“Preparing Professionals for Changing Educational Contexts”

Department of Special Education
College of Education, University of Nevada, Las Vegas

Prefix and Number: ESP 755
Title: Medically Related Aspects of Disability
Credit: 3
Semester: Spring, 2006
Instructor: Dr. Sherri Strawser.
Office Location: CEB 122
Class Location: CEB 133
Class Times: February 9 – February 25, 2006
Thursdays: 7-9:30, Fridays 5-9:30, Saturdays 8:00 – 5:00
Telephone: 895-1109; office fax: 895-0984
Email: strawser@unlv.nevada.edu
Office Hours By appointment please
Prerequisites: ESP 701 or equivalent

Course description: Overview of central nervous system and medical bases of normal development, learning, disabilities, and threats to development. Emphasis on basic knowledge and skills that allow teachers, school psychologists, and other educational personnel to more adequately assess and instruct students with disabilities in educational environments.

CEC Guidelines Addressed:
Common Core (CC), Individualized General Curriculum (GC), Individualized Independence Curriculum (IC), Learning Disabilities (LD), Mental Retardation / Developmental Disabilities (MR)

2 Development and Characteristics of Learners
3 Individual Learning Differences
5 Learning Environments and Social Interactions
7 Instructional Planning
8 Assessment
9 Professional and Ethical Practice
10 Collaboration

Course goals/objectives
Knowledge
Upon completion of this course, the student will have acquired knowledge related to:

Knowledge: INTASC Standards

CC2K7 Effects of various medications on individuals with exceptional learning needs.
CC3K1 Effects an exceptional condition(s) can have on an individual’s life.
CC9K4 Methods to remain current regarding research-validated practice.
CC10K3 Concerns of families of individuals with exceptional learning needs and strategies to help address these concerns.
GC2K2, IC2K2 Impact of sensory impairments, physical and health disabilities on individuals, families and society.
GC2K3, IC2K3 Etiologies and medical aspects of conditions affecting individuals with disabilities.
GC2K5 Common etiologies and the impact of sensory disabilities on learning and experience.
GC2K6, IC2K5 Types and transmission routes of infectious disease.
IC3K1 Complications and implications of medical support services.
IC3K2, GC3K1 Impact of disabilities may have on auditory and information processing skills.
CC5K6 Strategies for crisis prevention and intervention.
IC5K1 Specialized health care interventions for individuals with physical and health disabilities in educational settings.
IC9K1, GC9K1 Sources of unique services, networks, and organizations for individuals with disabilities.
IC9K2, GC9K2 Organizations and publications relevant to individuals with disabilities.
IC10K3, GC10K3 Roles of professional groups and referral agencies in identifying, assessing, and providing services to individuals with disabilities.
LD2K2 Neurobiological and medical factors that may impact the learning of individuals with learning disabilities.
LD3K1 Impact of co-existing conditions and exceptionalities on individuals with learning disabilities.
LD3K3 Impact learning disabilities may have on auditory and information processing skills.
LD9K2 Professional organizations and sources of information relevant to the field of learning disabilities.
LD10K2 Services, networks, and organizations that provide support across the life span for individuals with learning disabilities.
MR2K2 Medical aspects of intellectual disabilities and their implications for learning.
MR3K2 Complications and implications of medical support services.
MR9K1 Organizations and publications in the field of mental retardation/developmental disabilities.
MR10K1 Services, networks, and organizations for individuals with mental retardation/developmental disabilities.

**Performance (Skills)**

Upon completion of this course, the student will be able to:

- Use universal precautions.
- Use verbal, nonverbal, and written language effectively.
- Select, design, and use medical materials, and resources required to educate individuals whose disabilities interfere with communications.
- Interpret sensory and physical information to create or adapt appropriate learning plans.
- Types and importance of information concerning individuals with disabilities available from families and public agencies.
- Seek information regarding protocols, procedural guidelines, and policies designed to assist individuals with disabilities as they participate in school and community-based activities.
- Use local community, and state and provincial resources to assist in programming with individuals with disabilities.
- Collaborate with families of and service providers to individuals who are chronically or terminally ill.

**Disposition(s)**

Upon completion of the course, the student will display the following dispositions.

- Continuum of lifelong professional development.
- Demonstrate commitment to developing the highest education and quality-of-life potential of individuals with exceptional learning needs.
- Demonstrate sensitivity for the culture, language, religion, gender, disability, socio-economic status, and sexual orientation of individuals.
IC9S2 Ethical responsibility to advocate for appropriate services for individuals with disabilities².

