

Health Sciences Division
Allied Health Sciences Department

***MASTER OF SCIENCE
SPEECH-LANGUAGE
PATHOLOGY PROGRAM***



***UAGM-GURABO CAMPUS
MSLP STUDENT HANDBOOK***

PO BOX 3030, Gurabo PR 00778

Revised: July 2025/GECC

Disclaimer

All provisions of the MSLP Program Student Handbook are in effect for the year in which the graduate student enters the program. The Graduate MSLP Program reserves the right to change the regulations and policies in the Handbook at any time and to add, modify, or withdraw courses at any time. Program changes will be notified formally to all students.

Approved by the MSLP Program Faculty, the Allied Health Professions Department and by the
Division of Health Sciences Rev. July, 2025

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General Description

The Masters in Science in Speech-Language Pathology Program at Universidad Ana G. Méndez Gurabo Campus, follows the highest standards of quality and professional ethics for the professional preparation of future SLP's. The curriculum offers courses that prepare the student for prevention, evaluation, differential diagnosis and treatment activities. The curriculum prepares the student to take care of infants, children, adolescents and adults with communication, feeding, and swallowing disorders.

Students are prepared to exert a profession with a scientific base and the best evidence-based practices. Our Program graduates are qualified to complete ASHA's Clinical Fellowship (CF), under the supervision of an ASHA Certified Speech-Language Pathologist.

Purpose of Handbook

This handbook has been prepared by the Speech-Language Pathology Program (SLP) faculty as an orientation guide to policies, procedures, and other information specific to the SLP Program. Information in this handbook is representative of the program's mission and clinical standards. Due notice will be given to all students when changes are made to policies contained in the handbook. If there are questions about any of the information contained in this document, do not hesitate to contact the Director of the SLP Program for clarification.

MSLP Program Accreditation

The master's degree in speech-language pathology (MSLP) residential program at Universidad Ana G. Méndez (UAGM) Gurabo campus, is an Applicant for Accreditation by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850, 800-498-2071 or 301-296-5700.

MSLP Program Memberships

UAGM MSLP Program is a member of the The Council of Academic Programs in Communication Sciences and Disorders (CAPCSD). CAPCSD is an organization which over 350 member communication sciences and disorders programs from the United States, Canada, Puerto Rico, and New Zealand. Member programs offer degrees in communication sciences and disorders, including undergraduate, graduate, and doctoral programs.

DIVISION OF HEALTH SCIENCES
DEPARTMENT OF ALLIED HEALTH PROFESSIONS
SPEECH-LANGUAGE PATHOLOGY PROGRAM

FACULTY & ADMINISTRATIVE PERSONNEL CONTACT LIST

The main means of communication between MSLP program students, faculty, support personnel, and administrators is email. The Microsoft Teams platform is also an acceptable and preferred method of communication with faculty and administrative personnel. It is imperative that you check your student institutional email on a regular basis. The information provided in the following table is updated as of July 2025. Students are encouraged to verify the most up-to-date information with the Program and or Department.

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**UNIVERSIDAD ANA G. MÉNDEZ GURABO CAMPUS
HEALTH SCIENCES DIVISION
ALLIED HEALTH SCIENCES DEPARTMENT
SPEECH-LANGUAGE PATHOLOGY PROGRAM**

Welcome Letter

Dear Speech Language Pathology Student:

Welcome to the Allied Health Sciences Department at the Health Sciences Division, at Universidad Ana G. Méndez Gurabo Campus. As a student in our department, you have been invited to pursue a Master of Science degree in Speech-Language Pathology. This degree will prepare you to work in a variety of settings including schools, rehabilitation centers, hospitals, and private practice.

Students in our Program come from a variety of backgrounds including communication sciences and disorders, sciences, psychology, and education to mention a few. All of our students share a common goal: to prepare for a career in the field of Speech-Language Pathology. For that purpose, you have chosen Universidad Ana G. Méndez Gurabo Campus, our program will not only prepare you to provide clinical services, but also develop a strong commitment to ethics, evidence-based practice and research. We invite you to strive to infuse your academic and clinical preparation with our program's core values of: leadership, patience, sensitivity, commitment, respect, integrity and ethics, excellence, and cultural Competence.

