978-81-928032-9-5
- 4. Vasanta, D. (2014). Clinical applications of phonetics and phonology. ISHA Monograph. Vol 14, No. 1.Indian Speech & Hearing Association.

- Velleman, S. L (2003). Resource guide for Childhood Apraxia of Speech. Delmar/Thomson Learning.
- 6. Williams, A., McLeod, S., & McCauley, R. (2010). Interventions for speech sound disorders in children. Baltimore: Brookes.

CO /	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	O2	03
CO1						Н	М					H		
CO2	М	М	М		М	Н	М	М				М	н	
CO3	Н	М	Н	M	Н	М	М	М	М	М	М	М	М	Н
C04	Н	M	М	М	М	L	L	L	н	L	н	Н	М	М
CO5	М	M	Н	Н	M	Н	н	Н	L	M	М	M	M	Н

Diagnostic Audiology-Behavioral Tests

Semest 22BAS	EC16 Hours of Instruction/week: 4+1	
	No. of Credits: 3	\$
Obje		
	To enable the students to choose individualized test battery for assessing cochlear pathology, retro cochlear pathology, functional hearing loss, CAPD, vestibular dysfunctions, tinnitus and hyperacusis	
•	To enhance the students to independently run the tests and interpret the regulte to	
	To make adjustments in the test parameters to improve sensitivity and specificity of tests.	
Tinis I.	and make appropriate diagnosis based on the test results and suggest referrole	
Ome 1:	Introduction to Diagnostic Audiology	1
	functions of a diagnostic test, difference between screening and diagnostic test,	
•	Need for test battery approach in auditory diagnosis and integration of results of audiological tests, cross-check principle	
•	Concept of sensitivity, specificity, true positive, true negative, false positive, false negative, hit rate	
•	Definition of behavioral and physiological tests and their characteristics in diagnostic audiology	
•	Theories and physiological bases of recruitment Theories and physiological bases of adaptation	
•	Clinical indications for cochlear pathology, retro-cochlear pathology, central auditory processing disorders, functional hearing loss, vestibular disorders	
Unit II:	: Tests to identify cochlear and recto cochlear pathology	10
•	ABLB, MLB and SISI tests Behavioral tests of adaptation Bekesy audiometry	12
•	Brief tone audiometry PIPB function Glycerol test	
•	Test to identify dead regions of cochlea	
Unit III	I: Tests to diagnose functional hearing loss	
•	Behavioral and clinical indicators of functional hearing loss	12
•	Pure tone tests including tone in noise test, Stenger test, BADGE, Pure tone DAF	
	Speech tests including Lombard test, Stenger test, lip-reading test, Doerfler-Stewert test, Low level PB word test, Yes-No test, DAF test	
•	Identification of functional hearing loss in children: Swinging story test, Pulse tone methods	
Unit IV:	: Assessment of central auditory processing	1.2
•	Definition, different behavioral processes	12
•	Behavioral and clinical indicators of central auditory processing disorders Bottle neck and subtlety principles and their implications in	
_	Tests to detect central auditory processing disorders	

- Monaural low redundancy tests filtered speech tests, time compressed speech test, speech-in-noise test, SSI with ICM, other monaural low redundancy tests.
- Dichotic speech tests Dichotic digit test, staggered spondaic word test, Dichotic CV test, SSI with CCM, Competing sentence test, other dichotic speech tests.
- Binaural interaction tests RASP, BFT, MLD, other binaural interaction tests Tests of Temporal processing – pitch pattern test, duration pattern tests, other temporal ordering tests, gap detection test, TMTF
- Variables influencing the assessment of central auditory processing: Procedural and subject variables
- Test findings of important tests in subjects with central auditory disorders: brainstem lesion, cortical, CAPD in children.

Unit V: Assessment of persons with vestibular disorder, tinnitus, hyperacusis

- Introduction to structure and function of vestibular system Vestibular ocular reflex and vestibulo spinal reflex Overview on other systems involved in balance
- Signs and Symptoms of vestibular disorders
- Team in the assessment and management of vestibular disorders
- Behavioral tests to assess vestibular functioning: Fukuda stepping test, tandem gait test, finger nose pointing, Romberg test, Sharpened Romberg test, Dix-Hall pike test, Logroll test
- Overview of tinnitus and hyperacusis and tests for assessment
- Pitch matching, loudness matching, residual inhibition, Feldman masking curves Johnson Hyperacusis Dynamic Range Quotient

Practicals

- Administer ABLB, MLB and prepare ladder gram (ABLB to be administered by blocking one ear with impression material)
- Administer classical SISI on 3 individuals and note down the scores Administer tone decay tests (classical and its modifications) and note down the results (at least 3 individuals)
- Administer Bekesy audiometry Administer Brief tone audiometry
- Plot PIPB function using standardized lists in any 5 individuals
- Administer the tests of functional hearing loss (both tone based and speech based) by asking subject to malinger and having a yardstick of loudness.
- Administer CAPD test battery to assess different processes on 3 individuals and note down the scores
- Administer Fukuda stepping test, Tandem gait test, Finger nose pointing, Romberg test, Sharpened Romberg test, Dix-Hallpike test, Log-roll test on 5 of the individuals each and note down the observations.
- Estimate the pitch and loudness of tinnitus in 2 persons with tinnitus (under supervision). Assess the residual inhibition in them.
- Plot Feldman masking curves for a hypothetical case
- Administer Johnson Hyperacusis Dynamic Range Quotient on any 2 of the individuals and note down the scores

12

15

Total Hours 75

Text Books:

- 1. Gelfand, S.A. (2009). Essentials of Audiology. Thieme.
- 2. Hall, J.W., & Mueller, H.G. (1996). Audiologists' Desk Reference: Diagnostic audiology principles, procedures, and protocols. Cengage Learning.
- 3. Jerger, J. (1993). Clinical Audiology: The Jerger Perspective. Singular Publishing Group.
- 4. Katz, J., Medwetsky, L., Burkard, R. F., & Hood, L. J. (Eds.). (2007). Handbook of Clinical Audiology (6th revised North American edition). Philadelphia: Lippincott Williams and Wilkins.
- 5. Martin, F.N., & Clark, J.G. (2014). Introduction to Audiology (12edition). Boston: Pearson.
- 6. Roeser, R.J., Valente, M., & Hosford Dunn, H. (2007). Audiology: Diagnosis. Thieme.
- Stach, B.A. (2010). Clinical audiology: an introduction (2nded). Clifton Park, NY: Delmar Cengage Learning

- Understand the difference between the screening and diagnostic test, need for the test battery approaches.
- 2. To acquire knowledge about the test to rule out the cochlear and retro cochlear pathology and its interpretations
- 3. To identify the functional hearing loss with behavioral, pure tone, speech kind of tests.
- 4. To understand the concepts of central auditory processing disorders, its clinical indicators, tests to identify CAPD and the factors affecting it.
- 5. To know about the overview of vestibular disorders, tinnitus and hyperacusis. And also to do the subjective and objective test for assessment and it management

CO / PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O2	PS O3
CO1						Н	M					Н		
CO2	М	M	M		М	Н	М	M				M	Н	
CO3	Н	М	Н	M	Н	M	M	М	M	M	М	М	M	H
CO4	н	М	М	М	M	L	L	L	Н	L	Н	Н	M	M
CO5	М	M	Н	Н	М	Н	Н	Н	L	M	M	M	M	Н

Practicals-II (Speech-Language Pathology)

Semester III 22BASC17 Hours of Instruction/week: 8 No of Credits: 4

Objectives: After completing this course, the student will be able to

- Administer tools to assess language abilities
- Examine the oral structures by performing OPME
- Administer case history

Practical's:

- Procedures to obtain a speech language sample for speech & language assessment from children of different age groups such as, pre schoolers, kindergarten, primary school and older age groups.
- Methods to examine the structures of the oral cavity/organs of speech.
- The tools to assess language abilities in children (with hearing impairment, specific language impairment & mixed receptive language disorder).
- Development of speech sounds in vernacular and linguistic nuances of the language.
- To evaluate speech and language components using informal assessment methods.
- To administer at least two standard tests for childhood language disorders.
- To administer at least two standard tests of articulation/ speech sounds.
- To assess speech intelligibility.
- Analysis of language components Form, content & use minimum of 2 samples.
- Analysis of speech sounds at different linguistic levels including phonological processes minimum of 2 samples.
- Transcription of speech language samples minimum of 2 samples.
- Analyze differences in dialects of the local language.
- Case history minimum of 5 individuals with speech & language disorders.
- Oral peripheral examination minimum of 5 individuals.
- Language evaluation report minimum of 5. Speech sound evaluation report minimum of 5.

Total hours-120 hours

- 1. Understand the methods to examine the oral structures, Intelligibility, language components.
- 2. Administer assessment tools for language disorders, Hearing Disorders.
- 3. Acquire knowledge and administer case history.
- 4. Prepare language evaluation report
- 5. Analyze language components, speech sounds, dialects.

CO / PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O2	PS O3
CO1	M	A	Н	Н	Н	н	Н	L	M		L	H		
CO2	M		Н	Н	н	Н	Ħ	L	M		L	Н		
CO3	М		Н	Н	Н	Н	Н	L	M		L,	н		
CO4	M		н	Н	Н	Н	Н	L	M		L	Н		
CO5	М		Н	Н	Н	Н	Н	Н	М		L	н		

Practicals-II (Audiology)

Semester III 22BASC18

Hours of Instruction/week: 8 No of Credits: 4

Objectives:

- To understand the methods of calibration, different types of hearing loss.
- To obtain detail case history, tuning fork tests and pure tone audiometry.

Practicals:

- · Methods to calibrate audiometer.
- Materials commonly employed in speech Audiometry.
- Calculation pure tone average, % of hearing loss, minimum and maximum masking levels.
- Different types of hearing loss and its common causes
- To obtain detailed case history from clients or parents/guardians.
- To carryout commonly used tuning fork tests.
- To administer pure tone Audiometry including appropriate masking techniques on adults using at least techniques
- To administer tests to find out speech reception threshold, speech identification scores, most comfortable and uncomfortable levels on adults.
- Plotting of audiograms with different degree and type with appropriate symbols 2 audiograms per degree and type Detailed case history taken and its analysis
- Calculation degree, type and percentage of hearing loss on 5 sample conditions
- Case history on at least 5 adults and 3 children with hearing disorders
- Tuning fork test on at least 2 individuals with conductive and 2 individuals with sensori-neural hearing loss
- Pure tone audiometry with appropriate masking on 5 individuals with conductive, 5 individuals SN hearing loss and 3 individuals with unilateral/asymmetric hearing loss 5

Total hours-120 hours

- 1. Understand the methods of calibration
- 2. Administer case history, tuning fork tests, pure tone audiometry.
- 3. Acquire knowledge about different types of hearing loss.
- 4. Plot audiograms and calculate the degree, type and percentage of hearing loss.
- 5. Understand the masking technique and speech audiometry.

PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O2	PS O3
М		Н	Н	Н	Н	Н	L	М		γ	ш		
M		Н	Н	Н	Н			M					
М		Н	н	Н									
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	M M M M	1 2 M M M M M	1 2 3 M H M H M H M H	1 2 3 4 M H H M H H M H H	1 2 3 4 5 M H H H M H H H M H H H	1 2 3 4 5 6 M H H H H M H H H H M H H H H M H H H H	1 2 3 4 5 6 7 M H H H H H H M H H H H H M H H H H H M H H H H	1 2 3 4 5 6 7 8 M H H H H H H L M H H H H H H L M H H H H H H L M H H H H H H L	1 2 3 4 5 6 7 8 9 M H H H H H H H L M M H H H H H H H L M M H H H H H H H L M	1 2 3 4 5 6 7 8 9 10 M H H H H H H L M M H H H H H H H L M M H H H H H H H L M	1 2 3 4 5 6 7 8 9 10 11 M H H H H H H H L M L M H H H H H H H L M L M H H H H H H H H L M H H H H H H H L	1 2 3 4 5 6 7 8 9 10 11 01 M H <td>1 2 3 4 5 6 7 8 9 10 11 01 02 M H<!--</td--></td>	1 2 3 4 5 6 7 8 9 10 11 01 02 M H </td

Discipline Specific Elective (DSE - III) Course Amplification Devices

Semest 22BAS	Name has of f 'Padiffs' 4	
Object	ives	
•	To help the students assess the candidacy for hearing aids and counsel accordingly evaluate the listening needs and select the appropriate hearing aid Independently program digital hearing aids as per the listening needs of the client and independently assess the benefit from the hearing aid using subjective and objective methods	
	Make all types of ear molds, counsel the parents/care givers at all stages	12
Unit I:	Types of hearing aids Historical development of hearing aids: development of concept of amplification, development of different types of amplification devices	
•	Review of basic elements of hearing aids: Microphone, Amplifier, Receiver/vibrator, Cords, Batteries.	
•	Classification and Types of hearing aids	
•	Body level, ear level, in the ear, ITC, invisible in the canal, CIC Binaural, pseudo binaural, monaural	
•	Programmable, trimmer digital and digital hearing aids Directional hearing aids, modular hearing aids	
•	RIC hearing aids Implantable hearing aids Master hearing aids CROS hearing aids	
	Group amplification - hard wired, induction loop, FM, infrared	
•	Assistive listening devices – types and selection (Telephones, Television, typing technology)	
Unit I	I: Technological aspects in Hearing Aids	12
•	Routing of signals, head shadow/baffle/diffraction effects	
	Output limiting and issues related to them: peak clipping, compression	
	Concept and use of compression in hearing aids: BILL, TILL, PILL, Wide	
	Dynamic Range Compression, Syllabic Compression, Dual Compression.	
•	Signal processing in hearing aids – BILL, TILL, PILL Signal enhancing technology	
	Noise reduction algorithms	
•	Extended low frequency amplification, frequency lowering technology (transposition, compression)	
	Recent advances in hearing aids	13
Unit l	III: Electro-Acoustic Measurements for Hearing Aids	L
•	Purpose and Parameters to be considered: OSPL90, SSPL90, HFA SSPL90, Gain, Full on Gain, HFA Full on Gain, Reference test Gain, Basic Frequency Response,	