Implicit to all of the knowledge and skills standards in this section is the focus on individuals with disabilities whose education focuses on an individualized general curriculum.

Resources:

**Required Text / Readings**

**Supplemental sources:**

**Internet Resources:**
The Association for Retarded Citizens (ARC) http://www.thearc.org
National Rehabilitation Information Center http://www.naric.com/
The Association for Severe Handicaps (TASH) http://www.tash.org
Council for Exceptional Children http://www.cec.sped.org
Disability information and resources http://www.makoa.org/
Environmental health perspectives http://ehis.niehs.nih.gov/
Disability rights and advocacy http://www.draginc.com/
Justice for All Email Network http://www.jfanow.org/

**Performance Indicators:**

<table>
<thead>
<tr>
<th>Activities</th>
<th>Evaluation</th>
<th>% of grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participation in discussions and activities</td>
<td>Determined by the student’s record as well as subjective judgment by the instructor of the thoroughness and thoughtfulness of questions posed and responses in discussions.</td>
<td>10%</td>
</tr>
<tr>
<td>Content evaluation assignments:</td>
<td>Determined by accuracy of responses</td>
<td>30%</td>
</tr>
<tr>
<td>Terminology acquisition</td>
<td>meeting the passing criteria for the terminology cards</td>
<td>15%</td>
</tr>
<tr>
<td>-------------------------</td>
<td>------------------------------------------------------</td>
<td>-----</td>
</tr>
<tr>
<td>Final project: Health Fair project and report</td>
<td>Evaluation will be judged on inclusion of the required components and the project-grading rubric attached.</td>
<td>45%</td>
</tr>
</tbody>
</table>

**Specific guidelines addressing performance indicators:**

**Course Requirements**

- *Actively participate in class discussion and activities.* Because of the intense schedule of the course, attendance and participation is essential. Class discussion is encouraged and expected. However, in rare cases, points will be deducted for individuals who excessively contribute personal narratives that do not add clarification to the discussion. No absences are allowed.

- *Readings and evaluation activities.* Students will be responsible for completing assigned readings in advance of each class meeting and completing the required activities on time.

- *Content evaluation:* Each week (Saturday afternoon), the instructor will hand out several questions or points for discussion. Your responses are due in class the following Thursday. Although persons may study together or discuss points of the issues or questions posted, it is required that students develop and write their own responses to turn in. Some of the individual content evaluation assignments will cover material that will not be fully discussed in class because of limited time and extensive content. Other content evaluation assignments will be done as group activities during the course meeting times; and each person in the group will earn equivalent grades on those activities, assuming “equivalent” participation in the activity.

- *Terminology:* Each student will be required to make a card set for the terminology used in the study of the medical and neurological components of disability. A list of terms is attached to the syllabus. The criterion for mastery is correct identification of 40 with no more than 3 errors in 5 minutes. A time to “pass the cards” is to be individually scheduled with the instructor. Students may take as many trials to reach criterion as necessary.

- *Final project:* A Health Fair: Each student will work with a group to research a specific health-related disability. On the final day of class, we will have a “Health Fair” during which each group will share their report with the class. The Health Fair report must include the following information:
  a. Overview of the medical issue (basic information, resources, etc.) (handouts for all)
  b. A summary information page with information about resources in the community (handouts). Brochures and other materials from agencies are encouraged.
  c. One information page about the health-related disability designed specifically for each of the following “audiences” for the purpose of sharing critical information about the disability. (handouts)
     - educators,
     - parents,
     - other related-services personnel
  d. Two lesson plans/interventions/supports and/or services etc. for professionals who may have students with the target disability in their classroom. (handouts)
  e. An evaluation form for your presentation (completed throughout your presentation by the students and turned in to the instructor)

Each group will submit a written report to the instructor containing all of the above elements, in addition to a list of the resources and references that were accessed in preparation of the Health Fair. The final Health Fair project will be evaluated according to the attached rubric and all group participants will receive the same grade (unless there are reported difficulties in group participation and/or work commitment).
**Grading Policy:** Assignments will be evaluated on both content and language usage. Assignments completed outside of class must be typed or word-processed (10 – 12 point font and double spaced) with correct person-first language, writing mechanics (e.g., grammar, spelling, punctuation, etc.), and APA style. Points will be deducted for errors in any of these areas.