The Speech-Language Pathology program is a rigorous, full-time program of study. Students with or without an undergraduate background in communication sciences and disorders can expect to complete the requirements in 2 or 3 years, depending your chosen cohort (evening or daytime) some curriculum sequences include summer sessions.

Requirements for Masters of Science in Speech-Language Pathology at Universidad Ana G. Méndez Gurabo Campus, incorporate academic and practicum requirements as defined by ASHA's Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA), as well as departmental and college requirements. Students who complete the degree program are also eligible to apply for the Puerto Rico licensing process and Puerto Rico board exam for speech and language pathology.

We welcome you to our graduate program and look forward to mentor you in order to achieve your academic goals.

Sincerely,

Dr. Vanessa Ortiz
Dean Health Sciences Division

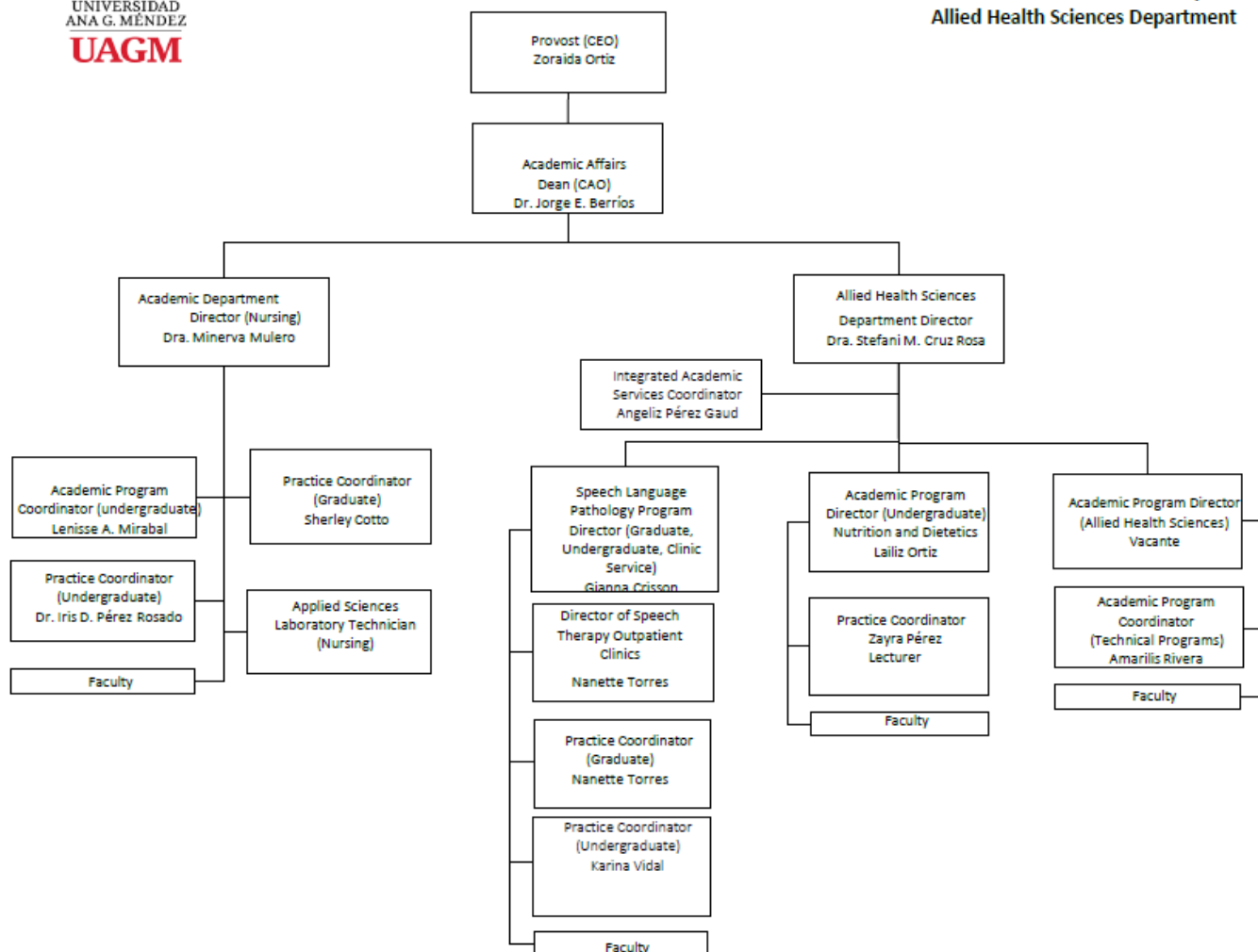
Dr. Stefani Cruz Rosa
Director Allied Health Sciences
Department