Total Harmonic distortion, Inter modulation Distortion, input Output functions,

Electro-acoustic measurements, BIS, IEC and ANSI standards Environmental

instrumentation, procedure, variables affecting EAM

tests. Care, maintenance and troubleshooting of hearing aids

 Counselling and orienting the hearing aid user (Client and significant others) 	
Unit IV: Selection of Hearing Aids	
 Pre-selection factors; Prescriptive and comparative procedures; Functional gain and insertion gain methods; Use of impedance, OAEs and AEPs audiometry; Hearing aids for conductive hearing loss; Hearing aids for children; Hearing aids for elderly; Selection of non-linear programmable and digital hearing aids Hearing aid programming Methods for assessing hearing aid benefit Real ear insertion measurements for verification of hearing aid benefit: REIG, REUR, REAR, REOR, RESR, REIG, REAG, RECD 	12
Acoustic feedback in hearing aids Unit Va. Machanana and a series and a series aids	
Unit V: Mechano-acoustic couplers (ear molds) • Different types of molds	12
Procedure for hard molds and soft molds.	
2 20 20 mart moras and soft moral my chring methods	
 Special modifications in the ear molds: Vents (diagonal and parallel), deep canal molds, short canal, horns, Libby horn, reverse horn, acoustic modifier 	
• Effect of Mechano- acoustic couplers on the hearing aid output.	
PRACTICALS	
• Listen to the output of different types and classes of hearing aids (monaural,	15
omadial, analog, digital hearing aids), in different settings	
 Troubleshoot hearing aids: Check the continuity of the receiver cord using multi meter, measure the voltage of different sized batteries using multi meter, Check voltage of batteries different types and sizes 	
• Carry out electroacoustic measurements for the body level and ear level hearing aids Program the hearing aid for different configuration and degrees of hearing loss (at least 5 different audiograms) using different prescriptive formulae	
• Program the hearing aid for different listening situations (at least 3 different situations)	
 Vary the compression settings in a digital hearing aid and note down the differences in the output 	
 Perform real ear insertion measurements using different hearing aids (body level and ear level, hearing aids of different gains) 	
 Compare speech perception through conventional BTE and RIC hearing aids using a rating scale 	
 Observe assistive listening devices such as telephone amplifier, vibro-tactile alarms, note down the candidacy and their utility. 	
 Administer a questionnaire to assess hearing aid benefit on 2 persons using hearing aids. 	
Carry out a role play activity of counselling a hearing aid user	
• Ear Molds-take impression for the ear mold using different techniques, different methods and using different materials	
 Make hard moulds for any two ears, make soft moulds for any two ears, make vent in the mould you make. 	
Total Hours 75	

Text Books:

- 1. Dillon. (2012). Hearing Aids (2 edition). Thieme Medical and Scientific Publisher.
- 2. Hall, J. W., & Mueller, H. G. (1998). Audiologists' Desk Reference: Audiologicmanagement, rehabilitation, and terminology. Singular Publishing Group.
- 3. Kates, J. M. (2008). Digital Hearing Aids (1 edition). San Diego: PluralPublishing Inc.
- 4. Metz, M. J. (2014). Sandlin's Textbook of Hearing Aid Amplification: Technical and Clinical Considerations. Plural Publishing.
- 5. Mueller, H. G., Hawkins, D. B., & Northern, J. L. (1992). Probe Microphone Measurements: Hearing Aid Selection and Assessment. Singular Publishing Group.
- 6. Mueller, H. G., Ricketts, T. A., & Bentler, R. A. (2007). Modern Hearing Aids: Pre-fitting Testing and Selection Considerations: 1 (1 edition). San Diego, CA:Plural Publishing Inc.
- 7. Sandlin, R. E. (Ed.). (1989). Handbook of Hearing Aid Amplification: ClinicalConsiderations and Fitting Practices v. 2. Boston: Singular Publishing Group. Sandlin, R. E. (Ed.). (1993). Understanding Digitally Programmable Hearing AIDS. Boston: Allyn & Bacon.
- 8. Tate, M. (2013). Principles of Hearing Aid Audiology. Springer.
- 9. Taylor, B., & Mueller, H. G. (2011). Fitting and Dispensing Hearing Aids (1edition). San Diego: Plural Publishing Inc.
- 10. Valente, M. (2002). Hearing Aids: Standards, Options, and Limitations. Thieme.

Course Outcomes-After completing this course, students will be

- 1. Able to understand the basic concepts and types of hearing aids and its parts, its historic development, and development of amplification systems
- 2. Concepts of signal processing, signal enhancing and noise reduction technology
- 3. To know about electroacoustic measurement of the hearing aids and ANSI, BIS and IEC standards, troubleshooting of hearing aids
- 4. Able to compare the audiometric test results and select the appropriate type and program of the hearing aid to the patients
- 5. Able to acquire knowledge about the molds, its types, the processing in making the ear molds and its special modifications.

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1						Н	М					Н		
CO2	М	М	М		M.	Н	М	М				М	Н	
CO3	Н	М	Н	M	Н	M	М	М	М	М	М	М	М	Н
CO4	Н	М	М	M	М	L	L	L	Н	L	Н	Н	М	М
CO5	М	М	Н	Н	М	Н	Н	Н	L	М	М	M	M	Н

English Language for Cor	mmunication II
Semester IV	Hours of instruction/Week-3
22BLEN02	No. of credits-3
Objectives	
 To become familiar with the nuances of ac 	cademic writing
 To produce short and simple connected te 	
 To communicate effectively and appropria 	
Unit I Communicate: Outside the Class	9
Patterns of Language-Modal Verbs	
Speaking-Useful Everyday Expressions	
Making Language Work-Expressions to Inc	licate Speculations And Making
Inferences	
Unit II Communicate: At the Post Office	9
Patterns of Language-Phrasal Verbs/ Idiom	s
Speaking-Distinguishing between pairs of	
Making Language Work-Clipping, Formin	
into Normal Script	g beniences, converting sivis
Unit III Contemplate: How to Win	
Writing: completing a story, dialogue	9
or the province of the same of	
Unit IV Contemplate: View Points	6
Speaking: Agreeing/ Disagreeing, expressing	
Unit V Contemplate: Snakes and Ladders	6
Contemplate: Your Self	•
Speaking: Making comparisons	
Writing: Preparing lists	
Assignments and Activities in Class:	6
(a) Model question paper in the text book	
(b) Vocabulary building, analyzing poems and	listening activities (from CD)
	Total Hours 45
Text Book	
1. Krishnaswamy N, sriraman T, Creatinve Eng	dish for Communication 2 nd ed
Haryana, Macmillan, 2012.	, to to the same and the sa

Reference books

- 1. Das, Bikram K, Functional Gramer and Spoken and Written communication in English (A Short friendly Edition), New Delhi: Orient Black Swan, 2010.
- 2. Mudbhatkel, Maya and Saraswathi, English for Competitive Exminations, Emerald Publishers, 2003.
- 3. Rajeevan, Geetha and Kiranmani Dutt, Basic Communication Skills, New Delhi: Fooundation Books, 2010
- 4. Rajeevan K and Radhakrishna Pillai, Spoken English For You, Chennai: Emerald Publishers, 2014

Course Outcomes: At the end of the course students will be able to

- 1. Use increased vocabulary in their writing
- 2. Use expressions in appropriate context
- 3. Use the English language accurately and appropriately for different purposes
- 4. Understand hoe phrasal verbs, idioms enrich language
- 5. Demonstrate effective writing skills.

CO / PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O2	PS O3
CO1	Н		Н	L		М	М		Н	M	М		М	L
CO2	н		Н	L		M	М		Н	M	М		М	L
CO3	Н		Н	L		М	М		Н	М	М		М	L
CO4	Н		н	L		М	М		Н	М	М		М	L
CO5	Н		Н	L		М	М		Н	М	M		М	L

Motor Speech Disorders in Children

Semester IV	Hours of Instruction/week: 4+1
22BASC19	No of Credits: 3
Objectives:	
 To describe the characteristics of more as cerebral palsy, childhood apraxia of dysarthrias 	for speech disorders in children such of speech and other childhood
 To assess the speech and non-speech conditions plan 	
 To execute therapy strategies for chil 	dren with motor speech disorders
Unit I Neuro-developmental processes in	speech production and motor 12
speech disorders	
 Review of neuro-anatomy (cerebral co brainstem, cerebellum, spinal cord & e pyramidal systems) Sensory-motor int motor planning and feedback) Anaton production systems 	cranial nerves, pyramidal and extra- egration (spatial temporal planning,
 Development of neural pathways of sp maturation, reflexes, sensory and motor 	peech motor control (brain or)
 Dysarthria in children – cerebral palsy flaccid): definition, etiology, character 	ristics and associated problems
 Dysarthria in children – cerebral palsy 	- disorders of movement
(hyperkinetic, hypokinetic) and disord etiology, characteristics and associated	l problems
 Dysarthria in children – lower motor r motor speech disorders 	
 Childhood apraxia of speech and nonvecharacteristics and classification 	rerbal oral apraxia: definition,
Unit II Assessment of motor speech disorde	
 Case history and developmental neuro 	
postural and oropharyngeal reflexes, c	
 Assessment of oral sensory and motor mechanism examination, neuro- musc 	ular status
 Assessment of speech sub-systems – q 	uantitative and qualitative
 Assessment of speech intelligibility and 	d comprehensibility
 Assessment of associated problem 	
 Speech assessment with specific refere – Phonetic and phonemic inventory, pl variability of errors, speech intelligibil 	nonotactics and syllable sequencing, ity, fluency and prosody
 Test materials – checklist for childhoo for developmental apraxia of speech 	d apraxia of speech, screening test
 Protocols for non-verbal and verbal presented 	axis specific to Indian languages

Differential diagnosis- dysarthria and other developmental disorders

•	Neuro-developmental therapy	
•	Non speech oral-motor exercises: its application for children with	
	dysarthria	
•	Management of drooling Behavioral management of respiratory,	
•	phonatory, resonatory and articulatory subsystems	
•	Prosthetic appliances in treatment of childhood dysarthria	
•	AAC in management of motor speech disorders- role of devices, AAC	
	team, candidacy and pre-requisites, symbol selection, techniques,	
	assessment for AAC, effective use of AAC	
	Case studies: Planning intervention for children with dysarthria	
Unit I	V Management of childhood apraxia of speech	12
•	Principles of motor learning	
•	Integral stimulation – dynamic temporal cueing	
	Multisensory and tactile cueing techniques (moto kinesthetic speech	
	training, sensory motor approach, PROMPTS, Touch cue method &	
	speech facilitation)	
	Gestural cueing techniques (signed target phoneme therapy, adapted	
	cueing techniques, cued speech, visual phonics, & Jordon's gestures)	
•	Miscellaneous techniques (melodic intonation therapy, multiple phonemic	
	approach,& instrumental feedback)	
•	Cognitive/conceptual/ linguistic /phonological remedial approaches -	
	phonotactics	
	Other approaches: Vowel and diphthong remediation techniques	
	(Northampton(Yale) vowel chart and Alcorn symbols), Nancy Kauffman's	
	speech praxis treatment kit	
•	Use of AAC in childhood apraxia of speech	
	Evidence-based practice in intervention for childhood apraxia of speech	
	Case studies: Planning intervention for childhood apraxia of speech	
_	case seases. I mining more relation for containous aprairie of species	
Unit V	V Feeding and swallowing disorders in children	12
•	Embryology- periods and structures of development	
	Anatomical structures of swallowing- upper aero digestive system,	
	anatomic difference between adults and children	
	Physiology of swallowing- swallow phases, neural control of swallowing,	
_	reflexes related to swallowing, suckling and sucking, airway and	
	swallowing	
	Terms involved in dysphagia and development of feeding skills	
	Causes of dysphagia in children	
	Signs and symptoms of dysphagia in children	
	Assessment – inferences from neural developmental assessment, cranial	
•	nerve examination, assessment scales, nutritive and non-nutritive	
	assessment, instrumental assessment (VFS, cervical auscultation), gastrointestinal evaluation	
	Restronnesting evaluation	

Differential diagnosis - childhood apraxia of speech and other

• Team approach in rehabilitation of motor speech disorders in children

12

60

developmental disorders

Unit III Management of childhood dysarthria

- Management: positioning, oral- motor treatment, team approach, non-oral feeding, transitional feeding, modifications in feeding
- Role of speech-language pathologist in neonatal intensive care with reference to feeding and swallowing

PRACTICALS

15

- 1. With the help of models, charts and software, identify the motor control centers in the brain.
- 2. Perform oro-motor examination in five children and adults and compare
- 3. Identify oro-motor reflexes (rooting, suckling, & phase bite) in 5 infants.
- 4. Demonstrate normal posture and breathing patterns required for varied speech tasks.
- 5. Alter the postures and breathing patterns and notice changes in speech patterns.
- 6. Assess DDK rate in five typically developing children.
- 7. Rate intelligibility of speech in five typically developing children. Discuss factors that influenced speech intelligibility and their ratings.
- 8. Observe and record (a) physical status, (b) oral sensory motor abilities and vegetative skills, (c) respiration, (d) phonation, (e) resonation, (f) articulation and (g) language abilities in five typically developing children. Compare these with observations made from children with motor speech disorders.
- 9. Perform oro-motor exercises isotonic and isometric. Discuss strategies to modify exercises for children.
- Identify from video the AAC system such as low technology vs. high technology systems and different symbol system, that is, Bliss symbols, IICP symbols and different signing systems – Makaton.
- 11. Observe feeding and swallowing skills in different age groups of children: 2newborns; 2 infants, 2 toddlers, and 2 older children. Identify the differences in feeding methods, food consistencies, texture, quantity, feeding habits, feeding appliances used by these children.

Total Hours 75

Text Books:

- Arvedson, J.C., and Brodsky, L. (2002) (2nd Ed.). Pediatric swallowing and feeding. San Diego, Singular publishing.
- 2. Caruso, F. J. and Strand, E. A. (1999). Clinical Management of Motor Speech Disorders in Children. New York: Thieme.
- 3. Hardy, J. (1983). Cerebral Palsy. Remediation of Communication Disorder Series by F.N. Martin. Englewood Cliffs, Prentice Hall Inc.
- Love, R.J. (2000) (2nd Ed). Childhood Motor Speech Disorders. Allyn & Bacon.
- Love, R.J. and Webb, W.G. (1993). (2nd Ed.) Neurology for the Speech-Language
- 6. Pathologist. Reed Publishing (USA)
- 7. Rosenthal. S., Shipp and Lotze (1995). Dysphagia and the child with developmental disabilities. Singular Publishing Group.
- 8. Velleman, S. L (2003). Resource guide for Childhood Apraxia of Speech. Delmar/Thomson Learning.

- 1. Understand the concepts of neuroanatomy, development of its neural pathways, and disorders of dysarthria and apraxia of speech in children.
- 2. Assess the reflexes, OPME, subsystems of speech, speech intelligibility in children.
- 3. Acquire knowledge about the management of dysarthria in children
- 4. To know about the team approach and the therapy of speech language pathologist for the childhood apraxia of speech
- 5. To obtain knowledge about the anatomy and physiology of the swallowing, its development, and the issues in feeding its management.