Points for each evaluation requirement will be assigned and grades will be based on the percentage earned of the total points using the following scale:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>94-100%</td>
</tr>
<tr>
<td>B+</td>
<td>87-89%</td>
</tr>
<tr>
<td>C+</td>
<td>77-79%</td>
</tr>
<tr>
<td>D</td>
<td>65-69%</td>
</tr>
<tr>
<td>A-</td>
<td>90-93%</td>
</tr>
<tr>
<td>B-</td>
<td>80-82%</td>
</tr>
<tr>
<td>C-</td>
<td>70-73%</td>
</tr>
<tr>
<td>F</td>
<td>0-64%</td>
</tr>
</tbody>
</table>

**Instructional Methods**

A variety of instructional methods will be utilized in this course. Included among them are lecture, discussion, large and small group activities, and independent content-application activities.

**Class Schedule (includes date, topics, and assignment schedule)**

<table>
<thead>
<tr>
<th>Week</th>
<th>Topics</th>
<th>Reading Assignment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2/9 – 2/11</td>
<td>Introduction, course overview, definitions, prenatal, perinatal issues; Brain 101 and the developing child</td>
</tr>
<tr>
<td></td>
<td>2/16 – 2/18</td>
<td>Disabilities related to inborn errors, diseases, and abnormal development; acquired injuries</td>
</tr>
<tr>
<td></td>
<td>2/23 – 2/24</td>
<td>Disabilities related to new threats to development; ethical dilemmas</td>
</tr>
</tbody>
</table>

Last session 2/25 | Group Health Fair presentations

**Cross-reference of COE Principles and INTASC Standards**

<table>
<thead>
<tr>
<th>COE Principles</th>
<th>INTASC Standards</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Content Knowledge</td>
<td>S1 Subject Matter</td>
</tr>
<tr>
<td>2 Individual Development</td>
<td>S2 Student Learning</td>
</tr>
<tr>
<td>3 Diverse Learners</td>
<td>S3 Diverse Learning</td>
</tr>
<tr>
<td>4 Planning Processes</td>
<td>S7 Variety of Instructional Strategies</td>
</tr>
<tr>
<td>5 Strategies and Methods</td>
<td>S4 Instructional Strategies</td>
</tr>
<tr>
<td>6 Learning Environments</td>
<td>S5 Motivation and Management</td>
</tr>
<tr>
<td>7 Communication</td>
<td>S6 Communication Skills</td>
</tr>
<tr>
<td>8 Assessment</td>
<td>S8 Assessment</td>
</tr>
<tr>
<td>9 Collaboration, Ethics, &amp; Relationships</td>
<td>S10 Relationships and Partnerships</td>
</tr>
<tr>
<td>10 Reflection &amp; Professional Development</td>
<td>S9 Reflection and Responsibility</td>
</tr>
</tbody>
</table>
### TERMINOLOGY FOR CARD SET

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>a- or an-</td>
<td>prefix meaning “without; loss of &quot;</td>
</tr>
<tr>
<td>abduction</td>
<td>moving part of the body away from the midline (as in moving an arm from the side up toward the shoulder, while parallel to the torso)</td>
</tr>
<tr>
<td>acopia</td>
<td>An inability to copy figures or characters</td>
</tr>
<tr>
<td>adduction</td>
<td>moving part of the body toward the midline (as in moving an arm from the shoulder level down toward the torso, while parallel to the torso)</td>
</tr>
<tr>
<td>agnosia</td>
<td>general term for an input disorder; failure to recognize familiar objects or stimuli perceived by the senses</td>
</tr>
<tr>
<td>anomia</td>
<td>impairment in the ability to name objects and to understand the nominal significance of words</td>
</tr>
<tr>
<td>anosmia</td>
<td>impairment in the ability to smell</td>
</tr>
<tr>
<td>anterior</td>
<td>before or in front (relative position of body)</td>
</tr>
<tr>
<td>aphasia</td>
<td>general term for language disorders caused by CNS dysfunction, but not those caused by cognitive or sensory disorders, or paralysis of muscles essential for speech</td>
</tr>
<tr>
<td>apraxia</td>
<td>general term for an output disorder; inability to carry out on request a complex or skilled movement, not due to paralysis or deficits in understanding</td>
</tr>
<tr>
<td>ataxia</td>
<td>poor coordination of muscular movement; awkwardness of posture and gait (usually resulting from abnormalities in the cerebellum)</td>
</tr>
<tr>
<td>athetosis</td>
<td>term referring to slow, writhing, involuntary movements, especially in the hands</td>
</tr>
<tr>
<td>atonic</td>
<td>absence of normal muscle tone</td>
</tr>
<tr>
<td>autoimmune</td>
<td>relating to, or caused by a reaction in which one’s own immune system antibodies attack other parts of the body</td>
</tr>
<tr>
<td>automatisms</td>
<td>automatic fine motor movements (e.g., buttoning or unbuttoning clothing) that are part of a type of seizure</td>
</tr>
<tr>
<td>autonomic nervous system</td>
<td>the part of the nervous system that regulates certain automatic functions of the body (e.g., heart rate, sweating, respiration)</td>
</tr>
<tr>
<td>bilateral</td>
<td>both sides of the body</td>
</tr>
<tr>
<td>cephal-</td>
<td>prefix meaning “pertaining to the head”</td>
</tr>
</tbody>
</table>
central nervous system (CNS)  the portion of the nervous system consisting of the brain and spinal cord; primarily involved in voluntary movement and thought processes