Prof. Gianna E. Crisson Cancel
Speech-Language Pathology
Program Director

The Department of Allied Health Sciences and the MSLP Program Organizational Chart



UAGM, Gurabo Campus
Allied Health Sciences Department



MSLP Program Philosophy

Our MSLP Program philosophy is based on Stephen R. Covey's habits of highly effective people; Fairness, Integrity, Honesty, Human Dignity, Service, Excellence, Potential, Growth, Patience, Nurturance, and Encouragement.

Our Speech-Language Pathology students are encouraged to be proactive individuals. They are trained to look at alternatives, choose a different approach when needed, and control their own feelings while providing clinical services.

The Program focuses on creating leaders; clinicians who will be able to begin with the end in mind, starting with a clear understanding of their destination. The MSLP Program prepares students to deal not only with the client's needs now, but also working out a preventive intervention plan for their future.

Our MSLP Program students are educated to recognize new opportunities, new ways of assessing and treating clients. We motivate our students to work within a transdisciplinary approach. Students are prepared to transcend multicultural barriers by designing intervention plans according to client's culture and language.

MSLP Program Mission

To prepare well trained professionals in the Speech-Language Pathology field who can deliver excellent clinical services to a variety of populations with ethical and professional practice standards.

The program is committed to foster research, academic and clinical skills in our students to graduate well-educated Speech-Language Pathology professionals. The program also fosters the development of research in our faculty and in our students by promoting the development of outstanding academic credentials and innovative teaching strategies.

MSLP Program Vision

To be the first academic choice for students wanting to become Speech Language Pathologist, by providing the best academic and clinical education sustained by the latest technology, materials and knowledge based on evidence.

The Speech-Language Pathologist Profession

The profession of Speech-Language Pathology and Audiology is growing dramatically. The US Bureau of Labor Statistics predicts a projected growth of 18 percent from 2023 to 2033, much faster than the average for all occupations. Licensed SLPs may choose from a large number of available positions in the states and territories for which they hold a SLP license, in schools, hospitals, skilled nursing facilities, clinics, rehabilitation centers, home health agencies, and private practice.

In Puerto Rico, as defined by the Puerto Rico Law 77 from 1983, in section 14 (20 L.P.R.A. *Leyes de Puerto Rico Anotadas* - sec. 3114), a Speech-Language Pathologist or Audiologist is: Any person who aims to practice the Speech-Language Pathology or Audiology profession, besides complying with the requisites established in [20 LPRA sec. 3112] of this law, should;

1. Holds a bachelor's degree or its equivalent from an institution accredited by the Council of Higher Education if the Institution is from Puerto Rico or by a nationally accredited and recognized institution if the Institution is from the United States of America or recognized by the Board if the Institution is from any other country.
2. Holds a master's degree or doctorate degree in Speech-Language Pathology or Audiology, as applicable, from an institution accredited by the Council of Higher Education if the Institution is from Puerto Rico or an institution recognized by the Board if the Institution is from the United States, the District of Columbia or any other country. Those professionals, who obtained their master's degree in sciences with a concentration of deaf habilitation on or before 1978-79, will be included in the speech language pathologist definition, as described by [20 LPRA sec. 3102] of this law. They will have the same rights and obligations and the penalties under this law also will apply to them.