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1						Н	М					Н		
CO2	М	M	М		М	н	М	М				M	Н	
CO3	н	М	Н	М	Н	М	М	М	М	М	М	M	М	Н
CO4	Н	М	М	М	M	L	L	Ł	Н	L	Н	Н	М	М
CO5	M	М	Н	Н	М	Н	н	Н	L	М	M	М	М	н

Child Language Disorders

Semester IV	Hours of Instruction/week: 4+1
22BASC20	No of Credits: 3

Objectives: After completing this course, the student will be able to

- Explain the process of acquisition of language and factors that influence its development in children and identify.
- Assess language delay and deviance in children and select appropriate strategies for intervention.
- Counsel and provide guidance to parents/caregivers of children with language disorders.

Unit I Bases of language acquisition, development and disorders

- Theories of language acquisition 1: Biological, Psycholinguistic/syntactic theory
- Theories of language acquisition 2: Cognitive, social interaction/pragmatic, information processing, behavioral
- Pre-cursors for normal development of language
- Development of components of language from birth to two years (prelinguistic/ pre symbolicto symbolic)
- · Development of components of language during preschool period
- Development of components of language during early school age and beyond
- Basic concepts and terminologies of language development in bilingual children –simultaneous versus sequential language acquisition, additive and subtractive bilingualism, process of second language acquisition, variables influencing second language acquisition
- Development of language in culturally diverse environments and exceptional circumstances – neglect and abuse, twins, low-socio economic background
- Over view of language disorders definition and classification based on ICD, DSM
- Application of ICF in language disorders

Unit II Language disorders - definition, classification, causes, and characteristics

- Intellectual disability: definition, classification, causes and characteristics
- Autism spectrum disorders: definition, classification, causes and characteristics
- Attention deficit hyperactive disorder: definition, classification, causes and characteristics
- Language impairment mixed receptive and expressive language disorder, specific language impairment: definition, classification, causes and characteristics
- Learning disability: definition, classification, causes and characteristics
- Acquired childhood aphasia: definition, classification, causes and characteristics

63

12

12

- Sensory impairments and language disorders: types, causes and characteristics
- Syndromic conditions leading to language difficulties: William syndrome, fragile x syndrome, Down syndrome
- Other developmental disabilities: deaf-blind, cerebral palsy and multiple disabilities

Unit III Assessment of language in children

- Preliminary components of assessment: Case history, screening, evaluation of environmental, linguistic & cultural variables.
- Methods to assess children with language disorder: Formal versus informal
 assessment; types of assessment materials: assessment scales, observational
 checklists, developmental scales; standardization, reliability, validity,
 sensitivity and specificity of test materials
- Informal assessment pre-linguistic behavior, play, mother-child interaction
- Language sampling: planning and collecting representative sample; strategies to collecting language sample, audio-video recording, transcription
- Analysis of language sample: Specific to various components of language such as phonology, morphology, syntax, semantics and pragmatics.
- Test materials for assessing language skills: Assessment of Language Development(ALD), 3D-Language Assessment Test, Linguistic Profile Test, Com-DEALL checklist, other Indian and global tests
- Test materials used for children with developmental delay, intellectual disability: Madras Developmental Program Scale, Bayley's Scale for infant and toddler development
- Test materials used for children with autism spectrum disorder: Modified-Checklist for Assessment of Autism in Toddlers, Childhood Autism Rating Scale, Indian Scale for Assessment of Autism
- Other test materials used for children with ADHD, ACA, LD (NIMH battery for assessment of Learning Disability)
- Documenting assessment results: diagnostic report, summary report and referral report specific to disorder. Differential diagnosis of language disorders in children

Unit IV Management of language disorders in children - I

- General principles and strategies of intervention in children with language impairment – purpose of intervention, basic approaches to language intervention(developmental or normative approach, functional approach)
- Types of service delivery models Individuals versus group; direct versus tele-rehabilitation; structure of therapy session, setting the environment, furniture, seating arrangements
- Reinforcement in language therapy, types and schedules of reinforcement
- Choice of language for intervention, incorporating principles of multiculturalism into treatment activities
- Choosing and framing goals and Objectives: SMART Objectives
- Specific treatment techniques Incidental teaching, self-talk, parallel talk, expansion, extension, recasting, joint routines, joint book reading, whole language, modifying linguistic input, communicative temptations drill, modelling
- Focused stimulation, vertical structuring, milieu teaching, and model

12

12

• Caregivers and family in intervention: Structured and informal approaches

Unit V Management of language disorders in children - II

12

- · Team approach to intervention
- Augmentative and alternative communication types (aided and unaided) and application in child language disorders
- Specific approaches to management of children with Autism: PECS, Lovaas, TEACCH, Com-DEALL, ABA, Facilitated Communication
- Approaches to management of children with LD
- Strategies to facilitate language skills in children with disorders such as intellectual disability: Redundancy, chunking, chaining
- Use of technology in language intervention
- · Home plan and counselling for children with language disorders
- Documentation specific to the disorder: pre-therapy; lesson plan; SOAP notes
- Documentation specific to the disorder: summary report, referral report
- Decision making in therapy: transition to next objective, termination of therapy

PRACTICALS

15

- 1. Record mother-child interaction of one typically developing child in the age range of 0-1, 1-2, 2-4, 4-6 and 6-8 years of age. Compare linguistically the outputs from them other and the child across the age groups. Make inferences on socio cultural influences in these interactions.
- 2. Make a list of loan words in two familiar languages based on interaction with 10typically developing children in the age range of 2-4, 4-6, 6-8 and 8-10 years.
- 3. Discuss the influence of bi- or multilingualism on vocabulary.
- Record a conversation and narration sample from 3 children who are in preschool kindergarten, and primary school. Perform a language transcription and analyze for form, content and use.
- 5. Administer 3D LAT, ALD, LPT, Com DEALL checklist on 2 typically developing children.
- 6. Draft a diagnostic report and referral letter for a child with language disorder.
- 7. Demonstrate general language stimulation techniques and discuss the clinical application.
- 8. Demonstrate specific language stimulation techniques with appropriate materials and discuss its clinical applications.
- Draft Subjective Objective Assessment Plan (SOAP) for a pre-recorded sample of a45 minute session of intervention for a child with language disorder.
- 10. Draft a lesson plan for a child with language disorder.
- 11. Draft a discharge summary report for a child with language disorder

Total Hours 75

Text Books:

- 1. Roseberry-McKibbin, C. (2007). Language Disorders in Children: A multicultural and case perspective. Boston: Pearson Education, Inc.
- 2. Paul, R. (2013). Language disorders from infancy through adolescence (4th ed.).
- 3. St.Louis, MO: Mosby.Dwight, D.M. (2006). Here's how to do therapy: Hand-on core skills in speech language pathology. San Diego, CA: Phural Publishing
- Hegde, M.N. (2005). Treatment protocols for language disorders in children Vol. 1San Diego: Plural Publishing

- 5. Owens, R.E. (2008). Language development: An introduction (7th ed.). Boston: Pearsons
- 6. Reed, V.A. (2004). An Introduction to children with language disorders (3rd Ed.)New York: Allyn & Bacon
- 7. Rout, N and Kamraj, P (2014). Developing Communication An Activity Book, A publication by NIEPMED, Chennai. Freely downloadable from
- 8. http://niepmd.tn.nic.in/publication.php. ISBN 978-81-928032-41.

- 1. Understand the bases of language acquisition, development and disorders
- 2. Define, classify the Language disorders.
- 3. To asses language in children
- 4. Acquire knowledge about management of language disorders in children
- 5. Administer standardized test for normal and clinical population.

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1						н	М					Н		
CO2	М	M	М		М	Н	М	М				M	Н	
CO3	Н	M	Н	M	н	М	М	М	М	М	М	М	M	Н
CO4	Н	M	М	М	M	L	L	L	Н	L	Н	Н	М	М
CO ₅	М	М	Н	Н	М	Н	Н	Н	L	M	М	M	М	Н

Diagnostic Audiology-Physiological Tests

Semester IV

Hours of Instruction/week: 4+1

22BASC21	No of Credits: 3
Objectives: After completing this course, the students will l	pe able to
 Justify the need for using the different physiological audiological assessment 	tests in the
 Independently run the tests and interpret the results tear, cochlear and retro cochlear pathologies and also diagnose 	o detect the middle differentially
 Design tailor-made test protocols in immittance, AE the clinical need make appropriate diagnosis based o suggest referrals. 	Ps and OAEs as per on the test results and
Unit I Immittance evaluation	12
 Clinical significance of physiological tests in audiok 	ogy
 Immittance evaluation: Principle of immittance evaluation impedance and admittance, their components, 	nation: Concept of
 Tympanometry: definition, measurement procedure, their measurement and normative, classification of ty significance of tympanometry 	mpanogram, clinical
 Eustachian tube functioning tests of tympanometry: equalization function of ET, Valsalva, Toynbee, Wilswallow, inflation-deflation test. 	basics of pressure liam's pressure
 Overview on multicomponent and multi-frequency ty 	ympanometry
 Overview on wide band reflectance and wide band ty 	mpanometry
 Reflexometry: definition, acoustic reflex pathway, m procedure, clinical applications of acoustic reflexes, 	easurement .
Unit II Auditory evoked potentials (AEPs): Auditory bra	instem response 12
(ABR)	
 Introduction and classification of AEPs 	
 Instrumentation 	
 Principles of AEP recording techniques: 	
 Auditory brainstem response generators 	

Protocol and procedure of recording auditory brainstem response

Factors affecting auditory brainstem responses

• Role of ABR in infant hearing screening

Clinical applications of ABRABR in the pediatric population

Unit II	I Overview of other AEPs	12
•	ECochG	
•	Auditory Middle Latency Responses (AMLR) and their clinical applications	
•	Auditory Long Latency Responses (Obligatory responses) and their clinical applications	
•	Other long latency potentials such as P300, MMN, P600, N400, T-complex, CNV)and their clinical applications	
	ASSR: Instrumentation, recording and clinical applications Brainstem responses to speech and other complex signals	
	V Otoacoustic emissions	12
•	Introduction to otoacoustic emissions	
•	Origin and classification of OAEs	
•	Instrumentation	
•	Procedure of OAE measurement: SOAE, TEOAEs, and DPOAEs	
•	Interpretation of results: SOAE, TEOAEs, and DPOAEs	
•	Clinical applications of OAEs: SOAE, TEOAEs, and DPOAEs	
•	Contralateral suppression of OAEs and its clinical implications	
_	Physiological tests for assessment of vestibular system	12
•	Electronystagmography: procedure, interpretation, clinical applications	
	Video nystagmography, video occulograph	
•	Vestibular Evoked Myogenic Potentials	
	Overview of Rotatory chair test, video Head Impulse Test,	
•	Overview of Dynamic Posturography	
	TICALS	15
_	Measure admittance in the calibration cavities of various volumes and note	10
	down the observations	
2.	Calculate Equivalent ear canal volume by measuring static admittance in	
	an uncompensated tympanogram (10 ears)	
3.	Do tympanogram in the manual mode and measure peak pressure, peak	
	admittance and ear canal volume manually using cursor (10 ears).	
4.	Measure gradient of the tympanogram (10 ears)	
5.	Administer Valsalva and Toynbee and William's pressure swallow test(5 ears)	
	Record acoustic reflex thresholds in the ipsi and contra modes, (10 ears)	
7.	Plot Jerger box pattern for various hypothetical conditions that affect	
	acoustic reflexes and interpret the pattern and the corresponding condition.	
8.	Carry out Acoustic reflex decay test and quantify the decay manually using cursor (5individuals).	
9.	Trace threshold of ABR (in 5 dB nHL steps near the threshold) for clicks	
	and tone bursts of different frequencies (2 persons) and draw latency	
	intensity function.	
10.	Record ABR using single versus dual channels and, note down the	
	differences	
11.	Record ABR at different repetition rates in 10/sec step beginning with	
	10.1/11.1 per second. Latency-repetition rate function needs to be drawn.	
12.	Record with each of three transducers (HP, insert phones and bone	
	vibrator) and polarities and draw a comparative table of the same. Students	
	should also record with different transducers without changing in the	
	protocol in the instrument and calculate the correction factor required.	

- 13. Record ASSR for stimuli of different frequencies and estimate the thresholds
- 14. Record TEOAEs and note down the amplitude, SNR, noise floor and reproducibility at octave and mid-octave frequencies. Note down the stimulus stability and the overall SNR (10 ears).
- 15. Record DPOAEs and note down the amplitude, SNR, noise floor and reproducibility at octave and mid-octave frequencies (10 ears)

Total Hours 75

Text Books:

- Hall, J. W., & Mueller, H. G. (1996). Audiologists' Desk Reference: Diagnostic audiology principles, procedures, and protocols. Cengage Learning.
- 2. Hood, L. J. (1998). Clinical Applications of the Auditory Brainstem Response. Singular Publishing Group.
- Hunter, L., & Shahnaz, N. (2013). Acoustic Immittance Measures: Basic and Advanced Practice (ledition). San Diego, CA: Plural Publishing.
- 4. Jacobson, G. P., & Shepard, N. T. (2007). Balance Function Assessment and Management (ledition). San Diego, CA: Plural Publishing Inc.
- 5. Jacobson, J. T. (1985). The Auditory brainstem response. College-Hill Press.
- Katz, J., Medwetsky, L., Burkard, R. F., & Hood, L. J. (Eds.). (2007). Handbook of Clinical Audiology (6th revised North American edition). Philadelphia: Lippincott Williams and Wilkins Mc Caslin, D. L. (2012). Electro nystagmography / Video nystagmography (1 edition). San Diego: Plural Publishing.
- 7. Musiek, F. E., Baran, J. A., & Pinheiro, M. L. (1993). Neuro audiology: Case Studies (1 edition). San Diego, Calif: Singular.
- 8. Robinette, M. S., & Glattke, T. J. (Eds.). (2007). Otoacoustic Emissions: Clinical Applications (3 rd edition). New York: Thieme.

- 1. Understand the concepts of immittance, its components and the test under that, its procedures and its clinical significance.
- 2. Acquire knowledge about the auditory brainstem response, its principles, procedure and interpretation and factors affecting the tests.
- 3. To know about other auditory evoked potentials, its procedure and interpretation
- 4. Understand the origin of otoacoustic emissions, classification, procedure, interpretation and clinical applications.
- 5. To do the physiological test for assessment of vestibular systems.

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1						Н	М					Н		
CO2	М	М	М		М	Н	М	М				М	Н	
CO3	H	М	Н	M	Н	М	М	M	M	M	M	М	М	Н
CO4	Н	M	М	М	M	L	Ŀ	Ĺ	H	L	Н	Н	М	М
CO5	M,	М	Н	Н	М	Н	Н	Н	L	М	M	M	М	Н

Practicals-III (Speech-Language Pathology)

Semester IV 22BASC22

Hours of Instruction/week: 7
No of Credits: 4

Objectives:

- To understand speech and language stimulation techniques and administer test materials.
- To be able to collect and analyze different sample of voice and speech production.