chorea  sudden jerky and purposeless movements

concussion  a condition resulting from the effects of a hard blow to the head; resulting in disturbance of cerebral function, transient loss of consciousness, and possible permanent damage

congenital  originating prior to birth

contra-  prefix meaning “against”

contusion (of brain)  structural damage limited to the surface layer of the brain (like a bruise) that is caused by a blow to the head

cranial  pertaining to the skull

distal  farthest from the center

dorsal  pertaining to the back (used in contradistinction to ventral)

dys-  prefix meaning “difficult; abnormal, impaired”

dysarthria  disturbance in expressive speech because of paresis of the muscles used in speaking

echolalia  person is able to repeat heard language but does not understand the words heard or produce spontaneous, appropriate language

encephal-  prefix meaning “of, pertaining to, or affecting the brain”

epidemiology  the study of factors determining the frequency and distribution of diseases (e.g., an outbreak of food poisoning)

extension  to straighten a part of the body at a joint

flexion  refers to the bending of a part of the body at a joint

hemi-  prefixes meaning “half”

hyper-  prefix meaning “in excess”

hypo-  prefix meaning “under; beneath; less than normal”

immunology  a science dealing with the phenomena and causes of immunity (the ability to resist a particular disease)

incidence  the rate of occurrence of new cases of a disorder in a population

inferior  below (relative position of body)

insult  an injury to the body or one of its parts causing damage – may be physical, metabolic, immunological, or infectious
-kinesi... motion"
lateral... (relative position of body)
lesion... change in structure or loss of function of an organ or body part due to injury or disease
mal-... prefix meaning "bad, abnormal, or inadequate"
medial... to the center (relative position of body)
meninges... the three membranes covering the brain and spinal cord
morbidity... medical complication of an illness, procedure, or operation
orthopedic... relating to bones or joints
paraphasia... a type of language disorder in which the person substitutes wrong words or uses words or sounds in senseless combinations
paresis... partial weakness, short of paralysis (which is total)
peripheral nervous system... the parts of the nervous system that are outside the brain and spinal cord
plasticity... the ability of an organ or part of an organ to take over the function of another damaged organ
-plegia... suffix meaning "paralysis"
pres... behind or in back (relative position of body)
prevalence... the percentage of a population that is affected with a particular disorder at a given time
prone... lying face downward
proprioception... ability to sense the position of the limbs and their movements, with the eyes closed
proximal... nearest to the point of attachment or center of the body
pulmonary... pertaining to the lungs
quadri-... prefix meaning “four”
rebound... a phenomenon in which as a medication dose wears off, a person's behavior or symptoms become worse than when completely off the medication
spastic... increased muscle tone so that the muscles are stiff and movements are difficult
static... characterized by a lack of change (i.e., as related to a condition)
superior... above (relative position of body)
supine  lying face upward
syndrome  a set of 2 or more signs and symptoms that have a single origin, occur together, and characterize a particular condition
systemic  involving the entire body
ventral  pertaining to the front or abdominal surface
# Rubric for Health Fair Presentation and Report