It is important to verify the requirements for obtaining a SLP license in states or jurisdictions other than Puerto Rico. We include a useful link from the ASHA website regarding licensing requirements in US states and territories: ASHA state-by-state

https://www.asha.org/advocacy/state/?srsltid=AfmBOoo1Z9oij0QPzkkIIao7aO3CB5_7zlUcLgsgj9Lz7FnEoPIBBmls

MSLP PROGRAM OVERVIEW

Duration and Plan of Study

The Master of Science in Speech-Language Pathology (MSLP) Program offers two academic options; the evening program and a day program. Both consist of a total of 64 credits. The evening program is completed during three academic years. The day program is completed during two academic years and one summer session. Students without an undergraduate degree in communication sciences and disorders may be required to complete additional coursework even before admission to the MSLP Program or during their enrollment in the Program. MSLP code courses must be approved with A or B grade.

Following the plan of study ensures completion of all requirements for the Masters of Science degree, as well the requirements for certification and licensing in a timely fashion.

Completion of the program requirements in Speech-Language Pathology takes a considerable dedication of time. Evening program students need to be available for related coursework and practicum experiences that are offered during the day as well as for evening coursework. Daytime program students are expected to carry a fuller course load per semester compared to the evening program, therefore **students are discouraged from working full-time while in the daytime program.**

Students must be available for summer courses scheduled both in daytime and evening program. Summer courses are usually scheduled from the last week of May until the last week of July. During summer, students are expected to participate in practicum experiences, academic courses, and related academic work. Once assigned to field placements, students will need to be available up to four days per week. In order to accommodate all the practicum requirements, flexibility regarding scheduling is necessary. Students are required to be in residency during the summer as some courses are only offered during that time, and Practicum (MSLP 595) is ongoing during the summer months.

Students are expected to complete all the academic and clinical requirements within the original time-frame planned.

Academic Program Plans

Courses enrollment is conducted at the School of Health Sciences. Each student will follow the Program's plan of study described above. Students **may not** choose to stay out of the plan or enroll in a part-time plan of study.

Courses are offered once a year only. If a student fails a course he or she will need to wait until the course is offered to re-enroll. Students must not expect to complete the program within the original time frame if a course is failed. When failing a course, the student will meet with the Program's Academic Coordinator to develop an individualized plan of study. Once a student fails a course, there is no future guarantee that the courses the student needs to take according to his individualized plan will not have a time meeting conflict. If time conflicts occur, the academic coordinator will advise the student and will re-arrange the plan of study. Most likely Program completion dates will be affected by a revision of the plan of study.

Every student enrolled in the evening program will follow this Curriculum Sequence or Plan of Study:

First Year

First Semester				Second Semester			
Course	Credits	Approved	In progress	Course	Credits	Approved	In progress
MSLP 503 Acoustics and speech science	3			MSLP 505 Assessment and Treatment in Phonological Disorders	3		
MSLP 501 Anatomy and Physiology for SLP	3			MSLP 506 Motor Speech Disorders in Children	2		
MSLP 504 Neuroscience and Neurogenic Disorders	3			MSLP 510 Language Disorders in Children	3		
MSLP 502 Normal Dev. In Speech and Language	3			MSLP 507 Speech-Language and Cognitive Disorders in Adults	3		
MSLP 520 Audiology for Speech-Language Pathologists	3			MSLP 594+ Simulation in SLP	2		
Total	15			Total	13		

