Oral Motor Assessment And Treatment Ages And Stages

Develop the understanding and clinical reasoning skills you’ll need to confidently manage dysphagia in professional practice! This logically organized, evidence-based resource reflects the latest advancements in dysphagia in an approachable, student-friendly manner to help you master the clinical evaluation and diagnostic decision-making processes. Realistic case scenarios, detailed review questions, and up-to-date coverage of current testing procedures and issues in pediatric development prepare you for the conditions you’ll face in the clinical setting and provide an unparalleled foundation for professional success. Comprehensive coverage addresses the full spectrum of dysphagia to strengthen your clinical evaluation and diagnostic decision-making skills. Logical, user-friendly organization incorporates chapter outlines, learning objectives, case histories, and chapter summaries to reinforce understanding and create a more efficient learning experience. Clinically relevant case examples and critical thinking questions throughout the text help you prepare for the clinical setting and strengthen your decision-making skills. Companion Evolve Resources website clarifies key diagnostic procedures with detailed video clips.

In response to the need for a reliable and valid assessment tool, the Schedule for Oral Motor Assessment (SOMA) was designed. It was developed and validated on a large sample of normally developing infants as well as infants with clinically significant oral motor dysfunction. The SOMA is simple to administer and quick to score, and can be performed in the clinic, nursery, school or the child’s home. It entails the presentation of a range of tastes and textures to the infant in order to elicit a full range of each oral motor challenge categories, ranging from liquid through to chewable solids. Specific oral motor behaviours are rated for each oral motor challenge category. Responses are summed to obtain a score for each category, enabling the speech and language therapist to distinguish those infants with normal oral motor function from those with oral motor dysfunction.

"Just Take a Bite" takes parents and professionals step by step through he myths about eating to the complexity of eating itself, which leads to an understanding of physical, neurological and/or psychological reason why children may not be eating as they should.

MORE is an acronym for Motor components, Oral organization, Respiratory demands, and Eye contact and control; elements of toys and items that can be used to facilitate integration of the mouth with sensory and postural development, as well as self-regulation and attention. The text presents a theoretical framework for the treatment of both sensorimotor and speech/language problems, methods for evaluating therapeutic potential of oral motor toys, and activities designed to improve integrated development of sensory/postural and speech/language functions. [Ed.]

Evidence-based practice is the gold standard for choosing treatment modalities for communication disorders (ASHA, 2009; Schiavetti & Metz, 2006). The purpose of this study was to compare the sources of evidence used by Kentucky medical-based speech-language pathologists, and the frequency with which each group consults those sources of evidence, for planning assessment and intervention. Analysis of 399 completed surveys indicated no statistically significant difference in the use of evidence between Kentucky school-based speech-language pathologists and Kentucky medical-based speech-language pathologists. In addition, only 51% of the participating Kentucky speech-language pathologists reported using evidence-based practice based on use of research and/or resources "most of the time" or "always" when making decisions regarding oral motor, voice, and language assessment and treatment decisions.

This is an in-depth study of the development of the typical infant during the first year of life. Information is grouped into the areas of postural control, gross motor skills, fine motor skills, oral-motor and respiratory functions, and speech and language. Each chapter includes a summary chart and many clear illustrations. Concepts underlying the development of movement are presented, including motor learning concepts.

The book offers a comprehensive approach to the assessment and treatment of disturbances in facial expression, oral movement, swallowing, breathing, voice and speech production caused by developmental and acquired neurological conditions. The principles outlined are used in patients with different etiologies (e.g. stroke, tumors, traumas). F.O.T. T., developed by Kay Coombes, is a hands-on approach based on an understanding of neurological functions and the way we learn from experience. The approach aims to give the patient experience of physiological posture and movement using facial-oral functions in normal activities of daily living (ADL). Rather than mere "exercises", F.O.T. T involves meaningful activities aiming to promote participation, according to ICF criteria. Four main areas are covered: nutrition, oral hygiene, nonverbal communication and speech. Each chapter summarises the problems of severely ill patients and shows the clinical reasoning behind the solutions offered. Separate chapters discuss tracheostomy management and the training of the carers involved, including relatives. The chapter authors are experienced specialists (physio-, occupational- and speech-language therapists and physicians), whose contributions aim to provide interdisciplinary perspectives and translate latest research into clinical practice.