Practicals:

- Speech & language stimulation techniques.
- Different samples /procedures required to analyse voice production mechanism.
 (acoustic/ aerodynamic methods / visual examination of larynx/ self evaluation)
- Different samples /procedures required to analyse speech production mechanism in children with motor speech disorders.
- To administer at least two more (in addition to earlier semester) standard tests for childhood language disorders.
- To administer at least two more (in addition to earlier semester) standard tests of articulation/ speech sounds.
- To set goals for therapy (including AAC) based on assessment/test results for children with language and speech sound disorders.
- To record a voice sample for acoustic and perceptual analysis.
- To assess parameters of voice and breathing for speech.
- Assessment protocol for children with motor speech disorders including reflex profile and swallow skills.
- Counseling for children with speech-language disorders. Show: Acoustic analysis of voice minimum of 2 individuals with voice disorders.
- Simple aerodynamic analysis minimum of 2 individuals with voice disorders.
- Self evaluation of voice minimum of 2 individuals with voice disorders.
- Informal assessment of swallowing minimum of 2 children.
- Assessment of reflexes and pre linguistic skills minimum of 2 children.
- Pre -therapy assessment and lesson plan for children with language and speech sound disorders - minimum of 2 children each.
- Case history minimum of 2 individuals with voice disorders.
- Case history minimum of 2 children with motor speech disorders
- Oral peripheral examination- minimum of 5 children Apply speech language stimulation/therapy techniques on 5 children with language disorders (with hearing impairment, specific language impairment & mixed receptive language disorder)/speech sound disorders – minimum of 5 sessions of therapy for each child.
- Exit interview and counseling minimum of 2 individuals with speech language disorders.

Total Hours-105 hours.

- 1. Understand the speech and Language stimulation techniques
- 2. Administer case history for voice and motor speech disorders.
- 3. Record and analyze different samples of voice and speech production.
- Acquire knowledge about the pre therapy assessment and lesson plan
 Understand aerodynamic analysis, perceptual analysis of voice

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1	М		Н	Н	H	H	н	L	М		L	н		
CO2	М		н	Н	Н	н	Н	L	M		L	Н		
CO3	М		Н	Н	Н	Н	Н	L	М		L	Н		
CO4	M		Н	Н	Н	Н	H	L	M		L	н		
CO5	M		Н	Н	Н	Н	Н	Н	M		L	Н		

Practicals-III (Audiology)

Semester IV 22BASC23

Hours of Instruction/week: 7
No of Credits: 4

Objective:

- To administer tests to CAPD and select type of ear moulds for different population.
- To perform special tests, hearing aid fitment, hearing aid selection and electro acoustic measurement

Practicals:

- Indications to administer special tests
- Procedures to assess the listening needs National and international standards regarding electro acoustic characteristics of hearing aids
- To administer at least 1 test for adaptation, recruitment and functional hearing loss.
- Counsel hearing aid user regarding the use and maintenance hearing aids To troubleshoot common problems with the hearing aids
- To select test battery for detection of central auditory processing disorders.
- Select different types of ear moulds depending on type of hearing aid, client, degree, type and configuration of hearing loss
- Electro acoustic measurement as per BIS standard on at least 2 hearing aids
- How to process 2 hard and 2 soft moulds How to preselect hearing aid depending on listening needs and audiological findings on at least 5 clinical situations (case files)
- How select test battery depending on case history and basic audiological information – 3 situations
- Tone decay test −2 individuals with sensori-neural hearing loss
- Strenger test 2 individuals with unilateral/asymmetrical hearing loss
- Dichotic CV/digit, Gap detection test 2 individuals with learning difficulty or problem in hearing in noise
- Hearing aid fitment for at least 5 individuals with mild to moderate and 3 individuals with mod-severe to profound
- Hearing aid selection with real ear measurement system on 3 individuals with hearing impairment

Total hours-105 hours

- 1. Administer special tests like tone decay, dichotic digits and Stenger test.
- 2. Perform hearing aid selection and fitment.
- 3. Acquire knowledge about test batteries for CAPD
- 4. Process hard and soft mould for clinical population.
- 5. Perform electro acoustic measurement and counsel the hearing aid user.

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	Q3
CO1	М		н	Н	Н	н	Н	L	М		L	Н		
CO2	М		н	Н	Н	н	Н	L	М		L	н		
CO3	M		н	Н	Н	Н	н	L	М		L	Н		
CO4	М		Н	Н	Н	н	Н	L	M		L	н		
CO5	М		Н	н	н	н	Н	Н	М		L	Н		

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Discipline Specific Elective (DSE - IV) Course Implantable Hearing Devices

Semester IV	Hours of Instruction/week: 3+1
22BASD04	No of Credits: 3
Objectives: After completing this course, the	students will be able to
 Assess candidacy for bone anchored he cochlear implants, and ABI 	earing devices, middle ear implants,
 Select the appropriate device depending audiological findings 	g on the audiological and non-
 handle post-implantation audiological derived from implantation, and counse different stages of implantation 	management and assess the benefit lthe parents/care givers during
Unit I Implantable hearing devices - basics	
 Need for implantable hearing devices 	9
History of implantable hearing devices middle ear implants, cochlear implants midbrain implants)	(bone anchored hearing devices, auditory brainstem implants and
Candidacy for implantable hearing devi	
Team involved in implantable hearing of the string of	ices
Pre-implant counseling Informed const	levices
- 1 mpidit codiscing, infollied collection	ent
Unit II Bone anchored hearing devices and r Types, components	niddle ear implants 9
 Surgical approaches, risks, complication 	
Audiological evaluations for candidacy,	IS
Assessment of benefits	contraindications
Unit III Cochlear implant and brain stem im	nlants - hacine
 Terminology, types, components and fe 	plants – basics 9
Bilateral, bimodal and hybrid cochlear	mplanta
• Factors related to selection of the device	e funding courses
Surgical approaches, risks, complication	o, funding sources
Audiological and non-audiological cand	lidooreanitania area i 12 et
Unit IV Cooklassississis	idacy enteria, contraindications
Unit IV Cochlear implants and brainstem im	plants 9
 Signal coding strategies, classification, 	types
Intraoperative monitoring by audiologis	ts
 Objective measures: ESRT, ECAP, proposentials 	
 Post implant Mapping: schedule, pre-rec parameters, impedance, compliance, rol- measures in mapping, post mapping aud Assessment of benefits and Optimiza 	e of objective and subjective
lateralear	
Unit V Implantable hearing devices - Counsel	ling and troubleshooting; 9
Kenahmiation	
 Post implant Counselling on care and mai the device 	intenance and troubleshooting of

Overview of post implant rehabilitation including AVT

Factors affecting outcome of implantable devices in adults and children

PRACTICALS

1. Watch videos of BAHA, middle ear implant, cochlear implant

2. Create hypothetical cases (at least 5 different cases) who are candidates for cochlear implantation. Make protocol for recording an EABR

3. List down the technological differences across different models of cochlear implants from different companies, their cost

4. Observation of mapping

5. Watching of videos on AVT

6. Watch video on cochlear implant surgery

Total Hours 60

15

Text Books:

1. Clark, G., Cowan, R. S. C., & Dowell, R. C. (1997). Cochlear Implantation for Infants and Children: Advances. Singular Publishing Group.

2. Cooper, H., & Craddock, L. (2006). Cochlear Implants: A Practical Guide.

Wiley.

3. Dutt, S. N. (2002). The Birmingham Bone Anchored Hearing Aid Programme: Some Audiological and Quality of Life Outcomes. Den Haag:Print Partners

4. Eisenberg, L. S. (2009). Clinical Management of Children with Cochlear Implants. Plural Publishing.

5. Gifford, R. H. (2013). Cochlear Implant Patient Assessment: Evaluation of Candidacy, Performance, and Outcomes. Plural Publishing.

6. Hagr, A. (2007). BAHA: Bone-Anchored Hearing Aid. International Journal of

Health Sciences, 1(2), 265-276.

7. Kim C. S., Chang S. O., & Lim D. (Eds.). (1999). Updates in Cochlear Implantation the 2nd Congress of Asia Pacific Symposium on CochlearImplant and Related Sciences, Seoul, April 1999 (Vol. 57). Seoul: KARGER.

8. Kompis, M., & Caversaccio, M.-D (2011). Implantable Bone Conduction Hearing Aids. Karger Medical and Scientific Publishers.

9. Mankekar, G. (2014). Implantable Hearing Devices other than Cochlear Implants. Springer India.

10. Møller A.R. (2006). Cochlear and Brainstem Implants (Vol. 64).

11. Niparko, J. K. (2009). Cochlear Implants: Principles & Practices. Lippincott Williams & Wilkins.

Course outcomes: On the successful completion of the course, students will be able to

1. Understand the history, need, candidacy for the implantable hearing aids.

2. Know Knowledge about the types, surgical methods and audiological evaluations in bone anchored hearing devices and middle implants

3. Obtain knowledge about the types, factors related to the selection, surgical procedures, and audiological evaluations for cochlear implants

4. Acquire knowledge about the signal coding strategies and objective measures after the surgery of cochlear implants and brainstem implants

5. Counsel and troubleshoot after the surgeries, to do the rehabilitation services and factors affecting the outcome

CO /	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11.	01	02	03
CO1						Н	М					Н		
CO2	M	М	М		М	Н	M	М				М	Н	
CO3	Н	М	Н	М	Н	М	M	М	M	М	М	M	M	Н
CO4	Н	М	М	М	М	L	L	L	Н	L	Н	Н	М	М
CO5	М	М	Н	Н	M	Н	Н	Н	L	М	М	М	М	н

			•
Campadana I	A 15		ale Discoulance
STLACTALM	Anomalies	and Spee	ch Disorders

Structural Anomalies and Speech Disorders	
Semester V Hours of Instruction/week: 4+1	
22BASC24 No of Credits: 3	
Objectives: After completing the course, the student will be able to	
 Understand the characteristics of disorders with structural anomalies including speech 	
Evaluate and diagnose the speech characteristics seen in these disorders	
 Learn about the techniques for the management of speech disorders in these conditions 	
Unit I Speech characteristics of persons with cleft lip and palate	12
Types, characteristics and classification of cleft lip and palate	
Causes of cleft lip and palate: genetic, syndrome and others	
 Velopharyngeal inadequacy: types, causes and classification 	
 Associated problems in persons with cleft lip and palate: speech, language, feeding, dental and occlusion, hearing, psychological 	
Unit II Assessment and management of cleft lip and palate speech	12
 Team of professionals in the management of persons with cleft lip and 	
palate: their roles in diagnosis and management.	
 Assessment of persons with cleft lip and palate for speech language 	
functions: Subjective assessment of speech characteristics and speech	
intelligibility: profoma, tests, scales and others.	
 Objective assessment of phonatory, resonatory and articulatory features 	
Diagnosis and differential diagnosis of speech related functions	
 Subjective assessment of language and communication functions 	
 Reporting test results using Universal Parameters 	
 Management of persons with cleft lip and palate 	
Surgical and prosthetic management	
 Techniques and strategies to correct speech sound disorders 	
 Techniques and strategies to improve feeding 	
Counselling and guidance	
Unit III Structural anomalies of tongue and mandible - Characteristics,	12
assessment and management	
 Types, classification and characteristics of structural anomalies of tongue and mandible 	
 Causes for structural anomalies of tongue and mandible 	
 Team of professionals in the management of persons with structural anomalies of tongue and mandible and their roles. 	
 Associated problems in persons with structural anomalies of tongue and mandible: Speech, Feeding, Dental and occlusion, Psychological and others 	
Management of persons with structural anomalies of tongue and mandible	
Surgical and prosthetic management, Techniques and strategies to improve	
speech intelligibility, Techniques and strategies to improve feeding	
Counselling and guidance for persons with glossectomy and	
mandibulectomy	
	12
 Causes, symptoms and classifications of laryngeal cancers 	

Team of professionals in the management of persons with laryngeal cancer Surgery for larvngeal cancers: types and outcome Associated problems in layngectomee individuals Assessment of speech and communication skills of lavngectomee individuals: Pre and post-operative considerations Unit V Management of speech and communication in laryngectomies 12 Esophageal speech: candidacy, types of air intake procedures, speech characteristics and its modification through techniques and strategies. complications and contraindications. Tracheo-esophageal speech: candidacy, types of TEP, fitting of prosthesis, speech characteristics and its modification through techniques and strategies, complications and contraindications. Artificial larynx: types, factors for selection, output characteristics. techniques for efficient use of artificial larynx, complications and contraindications. Other remedial procedures: Pharyngeal speech, buccal speech, ASAI speech, gastric speech. PRACTICALS 15 1. Identify the different types of cleft lip and palate by looking at illustrations and images 2. Listen to 10 speech samples of children with cleft lip and palate and rate their nasality/ speech (articulation and cleft type errors) based on universal reporting parameters. 3. Identify the type of closure of Velopharyngeal port for 5 normal individuals and 5 individuals with cleft lip and palate using videos of nasoendoscopy / videofluroscopy. 4. Perform oral peripheral mechanism examination on 10 individuals and document the structure and functions of the articulators. 5. Analyse the different types of occlusion in 10 individuals. 6. Identify the type of glossectomy by looking at pictures/illustrations. 7. Identify the different types of prosthesis in the management of head and neck cancer. 8. Analyse the speech profile of 5 individuals with laryngectomy. 9. Identify parts of an artificial larynx and explore its use.

Text Books:

invernacular.

1. Berkowitz. S. (2001). Cleft Lip and Palate: Perspectives in Management. Vol II. San Diego, London, Singular Publishing Group Inc.

10. Prepare a checklist / pamphlet illustrating care of the stoma and T- tubes

 Falzone, P., Jones, M. A., & Karnell, M. P. (2010). Cleft Palate Speech. IV Ed., Mosby Inc.

- Ginette, P. (2014). Speech Therapy in Cleft Palate and Velopharyngeal Dysfunction. Guildford, J & R Press Ltd.
- 4. Karlind, M. & Leslie, G. (2009). Cleft Lip and Palate: Interdisciplinary Issues and Treatment. Texas, Pro Ed.
- 5. Kummer, A.W. (2014). Cleft Palate and Craniofacial Anomalies: The Effects on Speech and Resonance. Delmar, Cengage Learning.

6. Peterson-Falzone, S. J., Cardomone, J. T., &Karnell, M. P. (2006). The Clinician Guide to Treating Cleft Palate Speech. Mosby, Elsevier.