Second Year

First Semester				Second Semester			
Course	Credits	Approved	In progress	Course	Credits	Approved	In progress
MSLP 508 Voice and Voice Disorders	3			MSLP 603* Craniofacial and Genetic Disorders	2		
MSLP 550 Clinical Assessment Skills	3			MSLP 509* Fluency and Fluency Disorders	3		
MSLP 601 Feeding and swallowing disorders in children and adults	3			MSLP 570* Augmentative Alternative Communication	2		
MSLP 580 Aural Rehabilitation	3			MSLP 605* Research Methods	2		
MSLP 596+ Clinical Intervention Internship	2			MSLP 541* Ethics and Professional Issues in SLP	2		
				MSLP 542* Multilingual and Multicultural Issues	2		
Total	14			Total	13		

Third Year

First Semester				Second Semester			
Course	Credits	Approved	In progress	Course	Credits	Approved	In progress
MSLP 611 Clinical Externship I+	3			MSLP 612 Clinical Externship II+	3		
MSLP 686* Evidence Based Practice Seminar	1			MSLP 607* Supervision in SLP	2		
Total	4			Total	5		

Important notes:

- The program requires the following prerequisites prior to admission: 3 social science credits, 3 biological science credits, 3 physics or chemistry credits and 3 statistics credits.
- Students are admitted to one of two cohort options (day or evening) and courses must be taken according to their curriculum sequence and cohorts will not be mixed.
- The minimum passing grade for courses is B.
- Practice courses (MSLP 594, MSLP 596, MSLP 611 and MSLP 612) have a pass (P) or no pass (NP) grade.
- MSLP 611 must be approved before registering and requires evidence of 25 clinical observation hours.
- Through the practice courses, students must accumulate a total of 400 clinical practice hours including the 25 clinical observation hours.
- The program has a requirement of taking a comprehensive degree exam (in the board exam "mock test" style).
- To practice the profession of speech-language pathology in Puerto Rico, the graduate is required to take and pass the exam offered by the *Junta Examinadora de Patólogos del Habla-Lenguaje, Audiólogos y Terapistas del Habla de Puerto Rico*.
- +Practice course. Practicum courses require memberships and use of clinical digital applications.
- *Course in distance mode (DL).
- Subject to change

Every student enrolled in the day program will follow this Curriculum Sequence or Plan of Study:

First Year							
First Semester				Second Semester			
Course	Credits	Approved	In progress	Course	Credits	Approved	In progress
MSLP 503 Acoustics and Speech Science	3			MSLP 505 Assessment and Treatment in Phonological Disorders	3		
MSLP 501 Anatomy and Physiology for SLP	3			MSLP 506 Motor Speech Disorders in Children	2		
MSLP 504 Neuroscience and Neurogenic Disorders	3			MSLP 510 Language Disorders in Children	3		
MSLP 502 Normal Dev. In Speech and Language	3			MSLP 550 Clinical Assessment Skills	3		
MSLP 520 Audiology for Speech-Language Pathologists	3			MSLP 580 Aural Rehabilitation	3		
MSLP 507 Speech-Language and Cognitive Disorders in Adults	3			MSLP 601 Feeding and swallowing disorders in children and adults	3		
MSLP 508 Voice and Voice Disorders	3			MSLP 594+ Simulation in SLP	2		
				MSLP 605* Research Methods in Speech- Language Pathology	2		
Total	21			Total	21		
First Summer							
Course		Credits		Approved		In progress	
MSLP 596+ Clinical Intervention Internship		2					
MSLP 509* Fluency and Fluency Disorders		3					
Total		5					
Second Year							
First Semester				Second Semester			
Course	Credits	Approved	In progress	Course	Credits	Approved	In progress
MSLP 611+ Clinical Practice Experience I	3			MSLP 612+ Clinical Practice Experience II	3		
MSLP 542* Multilingual and Multicultural Issues	2			MSLP 607* Supervision in SLP	2		
MSLP 570* Augmentative Alternative Communication	2			MSLP 603* Craneofacial and Genetic Disorders	2		
MSLP 541* Ethics and Professional Issues in SLP	2			MSLP 686* Evidence Based Practice Seminar	1		
Total	9			Total	8		