Dysphagia Assessment and Treatment Planning: A Team Approach, Fourth Edition is an ideal resource for dysphagia courses in speech-language pathology graduate programs. The unique value of this book is its multidisciplinary approach. Too often, speech-language pathologists function clinically with insufficient interaction with, or understanding of, the roles of other professionals involved with their patients. This text incorporates information pertinent to the roles, tools, and views of a multidisciplinary dysphagia team, including physicians, speech pathologists, nurse specialists, and dietitians, who work together on a daily basis. In this fourth edition, the organization has changed, with chapters concerned with assessment techniques coming first, and material addressing special populations comprising the latter portion of the text. This reflects what is likely a more typical approach to dysphagia in graduate courses concerned with the topic and one that complements teaching of the subject matter. Updates to the fourth edition include: The treatment chapter (Chapter 10) has been updated to reflect the current status of therapeutic approaches previously considered in treating dysphagic patients. Chapters dealing with nursing (Chapter 11) and nutrition (Chapter 12) have been updated to incorporate the latest recommendations in nursing care and dietary considerations for patients experiencing dysphagia. The pediatrics chapter (Chapter 13) has been expanded to address specific problems and needs not only of infants but also the entire spectrum of childhood. A chapter devoted to the esophagus (Chapter 14) addresses new information on the management of esophageal disorders, including the novel double-balloon dilation of the UES and a device for manually opening the upper esophagus. Chapters addressing special populations, including neurogenic disease (Chapter 15) and head and neck cancer (Chapter 16), incorporate the latest information regarding dysphagia and approaches to treatment pertinent to each group. A brand-new addition to the book is Chapter 18, which addresses dysphagia associated with alterations to the spine as a consequence of either disease or surgery. *Disclaimer: Please note that ancillary content (such as documents, audio, and video,
The second edition of Interventions for Speech Sound Disorders in Children is an essential resource for pre-service speech-language pathologists and rehabilitation in real-world settings in education and rehabilitation. It assists clinicians, allowing them to further expand swallowing assessment and treatment, and facilitates the development of swallowing cases demonstrating clinical approaches in dysphagic patients. Readers will find this text useful both as an initial guide and a reference work addresses treatment options in swallowing rehabilitation, especially exercises based on motor learning. Lastly, Part IV highlights three clinical University Rehabilitation. The book is divided into 4 major sections, the first of which introduces readers to the general aspects and the latest diagnostic and treatment technologies. To do so, it employs the concept of swallowing rehabilitation pioneered at Fujita Health University. The book is divided into 4 major sections, the first of which introduces readers to the general aspects and the principle of deglutition. In turn, Part II offers clinical approaches to both non-instrumental and instrumental evaluation of swallowing. Part III addresses treatment options in swallowing rehabilitation, especially exercises based on motor learning. Lastly, Part IV highlights three clinical cases demonstrating clinical approaches in dysphagic patients. Readers will find this text useful both as an initial guide and a reference work for assisting clinicians, allowing them to further expand swallowing assessment and treatment, and facilitating the development of swallowing rehabilitation in real-world settings in education and rehabilitation. 

Nobody Ever Told Me (Or My Mother) That! : Everything from Bottles and Breathing to Healthy Speech Development fills a missing niche in the child rearing world. It explains everything from the basics of nursing, to SIDS, to facial massage; finishing with the secrets to good speech development and your child's best natural appearance. Written by an SLP with over 30 years experience, this book is a wealth of necessary information for any new parent. This new edition provides a refresher on the neurology of dysarthria as well as current information and lots of helpful tools for assessment, treatment planning, and treatment techniques. This video illustrates how the Erhardt Developmental Prehension Assessment (EDPA) is used to determine missing components of hand skills needed for functional activities such as feeding; the relationship of fine motor, gross motor, oral-motor, visual, and cognitive development; and methods of integrating treatment into a home program. A school-aged child with cerebral palsy begins independent feeding as all family members become involved. This text provides a unique and comprehensive approach to cleft assessment, treatment, and management, with new and revised content that will keep you at the cutting edge of cleft lip and palate treatment and therapies. Comprehensive coverage of every aspect of cleft palate and related disorders. Thorough coverage of the available literature on cleft lip and cleft palate includes both contemporary and historically significant studies, as well as low-incidence types of phenomena. The Birth of a Child with a Cleft introduction provides a detailed preview to the treatment of children with clefts, and offers useful suggestions for interacting with their parents. New artwork clearly demonstrates and enhances understanding of important clinical conditions and procedures. Oral Motor Assessment and Treatment Ages and Stages Pearson College Division If you are a family or educator with a toddler or young child then you have come to the right place. This book will teach you how to convert play and everyday routines into activities that are both fun AND beneficial for a child’s speech and language development. With little tweaks to your interactions and the everyday routines you are already engaging in, you can increase opportunities for learning and growth for your child. This best part is it’s not a lot of extra work. In the Playing With Purpose book you will learn: Tips for boosting speech and language skills during play Tips for promoting healthy eating habits. This manual features games, rhymes, and manipulative tasks to help preschool and primary school children with hearing impairment, oral dyspraxia, and articulation problems. The games target higher organizational levels of motor planning for oral motor skills. These activities provide a natural focus on the mouth, an approach that can be shared with children who do not have disabilities. Games include saying silly sentences and rhymes and making funny faces. Complete chapters are included from profacial myologists and dental specialists from four continents. The authors state there is a lot to know in preparing for clinical work with orofacial myofunctional disorders. In recent years there has been a great surge of interest in the area of oral motor assessment and treatment. It almost seems as if an "oral motor explosion" has occurred, and the speech-language pathologists is left wondering Where do I begin? Where can I find appropriate and adequate training in this area? What tools and materials should I buy? What techniques should I use? This book will answer all these questions and many more. Chapters include: Anatomical and Neurological Bases, Physiological Considerations, Key Issues and Treatment Considerations, Birth to 2-year Period Assessment and Treatment, 2- to 4-year Period Assessment and Treatment, 4- to 6-year Period Assessment and Treatment, 6- to 12-year Period Assessment and Treatment, Adolescent and Adult Assessment and Treatment. Report Writing, and Resources and Product Sources. For practicing clinicians in assessment and treatment of oral motor concerns in clients of all ages with a variety of disorders. This book presents a comprehensive approach to treating dysphagia that has been successfully applied in actual rehabilitation settings. Its main purposes are firstly to equip readers with a strong conceptual understanding of swallowing evaluation and treatment, secondly to provide guidance on the procedure of practical comprehensive dysphagia rehabilitation in real-world settings, and thirdly to update readers on the latest diagnostic and treatment technologies. To do so, it employs the concept of swallowing rehabilitation pioneered at Fujita Health University Rehabilitation. The book is divided into 4 major sections, the first of which introduces readers to the general aspects and the principle of deglutition. In turn, Part II offers clinical approaches to both non-instrumental and instrumental evaluation of swallowing. Part III addresses treatment options in swallowing rehabilitation, especially exercises based on motor learning. Lastly, Part IV highlights three clinical cases demonstrating clinical approaches in dysphagic patients. Readers will find this text useful both as an initial guide and a reference work for assisting clinicians, allowing them to further expand swallowing assessment and treatment, and facilitating the development of swallowing rehabilitation in real-world settings in education and rehabilitation. The second edition of Interventions for Speech Sound Disorders in Children is an essential resource for pre-service speech-language
pathologists and practicing SLPs. It provides a comprehensive overview of 21 evidence-based phonological and articulatory intervention approaches, offering rigorous critical analyses, detailed implementation guidelines, and helpful demonstration videos."