Total Hours 75

- 7. Salmon . J & Shriley (1999). A laryngeal speech rehabilitation for clinicians and by clinicians. Pro Ed
- 8. Yvonne, E (Ed) (1983). Laryngectomy: Diagnosis to rehabilitation. London: Croom Helm Ltd

- 1. Understand the types, Characteristics, cause and associated problems in cleft lip and palate
- 2. Acquire knowledge about team of professionals and subjective and objective measurements in cleft lip and palate.
- 3. Understand the types, Characteristics, cause and associated problems with structural anomalies of tongue and mandible.
- 4. Acquire knowledge about team of professionals, causes, symptoms and classification of laryngeal cancers.
- 5. To understand the laryngeal surgeries and management of speech and communication in laryngectomy

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1						Н	М					Н		
CO2	М	M	М	п	М	Н	М	M				М	Н	
CO3	Н	M	Н	М	Н	М	М	М	М	М	М	M	М	Н
CO4	н	М	М	М	М	L	L	L	Н	·L	н	Н	М	М
CO5	М	M	Н	Н	М	Н	Н	Н	L	М	М	М	М	Н

Fluency and its Disorders

Tracticy and	and placed
Semester V	Hours of Instruction/week: 4+1
22BASC25	No of Credits: 3
Objectives: After completion of the cou	
 Understand the characteristics of 	fluency and its disorders
 Evaluate and diagnose fluency d 	isorders
 Learn about the techniques for the 	e management of fluency disorders
Unit I Fluency	12
 Scope and definition of fluency 	
 Factors influencing fluency 	
 Definition and characteristics of 	features of suprasegmental in speech: rate
of speech, intonation, rhythm, str	
 Suprasegmental features in typic 	
 Suprasegmental features in the sp 	peech of persons with fluency disorders
 Developmental aspects of supras 	egmental of speech
Normal non-fluency	
Unit II Stuttering and other fluency d	
Stuttering: Definition and causes	
Characteristics of stuttering: core	and peripheral characteristics, primary
and secondary stuttering, effect of	of adaptation and situation
Development of stuttering	T
Normal non fluency: characterist Theories of stattanian accounts for the state of the s	ics and differential diagnosis
 Theories of stuttering: organic, fi learning 	unctional, neurogenic, diagnosogenic and
 Cluttering: Definition, causes and 	1 abornatoriation
Neurogenic stuttering: Definition	
Unit III Assessment and differential d	
	iagnosis 12 : stuttering, cluttering, neurogenic
stuttering and normal non fluence	
Subjective methods: protocols at	
Objective methods	TG (9313
 Qualitative and quantitative asse 	ssment
Differential diagnosis of fluency	
Unit IV Management of stuttering	12
 Approaches to management 	
 Changing scenario in management 	nt of stuttering
	es used in management with their
rationale	•
 Relapse and recovery from stutte 	ring
 Issues of speech naturalness in st 	uttering

Unit V Management of fluency-related entities

- Management of cluttering: rationale, techniques and strategies
- Management of neurogenic stuttering: rationale, techniques and strategies
- Management of normal non-fluency: rationale, techniques and strategies
- Relapse and recovery in cluttering and neurogenic stuttering. Changes in normal non fluency
- Prevention and early identification of stuttering, and cluttering

PRACTICALS

15

12

- 1. Assess the rate of speech in 5 normal adults.
- 2. Record and analyse the supra segmental features in typically developing children between 2 and 5 years.
- 3. Record audio visual sample of 5 typically developing children and 5 adult's for fluency analysis.
- 4. Listen/see samples of normal non fluency and stuttering in children and document the differences.
- 5. Identify the types of dysfluencies in the recorded samples of adults with stuttering.
- 6. Instruct and demonstrate the following techniques: Airflow, prolongation, easy onset shadowing techniques.
- 7. Record 5 speech samples with various delays in auditory feedback and analyse the differences.
- 8. Administer SPI on 5 typically developing children.
- 9. Administer SSI on 5 adults with normal fluency.
- 10. Administer self-rating scale on 10 adults with normal fluency.

Total Hours 75

Text Books:

- Assessment and management of fluency disorders. Proceedings of the national workshop on "Assessment and management of fluency disorders", 25-26 Oct 2007. All India Institute of Speech & Hearing, Mysore, 2007.
- 2. Bloodstein, O., & Ratner, N. B. (2008). A Handbook on Stuttering (6th Ed.).CliftonPark, NY, Thomson Demer Learning.
- 3. Guitar, B. (2014). Stuttering-An Integrated Approach to its Nature and Treatment.4th Ed. Baltimore, Lippincott Williams & Wilkins.
- 4. Hegde, M. N. (2007). Treatment Protocols for Stuttering.CA Plural Publishing.
- 5. Howell, P. (2011). Recovery from Stuttering. New York, Psychology Press.
- Packman, A., & Attanasio, J.S. (2004). Theoretical Issues in Stuttering. NY, Psychology Press.
- Rentschler, G. J. (2012). Here's How to Do: Stuttering Therapy. San Diego, Plural Publishing
- 8. Wall, M. J., & Myers F. L. (1995). Clinical Management of Childhood Stuttering. Texas, PRO-ED, Inc.
- 9. Ward, D. (2006). Stuttering and Cluttering: Frameworks for Understanding & Treatment. NY, Psychology Press.
- Yairi, E., & Seery, C. H. (2015). Stuttering Foundations and Clinical Applications. 2nd Ed. USA, Pearson Education, In.

- 1. Understand the characteristics of fluency and factors affecting it
- 2. Understand the concept of stuttering, development, causes and theories of stuttering
- 3. Differentiate stuttering and other fluency related disorders
- 4. To treat stuttering with appropriate approaches and techniques
- 5. To give therapy for different fluency related disorders.

CO / PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O 2	PS O3
CO1						Н	M					Н		
CO2	M	М	M		М	Н	М	М				М	Н	
CO3	Н	M	Н	М	Н	М	M	М	M	M	М	M	M	Н
CO4	Н	M	M	M	M	L	L	L	Н	L	Н	Н	М	M
CO5	М	M	Н	Н	M	Н	н	Н	L	M	M	M	М	Н

raeutatric Audiology	
Semester V	Hours of Instruction/week: 4+1
22BASC26	No of Credits: 3
Objectives: After completing this course, the studen	t will be able to understand
 Describe auditory development and list etiols 	_
different types of auditory disorders that may	
 Explain different hearing screening/identification 	ation procedures and their
 Elaborate on different aspects of paediatric b /electrophysiological evaluation 	ehavioral and physiological
Unit I Auditory development	12
 Review of Embryology of the ear 	
 Development of auditory system from periph 	ery to cortex
 Neuroplasticity 	
Prenatal hearing	
 Normal auditory development from 0-2 years 	S
 Infant speech perception 	
 Incidence and prevalence of auditory disorde 	ers in children
Unit II Auditory disorders	12
 Congenital and acquired hearing loss in child 	Iren
 Permanent minimal and mild bilateral hearing 	g loss
 Impact on auditory skills, speech-language, e 	educational and socio-
emotional abilities	
 Moderate to profound sensorineural hearing 	loss
 Unilateral hearing loss 	
 Auditory Neuropathy Spectrum Disorders 	
 Central auditory processing disorders 	
 Pseudohypacusis 	
 Auditory disorders in special population and 	multiple handicap
Unit III Early identification of hearing loss	12
 Principles of early hearing detection and interest 	ervention programs
 Principles and history of hearing screening 	
 Joint Committee on Infant Hearing position 	statement (2000, 2007,2013)
 High risk register/ checklists for screening 	
 Sensitivity and specificity of screening tests 	
 Hearing screening in infants and toddlers: Ir 	idian and Global context
 Hearing screening in preschool children: Inc 	
 Hearing screening in school-age children (i 	ncluding screening for
CAPD): Indian and Global context	
Unit IV Paediatric assessment I	12
 Behavioral observation audiometry 	
 Conditioned orientation reflex audiometry 	
 Visual reinforcement audiometry, TROCA, p 	olay audiometry
 Pure tone audiometry in children: Test stimu 	li, response requirement and
reinforcement	

- Speech audiometry (SRT, SDT); Speech recognition and speech perception tests developed in India)
 Bone conduction speech audiometry
- Immittance evaluation in paediatric population

Central auditory processing disorders assessment

Unit V Paediatric assessment II

12

Recording and interpretation of OAE in paediatric population

· Factors affecting OAE in paediatric population

Recording and interpretation of click evoked and tone burst evoked ABR in paediatric population

Factors affecting ABR in paediatric population

Recording ASSR in paediatric population

- Recording AMLR, ALLR in paediatric population
- Assessment of hearing loss in special population
- · Diagnostic test battery for different age groups

Diagnosis and differential diagnosis

PRACTICALS

15

 Observe a child with normal hearing (0-2 years) in natural settings. Write a report on his/her responses to sound.

Observe a child with hearing impairment (0-2 years) in natural settings.
 Write a report on his/her responses to sound with and without his amplification device

3. Administer HRR on at least 3 newborns and interpret responses

4. Based on the case history, reflect on the possible etiology, type and degree of hearing loss the child may have.

5. Compare ABR wave forms in children of varying ages from birth to 24 months.

6. Observe live or video of BOA/VRA of a child with normal hearing and hearing loss and write a report on the instrumentation, instructions, and stimuli used, procedure and interpretation.

7. Observe OAE in a child with normal hearing and a child with hearing loss. Write a report on the instrumentation, protocol used and interpretation

8. Observe ABR in a child with normal hearing and a child with hearing loss. Write down a report on the instrumentation, protocol used and interpretation

 Observe immittance evaluation in a child with normal hearing and a child with hearing loss. Write a report on the instrumentation, protocol used and interpretation

10. Using role play demonstrate how the results of audiological assessment are explained to caregiver in children with the following conditions

11. Child referred in screening and has high risk factors in his history

12. Child with chronic middle ear disease

13. Child with CAPD

14. Child with severe bilateral hearing impairment

Total Hours 75

Text Books:

 Chan, Y. and Goddard, J.C. (2015). K J Lee's Essential otolaryngology: head and neck surgery. (11th edition). New Delhi: Atlantic Publisher and Distributers

- 2. Dhingra, P. L. (2013). Diseases of Ear, Nose and Throat (Sixth edition). Elsevier.
- 3. O'Neill, J.P. and Shah, J.P. (2016). Self-assessment in otolaryngology. Amsterdam: Elsevier
- 4. Postic, W.P., Cotton, R.T., Handler, S.D. (1997). Ear trauma. Surgical Pediatric Otolaryngology. New York: Thieme Medical Publisher Inc.
- 5. Wackym, A. and Snow, J.B. (2015). Ballenger's otorhinolaryngology head and neck surgery. (18th edition). United States: McGraw-Hill Medical

- 1. Understand the auditory development from the embryo till 2 years of child
- 2. Know about the auditory disorders both congenital and acquired
- 3. Know about hearing screening and early identification of hearing loss
- To know about behavioral and objective assessment of auditory system for children
- 5. To know about electrophysiological assessment of children and test battery for all age groups

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1						Н	М					Н		
CO2	М	М	М		М	Н	М	М				M	Н	
CO3	Н	М	Н	М	Н	M	М	М	М	М	M	М	M	н
CO4	Н	М	М	М	М	L	L	L	Н	L	Н	Н	M	М
CO5	M	М	Н	Н	М	Н	Н	Н	L	M	М	М	М	Н

Aural Rehabilitation in Children

Semester V	Hours of Instruction/week: 4+1
22BASC27	No of Credits: 3
• Desc	After completing this course, the student will be able to understand cribe the different communication options available for young children hearing impairment
spok	lain the impact of hearing impairment on auditory development and ten language communication
sign	merate how the needs of individuals with hearing impairment using language and spoken language as form of communication in India are g met
Unit I Audi accessibility	itory development, spoken communication and acoustic
_	itivity period for auditory development
 Impa acqu 	act of hearing impairment on auditory development, spoken language isition, parent child communication
• Facto	ors affecting auditory development
Optn	ing loss implications for speech perception: acoustics of speech mizing hearing potential through hearing aids
 Barr. 	mizing hearing potential through cochlear implants iers to acoustic accessibility: distance, signal to noise ratio, beration
 Signa deska 	aging the listening environment for infants, toddlers' schools at to noise ratio enhancing technologies personal FM, loop systems, top group systems, blue tooth connectivity
Unit II Con	imunication options 12
 Deter 	cting and confirming hearing loss
• Parer	nt support counselling, individual family service plan
	osing communication options
Audi	tory oral approach, Auditory verbal therapy
• Man	nal/sign language: Indian and Global context
• Cued	speech and total communication
Lister Text	ning devices hearing aid/cochlear implant
• Early	intervention programs
childhood	rimal listening and learning environments infancy and early 12
	lvement of family, Factors impacting family involvement, supporting
fami	lies through information and education
• Crea	ting optimum listening and learning environment
 Inter 	vention: Assessment, auditory learning, listening and language
facili	tation techniques in infancy and early childhood
 Issue 	s with children with mild hearing loss, unilateral hearing loss
 Chile 	lren with hearing loss, ANSD or APD: Children are intervened late lren with hearing loss and other special needs

 Lister 	ning and spoken language in school age: benefits of inclusion,	
Interv	vention at school age: Functional hearing assessment, communication	
asses	sment and intervention to integrate with academic targets	
Unit IV Aud	itory - speech reading training and literacy	12
• Can	didacy for auditory training and speech reading	
Aud	itory training/learning four design principles skill, stimuli, activity,	
	difficulty level	
• Earl	y training Objectives	
Ana	lytic and Synthetic training Objectives	
	nal and informal training	
	itory training for infants and very young children	
	comes of training	
	ech and language and literacy characteristics	
_	ech language and literacy evaluation assessment	
-	ech language therapy	
_		12
	lence of hearing impairment in children	
	ation of the deaf in India historical perspectives	
	able resources for education of the hearing impaired	
	intervention programs and centers	
_		
	ols for the hearing impaired; day schools, residential schools	
_	nd school: college and vocational training	
	ing manpower resources for service delivery	
	n sign language	
	ing sign language interpreters	
	speech in India	
	sment and therapy tools developed for individuals with hearing	
-	rment in India.	
PRACTICA		15
	n documentaries such as "Sound and Fury" (2001). Write a reflection	
	y parents made communication choices for their children	
	w on links to the above film that shows the status of the children with	
	ag impairment after a few years.	
	at least 50 signs across different categories of Indian sign language. a video of you signing 10 sentences. Have a class mate interpret	
them		
	iew a parent of a child with hearing impairment on how they adapted	
	child to wear the hearing aids and /or implant. What were the first	
	nses to sound they observed and how language and speech develop?	
_	elete a functional auditory evaluation on one child with hearing loss.	
	speech and language evaluation and also write a report on the child	
	ths and weakness.	
	n and demonstrate auditory learning activities at the four levels	
	mess, discrimination, identification and comprehension. Ensure that	
	tivities encompass different skill level and difficulty levels.	
	op a short audio/film/pamphlet for parents in your local language on	
	f the following: teaching parent to trouble shooting the hearing	
	chlear implant, establishing consistent use of listening device,	
	ties to facilitate language across different age groups	