Important notes:

- The program requires the following prerequisites prior to admission: 3 social science credits, 3 biological science credits, 3 physics or chemistry credits and 3 statistics credits.
- Students are admitted to one of two cohort options (day or evening) and courses must be taken according to their curriculum sequence and cohorts will not be mixed.
- The minimum passing grade for courses is B.
- Practice courses (MSLP 594, MSLP 596, MSLP 611 and MSLP 612) have a pass (P) or no pass (NP) grade.
- MSLP 611 must be approved before registering and requires evidence of 25 clinical observation hours.
- Through the practice courses, students must accumulate a total of 400 clinical practice hours including the 25 clinical observation hours.
- The program has a requirement of taking a comprehensive degree exam (in the board exam "mock test" style).
- To practice the profession of speech-language pathology in Puerto Rico, the graduate is required to take and pass the exam offered by the *Junta Examinadora de Patólogos del Habla-Lenguaje, Audiólogos y Terapistas del Habla de Puerto Rico*.
- +Practice course. Practicum courses require memberships and use of clinical digital applications.
- *Course in distance mode (DL).
- Subject to change

Graduate Profile

MSLP Program graduates, as of the last revision of this handbook, would be ready to take the Puerto Rico SLP Board Examination. Upon a future successful, ASHA's CAA accreditation process, graduates may also be able to take the PRAXIS examination in order to begin the ASHA Clinical Fellowship (CF) experience. MSLP Program graduates, once licensed to work as speech-language pathologists in Puerto Rico, will be able to work with governmental agencies, public and private organizations. Graduates will also be prepared to work with diverse populations like bilingual, monolingual Spanish-English, and rural or disadvantage population.

Expectations from Students

UAGM- Gurabo Campus, MSLP Program students are expected to:

1. Complete the course's required prerequisites prior to enrolling in any given course.
2. Adhere to the standards of SLP practice appropriate to their level.
3. Follow independent learning activities and commit to life-long learning.
4. Be prepared on-time for class's presentations and clinical activities.
5. Prepare and deliver academic, professional, and clinical presentations in front of class, parents, or guests.
6. Adhere to ethics principles while engaging in coursework or practicum activities.
7. Care, maintain, and replace, if needed, any materials or equipment used during clinical practice, research or courses presentation.
8. Complete and hand-in assignments when due or make alternate arrangements with the instructor **PRIOR** to the due date.
9. Follow the current edition of the Publication Manual of the American Psychological Association (APA) in preparing written course work.
10. Document proof of immunizations and provide health, good conduct, and CPR certifications as requested.

MSLP Program Courses Description

MSLP Program Courses

This section includes a current description of all the courses offered at the MSLP Program. Revised descriptions as they apply will be available through courses syllabus.

MSLP 501 Anatomy and physiology for speech language pathologists 3 crds

The complexity of the anatomy and physiology used in the production and perception of speech, language, and hearing, as well as the anatomy and physiology of swallowing, is discussed and analyzed. This knowledge will serve as a framework for understanding the pathophysiology of these structures and provides a basis for knowing how and where to intervene when attempting to treat or compensate for atypical processes in speech, language, hearing, and swallowing production. This understanding is framed in the context of responsibility, professionalism, empathy for the people cared for, and cultural competence.

MSLP 502 Normal Development in Speech and Language 3 crds

This course provides an in-depth exploration of typical speech and language development across the lifespan. It examines the biological, cognitive, and social foundations of communication, integrating current research on language acquisition and speech development. Students will analyze developmental milestones in both monolingual and bilingual children. Special emphasis is placed on cultural and linguistic diversity, as well as bilingualism.