**ESP 755**

<table>
<thead>
<tr>
<th><strong>Proficiency Levels</strong></th>
<th><strong>Accuracy</strong></th>
<th><strong>Thoroughness</strong></th>
<th><strong>Organization</strong></th>
<th><strong>Enthusiasm / Creativity</strong></th>
</tr>
</thead>
</table>
| **Exceeds Expectations** | • Explains content clearly and without errors  
• Demonstrates content components without errors  
23-25 points | • Includes a thorough review of topic content components  
• Provides detailed instruction to ensure student understanding  
23-25 points | • May use a advance organizer  
• Maintains lively instructional pace without unnecessary pauses  
• Gives post organizer / evaluation  
• Clearly evident who does what and when throughout the presentation  
• All group members provide excellent contribution during the presentation  
23-25 points | • Voice expresses enthusiasm  
• Facial expressions express enthusiasm  
• Uses visual displays or other media to enhance the presentation  
• Uses excellent supplemental materials  
• Adds motivating activities to extend learning  
23-25 points |
| **Meets Expectations** | • Explains content with minor errors  
• Some difficulty responding to content or clarification requests  
• Demonstrates most content components adequately  
20-22 points | • Includes most topic content components  
• Provides adequate instruction for most individuals  
20-22 points | • Refers to content notes or script for the presentation  
• Appears to know who does what and when throughout most of the presentation  
• Most group members provide good contribution during the presentation  
20-22 points | • Voice or body language expresses some enthusiasm  
• Uses visual displays, or supplemental materials, or motivating activities  
20-22 points |
| **Below Expectations** | • Displays major misunderstandings or lacking content  
• Considerable difficulty responding to content or clarification requests  
• Content left to observer to interpret  
< 20 points | • Limited content information  
• Provides insufficient detail for most students to understand the content  
< 20 points | • Needs content script for the presentation  
• Demonstrates confusion regarding content components, sequence, and/or who does what and when  
• Group members' contribution to the presentation appears unequal  
< 20 points | • Seems to lack confidence in topic  
• Facial expressions do little to enhance content  
• Limited or no visual displays, supplemental materials, or motivating activities  
< 20 points |
Additional Statements of Rules and Regulations - Academic Integrity Statement

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UNLV and its College of Education demand a level of scholarly behavior and academic honesty on the part of students. Violations by students exhibiting honesty while carrying out academic assignments and procedural steps for dealing with academic integrity are delineated within the Regulations Governing Probation and Suspension Within the College of Education. This publication may be found in the Office of the Dean of the College of Education (301).

In addition to successful academic performance in prescribed coursework, you are enrolled in a professional course of studies, which is governed by a student code of ethics and programmatic expectations. The Handbook of the Committee to Review Initial Licensure Students outlines the UNLV Student Code of Conduct, NEA Code of Ethics for the Teaching Profession, and student expectations. The handbook is available in the COE Dean's office. Misdemeanor or felonious conviction(s) may bar teacher licensure in Nevada or other States. If you have any questions, please direct them to the Director of Teacher Education, CEB 301, 895-4851.

If you have a documented disability that requires assistance, you will need to go to Disability Services (DS) for coordination in your academic accommodations. DS is located within the Learning Enhancement Services office in the Reynolds Student Services Center, room 137. The DS phone number is 895-0866 or TDD-895-0652. You may visit their website at www.unlv.edu/studentlife/les

Students are encouraged to secure an e-mail account with UNLV and to use this to communicate with the professor and other students in the class during the semester.

Any student missing class quizzes, examinations, or any other class or lab work because of observance of religious holidays shall be given an opportunity during that semester to make up missed work. The makeup will apply to the religious holiday absence only, and students must notify the course instructor of anticipated absences by the second week of the semester. Students who represent UNLV at any official extracurricular activity shall have the opportunity to make up assignments, but the student must provide official written notification to the professor no less than one week prior to the missed class(es).

Beepers and cellular phones should be turned off during the class sessions. Socialization unrelated to the topics and issues of group and class discussion must be at a minimum level. Such disruptions may also be considered in determining a “participation” grade component, if included in the course.

Collection of Student Assignments for Accreditation Purposes Assignments completed for this course may be used as evidence of candidate learning in national, regional and state accreditation reports of COE programs. Names and other identifying elements of all assignments will be removed before being included in any report. Students who do not wish their work to be used for accreditation purposes must inform the instructor in writing by the end of late registration. Your participation and cooperation in the review of COE programs is appreciated.