8. Visit a school for the deaf. Document your observation about the acoustic environment in the class, strategies used by the teacher to promote listening and spoken language

Total Hours 75

Text Books:

- Fitzpatrick, E.M., and Doucet S.P. (2013) (Eds). Paediatric Audiologic Rehabilitation. Thieme, New York
- Hosford Dumm, H., Roser, R., & Valente, M. (2007). Audiology Practice Management (2nd edition edition). New York: Thieme.
- Mardell, J., & Flexer, C. (2013). Paediatric Audiology: Diagnosis, Technology, and Management (2nd Ed.). New York, NY: Thieme.
- Rout, N and Rajendran, S. (2015). Hearing aid Counselling and Auditory training Manual, A publication of NIPMED, Chennai. Freely downloadable fromhttp://niepmd.tn.nic.in/publication.php. ISBN 978-81-928032-5-8.
- 5. Schwartz, S., (2007) Choices in Deafness: a Parent's guide to Communication Options, 3rd edition Woodbine house Bethesda
- 6. Status of Disability in India Hearing Impairment (2012) Rehabilitation Council of India, New Delhi
- 7. Tye-Murray, N., (2014) Foundations of Aural Rehabilitation: Children, adults and their family members 4th edition Plural Publishing San Diego

- 1. To know auditory development and its sensitivity period and factors affecting it
- 2. To know about various communication options which are available hearing impaired
- 3. Know the learning environment for the HI and family members and factors affecting it
- 4. To choose the candidate for auditory training and speech language therapy for HI
- 5. Know about Indian perspectives regarding prevalence, education and early intervention, sign language for HI

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CQ1						Н	М					Н		
CO2	М	M	M		M	Н	M	M				М	Н	
CO3	Н	M	Н	М	Н	M	М	М	M	М	М	M	M	Н
CO4	Н	M	M.	M	М	Ľ.	L	L	Н	L	н	Н	M	М
CO5	М	M	Н	Н	М	Н	Н	Н	L	M	М	M	M	Н

Practicals-IV (Speech -Language Pathology)

Semester V 22BASC28 Hours of Instruction/week: 6 No of Credits: 4

Objectives:

- To Administer standardized tests for various disorders.
- To perform assessment and prepare report for voice, language, cleft lip and palate and fluency disorders.

Practicals:

- To administer at least two more (in addition to earlier semesters) standard tests for childhood language disorders.
- To record a speech sample for analysis of fluency skills (including blocks & its frequency, rate of speech, prosody, etc.).
- To assess posture and breathing for speech in children with motor speech disorders.
- To consult with inter-disciplinary medical/rehabilitation team and counsel the individual/family regarding management options and prognosis.
- Rating of cleft, speech intelligibility and nasality minimum of 2 individuals with cleft lip and palate.
- Language assessment minimum of 2 individuals with cleft lip and palate.
- Transcription of speech sample and assessment of percentage dis/dysfluency—minimum of 2 individuals with stuttering.
- Assessment of rate of speech on various speech tasks at least on 2 children & adults.
- Voice assessment report minimum of 2 individuals with voice disorders.
- Fluency assessment report minimum of 2 individuals with fluency disorders.
- Oral peripheral examination on minimum of 2 individuals with cleft lip and palate.
- Apply speech language stimulation/therapy techniques on 5 children with language disorders/speech sound disorders/ motor speech disorders – minimum 5 sessions of therapy for each child.

Total hours-90 hours

Course outcomes: On the successful completion of the course, students will be able to

- 1. Administer standardized tests for various disorders.
- 2. Record and analyze samples of fluency, voice and language disorders.
- 3. Prepare voice and fluency assessment report.
- 4. Apply speech and language therapy techniques for clinical population.
- 5. Rate speech intelligibility nasality for cleft lip and palate.

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1	М		н	Н	Н	Н	Н	L	М		L	Н		<
CO2	М		H.	Н	Н	н	Н	L	М		L	Н		
CO3	М		н	Н	Н	Н	н	L	М		L	Н		
CO4	М		Н	Н	Н	Н	Н	L	M		L	Н		
CO5	M		Н	Н	Н	Н	Н	Н	M		L	Н		

90

Practicals-IV (Audiology)

Semester V 22BASC29

Hours of Instruction/week: 6 No of Credits: 4

Objectives:

- To Administer various protocols for tympanometry, reflexometry, OAE and ABR.
- To perform speech stimulation and auditory training techniques.

Practicals:

- Different protocols in tympanometry and reflexometry.
- Different protocols used in auditory brainstem responses
- Protocols for screening and diagnostic otoacoustic emissions
- Tests to assess vestibular system Different indications for selecting implantable hearing devices
- Various speech stimulation and auditory training techniques
- To administer auditory brainstem responses for the purpose of threshold estimation and sight of lesion testing
- To administer high frequency tympanometry and calculate resonance frequency
- To administer high risk register
- To modify the given environment to suit the needs of hearing impairment
- Analysis of ABR waveforms threshold estimation 5 and site of lesion 5 Analysis of Immittance audiometry and relating to other tests – 5 individuals with conductive and 5 individuals with sensori-neural hearing loss
- How to formulate select appropriate auditory training technique based on audiological evaluation
- Threshold estimation on 5 infants (< 2 years) TEOAE and DPOAE on 5 infants (< 3 years) 2 children (3-6 years)
- Listening age of 3 children with hearing impairment Appropriate auditory training on 5 children with hearing loss.

Total hours-90 hours

Course outcomes: On the successful completion of the course, students will be able to

- 1. Administer different protocols of tympanometry, reflexometry, OAE and ABR.
- 2. Asses vestibular system.
- 3. Formulate speech stimulation and auditory training techniques.
- 4. Know to modify environment to suit needs of hearing impaired.
- 5. Perform threshold estimation and give appropriate auditory training.

CO / PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O 2	PS O3
CO1	М		н	н	Н	Н	Н	L	М		L	н		
CO2	M		н	Н	Н	Н	Н	L	М		L	н		
CO3	M		Н	Н	Н	Н	Н	L	M		L	H		
CO4	M		Н	Н	Н	Н	Н	L	М		L	Н		
CO5	M		Н	Н	Н	Н	Н	н	M		L	Н		

91

Audiological and Speech Mar	nagement (Self Study)
Semester V	Hours of Instruction/week: 1
22BASC30	No. of Credits: 4
Objectives: After completing this course, the str	
 To Know the Management Techniques i pathology 	n Audiology and Speech Language
 To Know about the benefits and scheme to the Persons with Disability 	s provided by the Government and NGO
 To learn about the Team approach and in 	mportance of counselling
Unit I Audiological Management	3
Audiological screening	3
Protocols for Screening	
• CAPD	
Aural rehabilitation	
Vestibular rehabilitation	
Unit II Speech Management	3
• ABA	
Floor time, Play Therapy	
Smile Train	
• AAC	
 Hanen approach, TEACCH, PROMPT 	
Unit III Government Schemes and Policies	3
• ADIP	
• SSA	
DEIC NPPCD	
Other State and National Schemes	
Unit IV Multidisplinary approach Team members	3
Their role in management	
Importance of Multidisciplinary approach	n
 Outcome of multidisciplinary approach 	
• CBR	
Jnit V Counselling	3
Meaning	
 Nature & Scope of counselling 	
 Principles and goals of counselling 	
 Types and Techniques: Individual and G 	roup counselling
Applications of counselling	
	Total Hours 15

Recommended Books:

- 1. Fitzpatrick, E.M., and Doucet S.P. (2013) (Eds). Paediatric Audiologic Rehabilitation. Thieme, New York
- 2. Hosford Dumm, H., Roser, R., & Valente, M. (2007). Audiology Practice Management (2nd edition edition). New York: Thieme.
- 3. Mardell, J., & Flexer, C. (2013). Paediatric Audiology: Diagnosis, Technology, and Management (2nd Ed.). New York, NY: Thieme.
- 4. Rout, N and Rajendran, S. (2015). Hearing aid Counselling and Auditorytraining Manual, A publication of NIPMED, Chennai. Freely downloadable fromhttp://niepmd.tn.nic.in/publication.php. ISBN 978-81-928032-5-8.

Course Outcome:

CO1: To gain Knowledge about the management techniques in audiology

CO2: To gain Knowledge about the other management techniques in Speech

CO3: To know about the Schemes and policies provided by the government

CO4: To gain Knowledge about the multidisciplinary management

CO5: To gain Knowledge about the Counselling and their applications

CO	P	P	P	P	P	P	P	P	P	P	P	PS	PS	PS
/PO	0	02	0	0	0	06	0	08	09	O	0	01	02	03
	1		3	4	5		7			10	11			
CO1	Н		L	L	L	L	L	M		1111		H	M	M
CO2	Н	M	Н	M	M	Н	M	Н	M		M	Н	Н	M
CO3	Н		Н		Н	Н		Н	L	M	L	Н	Н	L
CO4	Н	L	Н	Н	Н	Н	M	Н	L			Н	Н	M
CO5	M	M	Н	Н	Н	Н	Н	Н	L			Н	Н	M

Motor Speech Disorders in Adults

Semester VI
22BASC32
Objectives

Hours of Instruction/week: 4+1 No of Credits: 3

- To understand the characteristics of acquired motor speech disorders in adults
- To evaluate and diagnose speech characteristics in acquired motor speech disorders
- To learn about the techniques for the management of speech and related errors in acquired motor speech disorders

Unit I: Causes & Characteristics of dysarthria

· Definition, etiology and classification of acquired dysarthria

- General, speech and feeding related characteristics of acquired dysarthria with and without genetic underpinnings;
- Vascular lesions: dysarthria following stroke/CVA, cranial and peripheral nerve palsies
- Infectious condition of the nervous system: dysarthria following meningitis, encephalitis, polyneuritis, poliomyelitis, neurosyphilis.

• Traumatic lesions: Dysarthria following TBI.

- Toxic conditions of the nervous system: Dysarthria following exogenic and endogenic toxic conditions of the nervous system.
- Anoxia of the nervous system: Dysarthria following anoxic conditions
 Metabolic disorders affecting nervous system: Dysarthria following
 metabolic conditions that affect the nervous system, Wilson's disease etc.

Idiopathic causes: Dysarthria following idiopathic causes

- Neoplastic lesions of nervous system: Dysarthria following neoplastic lesions in the nervous system
- Demyelinating and degenerative conditions: Huntington's Chorea, Parkinson's, Multiple Sclerosis, Motor Neuron Diseases

Unit II: Assessment and diagnosis of dysarthria

Subjective assessment of dysarthria:

- Assessment of respiratory, phonatory, resonatory, articulatory errors Assessment of prosodic features
- Assessment of speech intelligibility
- Scales, protocols and tests used for subjective assessment of dysarthria
 Instrumental analysis of speech in dysarthria: Acoustic, kinematic and
 physiological Advantages and disadvantages of subjective and
 instrumental procedures in the assessment of dysarthria in adults
- Differential diagnosis of acquired motor speech disorders in adults:
 Dysarthria and verbal apraxia, Dysarthria and functional articulation disorders Dysarthria and aphasia, Apraxia of speech and aphasia,
 Dysarthria from other allied disorders such as agnosia, alexia, agraphia etc. Apraxia from other allied disorders such as agnosia, alexia, agraphia etc.

12

12

•	Assessment of feeding, swallowing and related issues in persons with dysarthria	
Unit III	: Management of dysarthria	12
•	Management of acquired dysarthria	
•	General principles in the management of dysarthria	
•	Influence of medical, prosthetic and surgical procedures on the speech in persons with acquired dysarthria.	
•	Facilitative approach: vegetative, sensorimotor and reflex based.	
•	Systems approach: correction of respiratory, phonatory, resonatory, articulatory and prosodic errors.	
•	Strategies to improve speech intelligibility and speech enhancement	
	techniques Strategies to improve feeding, swallowing behavior in persons with acquired dysarthria	
Unit IV	: Assessment and management of apraxia in adults	12
•	Definition, etiology and classification of acquired apraxia Characteristics of nonverbal apraxia's in adults Characteristics of verbal apraxia's in adults	
•	behavioral profiles	
•	Instrumental analysis of the speech of apraxia in adults: Acoustic, Kinematic and Physiological	
•	Management Approaches for verbal & nonverbal apraxia: principles and strategies	
Unit V	Management related issues in motor speech disorders	12
•	Team involved in the management of persons with acquired dysarthria and apraxia	
•	Issues related to maintenance and generalization of speech in dysarthria and apraxia	
•	Counselling and guidance for persons with acquired dysarthria and apraxia	
•		
PRACT	TICALS	15
•	Identify the cranial nerves and mention its origin and insertion from a picture/ model. Demonstrate methods to assess the cranial nerves Assess the respiratory system using speech and non-speech tasks in 10 healthy adults.	
•		
•	Looking at a video identify the clinical signs and symptoms of different neurological conditions resulting in Dysarthria.	
•	Record the speech sample of 5 normal adults and compare with the audio	
	sample of individuals with Dysarthria.	
•	Administer Duffy's intelligibility rating scale on 5 healthy adults. Administer Frenchay's Dysarthria Assessment on 5 healthy adults.	
	Demonstrate activities to improve the functions of speech subsystem.	
	Identify the signs of UMN and LMN based on a video.	
•	Prepare a low tech AAC for functional communication for an individual with apraxia.	

Text Books:

- 1. Brookshire, R. H. (2007). Introduction to Neurogenic Communication Disorders. University of Virginia, Mosby.
- Duffy, J. R. (2013). Motor Speech Disorders: Substrates, Differential Diagnosis, and Management (3rdEd.). University of Michigan, Elsevier Mosby.
- 3. Dworkin, P.J. (1991). Motor Speech Disorders: A Treatment Guide. St. Louis: Mosby.
- Ferrand, C. T., & Bloom, R. L. (1997). Introduction to Organic and Neurogenic Disorders of Communication: Current Scope of Practice. US, Allyn & Bacon.
- 5. Goldenberg, G. (2013). Apraxia: The Cognitive Side of Motor Control. Oxford University Press, UK.
- 6. Lebrun, Y. (1997). From the Brain to the Mouth: Acquired Dysarthria and Dysfluency in Adults. Netherlands, Kluwer Academic Publishers.
- Murdoch, B. E. (2010). Acquired Speech and Language Disorders: A Neuroanatomical and Functional Neurological Approach (2nd Ed.). New Delhi, India: John Wiley & Sons.
- 8. Papathanasiou, I. (2000) (Eds.). Acquired Neurogenic Communication Disorders A Clinical Perspective, Chapters 5, 6 & 7.London, Whurr Publishers.
- Yorkston, K. M., Beukelman, D. R., Strand, E. A., & Hakel, M. (2010).
 Management of Motor Speech Disorders in Children and Adults (3rd Ed.).
 Austin, Texas; Pro-Ed Inc.