When a young child has a severe speech sound disorder—especially one severe enough to affect the child's intelligibility—it's critical to determine the degree to which motor speech impairment contributes to the disorder. Now there's a psychometrically well-supported tool that helps speech-language pathologists do just that. Dynamic Evaluation of Motor Speech Skill (DEMSS) is a criterion-referenced assessment designed to help with differential diagnosis of speech sound disorders in children with severely impaired speech production. Developed by one of the leading experts on childhood apraxia of speech (CAS) and an expert on test development, this tool is an efficient way to assess children who have significant speech impairment, especially reduced phonemic and/or phonetic inventories, vowel or prosodic errors, poor speech intelligibility, and/or little to no verbal communication. 

**USE DEMSS TO**

- Diagnose severe speech sound disorders in children 3 and older
- Facilitate, confirm, or rule out a diagnosis of CAS
- Estimate the severity of a child's disorder and what their prognosis might be
- Inform the development of treatment goals
- Make decisions about the most effective methods of cueing during treatment

**How It Works**

DEMSS is a dynamic assessment administered by SLPs in a clinical setting, usually in about 30 minutes or less. The child is tested on production of 60 utterances, divided into eight grouped sets according to syllable structure. For each item on the DEMSS, the SLP provides a verbal model, asks the child for a direct imitation, and follows up with more cues and supports if the child's first attempt is incorrect.

Scoring takes into account overall accuracy in producing the word, vowel accuracy, consistency of production, and accuracy of prosodic features of the word. After administering DEMSS and determining results, SLPs can schedule a follow-up meeting with the child's parents to share results and make recommendations. Clear and comprehensive guidance is available to DEMSS users. The manual walks SLPs through every step of test administration and scoring, as well as interpretation. The accompanying video tutorial gives users a helpful overview of DEMSS and guides them through two administrations of the entire tool with two different patients: one with mild CAS and one with more severe CAS. Purchase the DEMSS manual and get everything you need! The manual includes a keycode that unlocks access to the video tutorial and free unlimited DEMSS forms, downloadable online.

A classic in the field, *Articulation and Phonological Disorders: Speech Sound Disorders in Children, 7e,* presents the most up-to-date perspectives on the nature, assessment, and treatment of speech sound disorders. A must-have reference, this classic book delivers exceptional coverage of clinical literature and focuses on speech disorders of unknown causes. Offering a range of perspectives, it covers the normal aspects of speech sound articulation, normal speech sound acquisition, the classification of and factors related to the presence of phonological disorders, the assessment and remediation of speech sound disorders, and phonology as it relates to language and dialectal variations. This edition features twelve manageable chapters, including a new chapter on the classification of speech sound disorders, an expanded discussion of childhood apraxia of speech, additional coverage of evidence-based practices, and a look at both motor-based and linguistically-based treatment approaches.

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