Course Outcome:

- 1. Understand the causes and characteristics of dysarthria
- 2. Gain knowledge about assessment and diagnosis of dysarthria
- 3. Students will know the management of dysarthria
- 4. Acquire knowledge on the assessment and management of apraxia in adults
- 5. Know about the management related issues in motor speech disorders

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1						Н	M					Н		
CO2	M	M	M		М	Н	M	М				M	Н	
CO3	Н	M	Н	M	H	М	M	М	М	М	М	М	М	Н
CO4	Н	M	M	M	M	L	-L	L	Н	L	Н	H	М	M
CO5	M	M	Н	Н	М	Н	Н	Н	L	M	M	M	М	Н

Language Disorders in Adults	
Semester VI Hours of Instruction/wee	ek: 4+1
22BASC33 No of Cr	edits: 3
Objectives:	
To understand the characteristics of language in adults	
 To evaluate and diagnose speech characteristics in adults with languate disorders 	ıge
 To learn about the techniques for the management of speech and rela errors in language disorders seen in adults 	ited
Unit I: Neural bases of language	12
 Correlates of language functions: Neuroanatomical Neurophysiolog Neurobiological Cognitive 	ical
 Neurolinguistic models of language processing Connectionist mode 	İs
 Hierarchical models Global models Process models Computational 	
models, Language process in bi/multilingualism Language processin right hemisphere	ng in
Unit II: Language disorders in adults	12
 Definition, causes and characteristics of speech, language and cogni Aphasia: cortical and subcortical 	tion in
 Primary progressive aphasia Traumatic brain injury Right hemisphe damage Schizophasia 	re
Dementia	
 Differential diagnosis of various language disorders seen in adults. 	
Unit III: Assessment and diagnosis of language disorders	12
 Assessment of the following in aphasia, primary progressive aphasia traumatic brain injury, right hemisphere damage, Schizophasia and dementia 	1 ,
Linguistic behaviour including speech: scales, tests, protocols.	
 Assessment of cognitive, social, behavioral characteristics Medical 	
Investigation: Neuroimaging.	
Unit IV: Management of language disorders	12
Medical, linguistic and programmed intervention for persons with	
Aphasia: cortical and subcortical	
 Primary progressive aphasia Traumatic brain injury Right hemispher damage Schizophasia, Dementia 	re
Unit V: Rehabilitation issues relating to adult language disorders	12
 Team involved in the rehabilitation of persons with adult language 	
disorders Factors influencing the assessment and intervention for lar in the context of bilingual and multilingual influences.	ıguage
 Factors influencing the assessment and management of language in 	
persons who are preliterate, illiterate and literate.	
 Assessment of quality of life, Recovery patterns and prognosis in ad 	
with language disorders Age related influence in adults with language	
disorders Counselling and guidance for adults with language disorder	
 Generalization and maintenance issues in adults with language disor Augmentative and alternative strategies for adults with language disor 	

15 PRACTICALS

1. Identify different lobes of in the brain by looking at a model/ image and label the language areas.

2. Administer a standardized test battery on 3 normal individuals to assess language and cognition.

3. Administer bilingual aphasia test on 3 healthy normal adults.

4. List the language characteristics in different types of aphasia from a video. Analyse the speech, linguistic and non-linguistic features seen in Right hemisphere damaged individual from a video.

5. In a given brain model mark the subcortical structures involved in language processing/production.

6. Demonstrate various facilitatory and compensatory therapy techniques in the management of aphasia.

7. Formulate activities to assess linguistic abilities in dementia and aphasia. Counsel by a role play for a given profile of an individual with adult language disorder.

8. Prepare a counselling checklist /guideline that can be used with the family members of an individual with aphasia and traumatic brain injury.

Text Books:

1. Chapey, R. (2008). Language Intervention strategies in aphasia and related neurogenic communication disorders.

Philadelphia: Lippincott Williams and Wilkins Davis, G. A. (2014). Aphasia and related Communication Disorders. Pearson Education Inc.

3. Edwards, S. (2005). Fluent Aphasia. Cambridge University Press.

4. Laine, M. & Martin, N. (2006). Anomia: Theoretical and Clinical Aspects. Psychology Press.

5. Lapointe, L. L. (2005). Aphasia and related neurogenic language disorders. (3rdEdn.). Thieme.

6. Lapointe, L. L., Murdoch, B. E., & Stierwalt, J. A. G. (2010). Brain based Communication Disorders. Plural Publishing Inc.

7. Stemmer, B., & Whitaker, H. A. (Eds.). (2008). Handbook of Neuroscience of Language. Elsevier.

8. Whitworth, A., Webster, J., & Howard, D. (2005). A cognitive neuropsychological approach to assessment and intervention in aphasia: A clinician's guide. Psychology Press.

Course Outcome:

- 1. Gain knowledge about the neural basis of language
- 2. Learn about the language disorders in adults
- 3. Understand the assessment and diagnosis of language disorders.
- 4. Analyze the management of language disorders
- 5. Acquire knowledge on the rehabilitation issues relating to adult language disorders

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1						Н	М					Н		
CO2	M	М	М		М	H	M	М				М	Н	
CO3	Н	М	Н	М	Н	М	М	М	М	М	М	М	М	Н
CO4	Н	M	M	М	М	L	L	L	Н	L	Н	Н	М	М
CO5	М	М	Н	Н	М	н	Н	Н	L	М	М	М	М	Н

Aural Rehabilitation in Adults

Semester VI	Hours of Instruction/week: 4+1
22BASC34	No of Credits: 3
Objectives:	
 To describe the impact on the quality of life impairment 	•
 Able to explain the principles benefits and and speech reading recognize factors that in suggest facilitative and repair strategies 	
 Administer different tools for assessment o and beliefs that can impact aural rehabilitat 	
Unit I: Aural rehabilitation	12
 Definition 	
 Scope of aural rehabilitation in adults 	
 Prevalence of hearing loss in children (glob of hearing loss in adults (global and Indian 	
 Relationship between audiometric data, her 	aring difficulties and
amplification considerations	
 Limitations of audiometric data 	
 Quality of life and impact on income, educ communication handicap: interviews, ques rehabilitation 	
Unit II: Listening training and speech reading for	or adults 12
 Listening to speech with a hearing loss Car 	ndidacy for auditory training
 Listening training to improve speech perce 	ption
 Listening training to improve music perceptraining 	tion Benefits of auditory
 Speech reading for communication 	
 Characteristics of good lip readers versus g affecting speech reading 	good speech readers Factors
 Assessing vision only auditory only proces speech reading training 	sing Traditional methods of
Unit III: Communication strategies	12
 Factors that influence the reception of spok 	ten message
 Facilitative communication strategies Repa 	ir strategies
 Repairing a communication breakdown 	
 Conversational styles 	
 Communication strategies training formal is real world practice 	instruction, guided learning,
Unit IV: Aural rehabilitation for adults	12
 Principles of aural rehabilitation in adults I loss Support through counselling 	Psychological impact of hearing
 Orienting towards hearing aid use 	
 Needs assessment for non-hearing and assi Categories of assistive technology 	stive technology for adults

- Aural rehabilitation programs: Individual vs group Components of aural rehabilitation program Process of aural rehabilitation: Communication under adverse listing conditions Unit V: Aural rehabilitation for older adults 12 • Influence of aging on the older adults: quality of life and psychological perspectives Influence of aging on the older adults; quality of life and social perspectives Auditory barriers to communication Non auditory barriers to communication Barriers to aural rehabilitation · Factors influencing hearing aid use by the older adult Aural rehabilitation for different populations of older adult: independent and semi- independent older adult Aural rehabilitation for different populations of older adult: dependent older adult Aural rehabilitation in an old age home Hearing aid orientation PRACTICALS 15 • All scales and tools available in Hull R. H; Introduction to aural rehabilitation • Listen to the speech recorded using hearing loss simulators (available on internet) and experience the sounds as heard by persons with different degrees of hearing loss. Write your observations on the same Simulate hearing loss by plugging ears and administer sentence tests of word recognition. · Write a report on the performance Administer any three self-report questionnaires to three adults who have hearing loss and write a report of the relationship of their hearing loss to performance on the scale Administer any three self-report questionnaires to three older adults who have hearing loss and write a report of the relationship of their hearing loss to performance on the scale
 - (Saunders, 2013) on an adult.
 Identify the positive and negative attitude and behavior that may impact the success of aural rehabilitation

Administer any three self-report questionnaires to three adults who wear hearing aids and write a report of the relationship of their hearing loss to performance on the scale Administer the hearing belief questionnaire

- Design a session of aural rehab program (Objectives, activities, outcomes assessment) for adults recently fitted with cochlear implant, group of 4 older adults. Design an individualised program for an executive using a hearing aid for the first time, and an adult moving from an analog to a digital hearing aid
- Develop a pamphlet in your local language that would address any topic in aural rehabilitation

Total Hours 75

Text Books:

- 1. Hull, R. H., (2014) ed. Introduction to Aural Rehabilitation 2nd edition Plural Publishing, San Diego Chapters 1, 2, 11 to 20
- 2. Schow, R.L. & Nerbonne, M.A., (2012). Introduction to Audiologic Rehabilitation (6th edition), Allyn & Bacon, Boston.

3. Tye-Murray, N., (2014). Foundations of Aural Rehabilitation: Children, adults and their family members 4th edition Plural Publishing San Diego Chapters 5-10

- 1. Acquire knowledge about aural rehabilitation
- 2. Know about listening training and speech reading for adults
- 3. Gain knowledge on communicative strategies
- 4. Understand the aural rehabilitation of adults
- 5. Know about aural rehabilitation of older adults

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1						Н	M					Н		
CO2	М	М	М		М	Н	М	М			1	М	Н	
CO3	Н	М	Н	М	Н	М	М	М	M	М	M	М	M	Н
CO4	Н	М	M	М	M	L	L	L	Н	L	Н	Н	М	М
CO5	М	М	Н	н	М	Н	H	Н	L	М	М	М	М	Н

Audiology	in	Practice
THUMBULL		TIMULTU

Semester		
22BASC3	No of Credits: 3	
Objective	es:	
	Able to list and describe the highlights of legislations relating to hearing impairment and other disabilities and incorporate ethical practices in professional service delivery.	
•	Provide information on welfare measures, policies of government when needed describe different strategies to create awareness of hearing impairment and programs to address them	
	Explain the different clinical practice settings in audiology with reference to their requirement, protocols and role and responsibility of audiologist	
	cope, legislation and ethics in audiology	12
	Scope of practice in audiology (National – ISHA & International body - AAA) Professional ethics (ISHA)	
	Legislations and conventions relating to disability: need and historical aspects	
	Classification of hearing impairment and disability certification, Rehabilitation Council of India Act (1992) and its amendments Person with Disability Act (1995)	
	National Trust Act (1999) Right to Education (2012)	
	Biwako Millennium framework (2003) and Salamanca Statement 1994 UNCRPD	
	Concept of barrier free access and universal design relating to individuals with hearing impairment	
Unit II: 1	Hearing health and strategies for prevention of hearing impairment	12
•	Epidemiology of hearing disorders ICD and ICF	
•	Levels of prevention: Primary, secondary and tertiary	
•	National programs and efforts national institutes Welfare measures by Government, Camps (planning, purpose, organizing and providing remedial measures)	
•	Public education and information (media, radio broadcasts, street plays)	
•	Hearing health and prevention programs (hearing help line, dangerous decibels, online hearing tests etc.)	
Unit III:	Audiological practice in different settings	12
•	Audiological Private practice ENT clinics	
. •	Paediatric / neonatology clinic/departments	
•	Neurology departments Factories and Industry	
•	Hearing aid dispensing center/hearing aid industry Rehabilitation	
	centers such as DRC/CRCs Schools for the hearing impaired	
•	Cochlear implant clinics	
•	Multiple handicap habilitation center and others	
Unit IV:	Noise and hearing conservation in industry and community	12
•	Introduction to noise, types	
•	Sources of noise in the industry and community	
•	Effects of noise in the auditory system (outer, middle and inner ear)	

- Temporary threshold shift, permanent threshold shift, factors increasing the risk of NIHL
- Non auditory effects of noise (physiological, psychological, stress, sleep, job productivity and accidents)
- Legislations related to noise, permissible noise exposure levels, workers compensation, OSHA standards, Indian legislations related to noise
- Instrumentation, measurement and procedure for measuring noise in industry Instrumentation, measurement and procedure for measuring noise in community Hearing conservation program (HCP), steps, record keeping, Ear protective devices

Unit V: Scope and practice of tele-audiology

- Introduction to tele-health: definition, history of tele-health
 Terminologies-tele-health, tele medicine, tele practice Connectivity: internet, satellite, mobile data
- Methods of tele-practice-store and forward and real time Ethics and Regulations for tele-audiology
- Requirements/Technology for tele- audiology: Web based platforms,
 Video conferencing, infrastructure
- Manpower at remote end and audiologist end, training assistants for tele-audiology Audiological screening using tele-technology: new born hearing screening, school screening, community screening, counselling
- Diagnostic audiological services using tele-technology: video otoscopy, pure tone audiometry, speech audiometry, oto acoustic emission, tympanometry, auditory brainstem response
- Intervention / aural rehabilitation using tele-technology: hearing aid counselling and troubleshooting, tinnitus, counselling, aural rehabilitation services. AVT, and counselling

PRACTICALS

- Undertake the activities such as 'Dangerous decibel" program (www.dangerousdecibels.org)
- Noise measurement and attenuation measurement of ear protection devices.
- Sound level meter measurement in different areas (generator room, audio rooms) Speech in noise assessment for 10 subjects
- Visit an audiologist in different practice settings and provide a report Administer ICF protocols for patients with different disorders
- Explore websites of national institutes, hearing aid companied, NGOs in disability field and describe the accessibility features and information provided
- Remote control a PC based audiology equipment connected to internet using any authorized desktop sharing software
- Develop one pamphlet/poster/ in local language that would address some aspect of audiology practice
- Perform Accessibility ability of your institute/center and prepare a report

Total Hours 75

Text Books:

 Audiology Telepractice; Editor in Chief, Catherine V. Palmer, Ph.D.; Guest Editor, Greg D. Givens, Ph.D. Seminars in Hearing, volume 26, number 1, 2005. 12

15

- Bergland, B., Lindwall, T., Schwela, D.H., eds (1999). Guidelines on Community noise http://www.who.int/docstore/peh/noise/guidelines2.html WHO 1999
- BIS specifications relating to Noise Measurements.- IS:7194-1973
 Specification for assessment of noise exposure during work for hearing conservation purposes.
- 4. Census of India information on disability
- 5. Dobie, R. A (2001). Medical legal evaluation of hearing loss, 2nd Ed.
- Hearing health and strategies for prevention of hearing impairment WHO (2001). International classification of Functioning, Disability and Health. Geneva: WHO http://www.asha.org/Practice-Portal/Professional-
- 7. Issues/Audiology-Assistants/ Teleaudiology-Clinical-Assistants/ http://www.asha.org/uploadedFiles/ModRegTelepractice.pdf
- 8. IS:10399-1982 Methods for measurement of noise emitted by Stationary vehicles IS:6229-1980 Method for measurement of real-ear
- 9. IS:9167-1979 Specification for ear protectors. 95
- IS:9876-1981 Guide to the measurement of airborne acoustical noise and evaluation of its effects on man- IS:7970-1981 Specification for sound level meters.
- 11. IS:9989-1981 Assessment of noise with respect to community response.
- John Ribera. Tele-Audiology in the United States. In Clinical Technologies: Concepts, Methodologies, Tools and Applications (pp. 693-702), 2011. Hershey, PA: Medical Information Science Reference. doi:10.4018/978-1-60960-561-2.ch305
- 13. Lipscomb, D. M. (1994). Hearing conservation In industry, schools and the military.
- Mandke, K and Oza R.K (2014). Private practice in speech pathology and audiology, 2014 ISHA
- Philippe Valentin Giffard. Tele-Audiology. Tort, 2012. ISBN 6139256615, 9786139256617
- Rawool, V. W. (2012). Hearing conservation in occupational, recreational, educational and home setting. Thieme: New York
- 17. RCI, PWD and National Trust, and Right to education act
- Richard Wootton, John Craig, Victor Patterson, editors. Introduction to telemedicine. Second edition. London: The Royal Society of Medicine Press Ltd. 2006. p. 206 ISBN: 1 85315 677 9.
- 19. Salamanca statement and framework for action Scope of practice by RCI
- 20. Swanepoel de W, Hall JW 3rd .A systematic review of tele health applications in audiology. Telemed J E Health. 2010 Mar;16(2):181-200. doi: 10.1089/tmj.2009.0111.

- 1. Know about scope, legislations and ethics in audiology
- 2. Understand about the hearing health and strategies for prevention of hearing impairment
- 3. Gain knowledge about the audiological practice in different settings
- 4. Students will learn about the noise and hearing conservation in industry and community
- 5. Analyse the scope and practice of tele audiology

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO ₁						Н	М					Н		
CO2	M	M	М		М	Н	М	М				М	Н	
CO3	Н	М	Н	М	Н	M	М	М	М	М	M	М	М	Н
CO4	Н	М	М	М	М	L	L	L	Н	L	Н	Н	М	M
CO5	М	М	Н	Н	М	Н	Н	н	L	M	M	М	М	Н

Practicals-V (Speech-Language Pathology)

Semester VI 22BASC36

Hours of Instruction/week: 8
No of Credits: 4

Objective:

- To understand the procedures to assess motor speech disorders, adult language disorders in adults.
- To perform dysphagia assessment, voice therapy, fluency therapy, bed side evaluation.

Practicals:

- Procedures to assess motor speech disorders in adults.
- Differential diagnosis of motor speech disorders in adults.
- Procedures to assess individuals with adult language disorders, and other related abnormalities.
- To administer at least two standard tests for adult language disorders.
- To administer at least two standard tests/protocols for motor speech disorders in adults.
- To record a sample for analysis of language and speech skills in adults with neurocommunication disorders.
- To assess posture, breathing, speech and swallowing in adults with motor speech disorders.
- To consult with inter-disciplinary medical/rehabilitation team and counsel the individual/family regarding management options and prognosis.
- Language assessment minimum of 2 individuals after stroke.
- Associated problems in individuals after stroke and its evaluation.
 Dysphagia assessment minimum of 2 children & adults.
- Goals and activities for therapy (including AAC) based on assessment/test results for adults with neuro-communication disorders.
- Voice therapy Minimum of 2 individuals with voice disorders.
- Fluency therapy Minimum of 2 individuals with fluency disorders.
- Bed side evaluation of individuals with neuro-communication disorders Minimum of 2 individuals.
- Apply speech language stimulation/therapy techniques on 5 children with language disorders/speech sound disorders/ motor speech disorders – minimum 5 sessions of therapy for each child.

Total hours-120 hours

- 1. To understand the procedures to assess motor speech disorders and motor speech disorders in adults.
- 2. To administer standardized tests for adult language disorders, motor speech disorders.
- 3. To record and analyze speech and language skills in adults with neuro-communication disorders.

- 4. To consult with with inter-disciplinary medical/rehabilitation team and counsel the individual/family regarding management options and prognosis.
 5. To perform voice therapy, fluency therapy and bed side evaluation.

CO/	PO	PO	PO	PO	PO	PO	PO	PO	PO	PO	PO	PS	PS	PS
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1	М	10+	Н	Н	H	н	Н	L	М		L	Н		
CO2	M		Н	Н	Н	н	Н	L	М		L	н		
CO3	М		Н	Н	Н	н	н	L	М		Ļ	н		
CO4	М		Н	Н	Н	н	Н	L	М		L	Н		
CO5	M		Н	Н	Н	н	Н	Н	М		L	Н		

Practicals-V (Audiology)

Semester VI 22BASC37

Hours of Instruction/week: 8 No of Credits: 4

Objective:

- To be able to carry out noise survey, mapping of cochlear implant and trouble shooting.
- To perform AVT for child with hearing impairment and involve in auditory training.

Practiclas:

- National and international standards related to noise exposure.
- Recommend appropriate treatment options such as speech reading, AVT, combined approaches etc.
- To carryout noise survey in Industry and community
- To carryout mapping of cochlear implant in infants and children using both objective and subjective procedures
- To trouble shoot cochlear implant
- Analysis of objective responses like compound action potential, stapedial reflexes on at least 3 samples
- Comprehensive hearing conservation program for at least 1 situation
- AVT on at least 1 child with hearing impairment Trouble shooting and fine tuning of hearing aids on at least 5 geriatric clients
- · At least one activity for different stages involved in auditory training

Total hours-120 hours

- 1. To understand and carry out noise survey.
- 2. To recommend appropriate treatment options like speech reading, AVT.
- 3. To carry out mapping of cochlear implants and trouble shooting.
- 4. To perform AVT and participate in auditory training.
- 5. To give comprehensive hearing conservation program.

CO / PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O2	PS O3
CO1	М		н	Н	Н	Н	Н	L	М		L	н		
CO2	M		Н	Н	Н	Н	Н	L	М		L	н		
CO3	M		н	Н	Н	н	Н	L	М		L	Н		
CO4	М		н	н	н	н	н	L	М		L	Н		
CO5	М		Н	Н	Н	Н	Н	н	M		L	Н		

Internship Project

Semester – VII 22BASC38 Hours of Instruction/Week: 6 Credit Points:4

Objectives: To enable students to

- 1. Determine the purpose of the study with assumed outcomes
- 2. Initiate relevant intervention to meet the challenges on research
- 3. Validate the result outcomes with societal needs

Total Hours-90 hours

Course Learning Outcomes:

- 1. Describe the research process and the principle activities, skills and ethics associated with the research process
- 2. Practice select and define appropriate research problem and parameters
- 3. Compose a project proposal
- 4. Organize and conduct research using various interventions
- 5. Write a project report with good APA style for scholarly writing.

CO /	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	O2	Q3
CO 1		30	H	H		Н		H					M	
CO 2			Н		M			H			M		Н	H
CO 3			H		Н			H			M		M	
CO 4			Н	Н		H	Н	Н		M	M			M
CO 5			M	H	M				Н		M	M	M	M

In-service training in Speech Language Pathology

Semester VII 22BASC39

Hours of Instruction/week: 15
No of Credits: 6

Objective:

- To provide clinical exposure and experience in different set ups and to be able to carry out greater quantum of work with clinical populations and in different contexts.
- To provide greater opportunity to liaise with professionals from allied fields and to demonstrate competence and independence.

Practicals:

- 1. Diagnosis and management of speech, language disorders across life span.
- 2. Report evaluation findings, counsel and make appropriate referrals.
- 3. Plan and execute intervention and rehabilitation programs for persons with speech language.
- 4. Develop and maintain records related to persons with speech-language.
- 5. Engage in community related services such as camps, awareness programs specifically, and community based rehabilitation activities, in general.
- 6. Make appropriate referrals and liaise with professionals from related fields.
- 7. Gain experience in different set ups and be able to establish speech centres in different set-ups
- 8. Demonstrate that the objectives of the B.ASLP program have been achieved.
- Advise on the welfare measures available for their clinical clientele and their families.
- 10. Advise and fit appropriate aids and devices for their clinical population

Total hours-225 hours

- To diagnose and manage of speech, language disorders across life span.
- To be able to plan, execute and report intervention and rehabilitation programs.
- To develop and maintain records.
- To make appropriate referrals and liaise with professionals from related fields.
 To advise and fit appropriate aids and devices for clinical resolutions.

CO/ PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O 2	P\$ 03
CO1	M		н	н	Н	Н	Н	L	M		L	Н		
CO2	M		Н	н	Н	Н	Н	L	M		L	Н		
CO3	M		Н	н	Н	Н	Н	L	M		L	Н		
CO4	M		Н	Н	Н	Н	н	L	M		L	Н		
CO5	М		Н	Н	Н	Н	Н	н	М		L	Н		

In-service training in Audiology

Semester VII 22BASC40 Hours of Instruction/week: 15 No of Credits: 6

Objective:

- To provide clinical exposure and experience in different set ups and to carry out greater quantum of work with varied clinical populations and in different contexts.
- To provide greater opportunity to liaise with professionals from allied fields.

Practicals:

- Diagnosis and management of hearing disorders across life span.
- Report evaluation findings, counsel and make appropriate referrals.
- Engage in community related services such as camps, awareness programs specifically, and community-based rehabilitation activities, in general.
- Make appropriate referrals and liaise with professionals from related fields.
- Gain experience in different set ups and be able to establish hearing centers in different set-ups
- Demonstrate that the objectives of the B.ASLP program have been achieved.
- Advise on the welfare measures available for their clinical clientele and their families.

Total hours-225 hours

Course Outcome:

425

- To diagnose and manage hearing disorders across life span.
- To report evaluation findings, counsel and make referrals.
- To engage in community related services and community-based rehabilitation.
- To liaise with professionals from related fields.
- To advise on welfare measures available for clinical population.

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1	М		Н	Н	Н	н	Н	L	М		L	Н		
CO2	M		Н	Н	Н	Н	Н	L	М		L	Н		
CO3	M		Н	Н	Н	Н	Н	L	М		L	H		
CO4	M		Н	Н	Н	Н	Н	L	М		L	H		
CO5	М		Н	Н	Н	Н	Н	Н	М		L	Н		

Internship Practicals-VI (Speech Language Pathology)

Semester VIII 22BASC41

Hours of Instruction/week: 18 No of Credits: 10

Objective:

- To provide clinical exposure and experience in different set ups and to carry out greater quantum of work with varied clinical populations and in different contexts.
- To provide greater opportunity to liaise with professionals from allied fields.

Practicals:

- Diagnosis and management of communication and swallowing disorders across life span.
- Report evaluation findings, counsel and make appropriate referrals.
- Plan and execute intervention and rehabilitation programs for persons with communication and swallowing
- Develop and maintain records related to persons with communication and swallowing.
- Engage in community related services such as camps, awareness programs specifically, and community-based rehabilitation activities, in general.
- Make appropriate referrals and liaise with professionals from related fields.
- Gain experience in different set ups and be able to establish speech centres in different set-ups
- Demonstrate that the objectives of the B.ASLP program have been achieved.
- Advise on the welfare measures available for their clinical clientele and their families.
- Advise and fit appropriate aids and devices for their clinical population.

Total hours: 270 hours

- 1. To diagnose and manage communication and swallowing disorders.
- 2. To plan, execute, perform and report rehabilitation programs for clinical population.
- 3. To engage in community related services and community-based rehabilitation.
- 4. To liaise with professionals from related fields.
- 5. To advise on welfare measures available for clinical population.

CO / PO	PO 1	PO 2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10	PO 11	PS O1	PS O2	PS O3
CO1	M		н	Н	Н	Н	Н	L	М		L	Н		
CO2	M		H	Н	Н	H	н	L	М		L	Н		
CO3	М		Н	Н	Н	Н	Н	L	М		L	Н		
CO4	M		Н	Н	Н	Н	н	L	М		L	Н		
CO5	М		Н	Н	н	н	Н	Н	М		L	Н		

Internship Practicals-VI (Audiology)

Semester VIII 22BASC42 Hours of Instruction/week: 18 No of Credits: 10

Objective:

- To provide clinical exposure and experience in different set ups and to carry out greater quantum of work with varied clinical populations and in different contexts.
- To provide greater opportunity to liaise with professionals from allied fields.

Praticals:

- Plan and execute intervention and rehabilitation programs for persons with hearing disorders
- Develop and maintain records related to persons with hearing disorders
- Engage in community related services such as camps, awareness programs specifically, and community-based rehabilitation activities, in general.
- Make appropriate referrals and liaise with professionals from related fields.
- Gain experience in different set ups and be able to establish hearing centres in different set-ups
- Demonstrate that the objectives of the B.ASLP program have been achieved.
- Advise on the welfare measures available for their clinical clientele and their families.
- Advise and fit appropriate aids and devices for their clinical population.

Total hours: 270 hours

- 1. To plan, execute, perform and report rehabilitation programs for clinical population.
- 2. To develop and maintain records related to persons with hearing disorders.
- 3. To engage in community related services and community-based rehabilitation.
- 4. To liaise with professionals from related fields.
- 5. To advise on welfare measures available for clinical population

CO/	PO	PS	PS	PS										
PO	1	2	3	4	5	6	7	8	9	10	11	01	02	03
CO1	М		н	Н	н	н	н	L	М		L	Н		
CO2	M		н	Н	н	Н	н	L	М		L	Н		
CO3	М		н	н	Н	н	н	L	М		L	Н		
CO4	М		Н	Н	Н	н	Н	L	М		L	Н		
CO5	M		Н	Н	Н	Н	Н	Н	M		L	Н		