MSLP 503 Acoustics and Speech Science 3 crds

This course provides an understanding of fundamental acoustic principles and their application in the evaluation and treatment of speech and language disorders. Topics such as the nature and description of sound, simple harmonic motion, pressure waves, decibels, frequency, source-filter theory, spectral analysis, signal digitization, and resonance in speech production will be explored. Additionally, the perception of sound will be covered, and acoustic variations in bilingual and diverse populations will be considered. Through an evidence-based approach, students will learn to apply these concepts in the clinical diagnosis and treatment of patients with speech and hearing disorders.

MSLP 504 Neuroscience and Neurogenic Disorders 3 crds

This course provides an exploration of the neuroscientific foundations relevant to speech-language pathology, focusing on the anatomy and physiology of the brain and nervous system. Topics include the brain's organization, motor and sensory pathways, cranial nerves, and their role in speech, language, and communication. Students will examine the neural mechanisms underlying language, learning, and memory processes. The course also covers diagnostic techniques used in neurology and the assessment of neurogenic disorders. Special attention is given to the effects of neurological conditions and brain injuries on communication, including aphasia, dysarthria, apraxia, aphonia, and other disorders for bilingual and multilingual populations. The course will emphasize evidence-based practices for evaluating and treating neurogenic communication disorders, as well as the development of patient and family education strategies.

MSLP 506 Motor Speech Disorders in Children 2 crds

This course provides an in-depth exploration of neuromotor disorders affecting communication in pediatric populations, with a special emphasis on childhood apraxia of speech (CAS) and pediatric dysarthria. It covers underlying mechanisms, clinical manifestations, assessment approaches, and evidence-based treatment strategies. Additionally, the course integrates a multicultural and linguistic perspective to adapt interventions for Hispanic communities, particularly in the United States and Puerto Rico.

MSLP 507 Speech-Language and Cognitive Disorders in Adults 3 crds

This course discusses the study of the theoretical bases of acquired language disorders in the adult population. Diagnostic tools and treatment approaches based on theories of the nature of aphasia, apraxia, dysarthria and other adult language and cognitive disorders are discussed. Current trends in language and cognitive treatment in response to changes in the healthcare environment are analyzed. Areas to be covered are acquired communication problems, traumatic brain injury, apraxia of speech, dysarthria and types of dementias among other language disorders. Adaptation of the environment, particularly home is studied.

MSLP 508 Voice and Voice Disorders 3 crds

This course focuses on the study of the speech mechanism and its role in voice production. It examines the analysis of voice and the causes of voice issues in both children and adults, including conditions like vocal hyperfunction and hypofunction, psychogenic voice disorders, neurogenic conditions, laryngeal cancer, and issues faced by professionals who rely on their voice for work. The course also covers diagnostic methods, clinical interventions, and strategies for preventing and treating voice disorders in a variety of populations, including bilingual and diverse populations.

MSLP 509* Fluency and Fluency Disorders 3 crds

Study of the normal and disordered speech fluency based on a critical review of the research and suggested theoretical models such as speech motor processing, integrative theory, psycholinguistic theory, psychological factors and brain functioning. Mayor theories such as those of Shames, Sheehan, Van Riper and Bloodstein, among others, are analyzed. Prevalence and incidence of stuttering including male-female ratio, genetic factors and environmental factors are presented. Current evaluation and management procedures and their underlying rationale are emphasized. Counseling and stuttering evaluation and therapy strategies (stuttering modification and fluency shaping therapy) are analyzed and discussed.

MSLP 510 Language disorders in children 3 crds

This course discusses the analytical study of the evaluation and intervention of children with language disorders. The nature of language disorders is presented and the factors that can affect the development of communication; such as cognitive deficiencies, autism spectrum disorder, learning difficulties, information processing difficulties, hearing loss or brain trauma. The processes of first

language acquisition, bilingual and multilingual acquisition are contrasted as well as multicultural considerations in language acquisition, assessment and diagnosis and intervention of language disorders. Evaluation and intervention methods related to different disorders are studied. The description of the practices relevant to the development of goals, planning of intervention activities and training of managers are discussed.

MSLP 511 Assessment and Treatment in Phonological Disorders 3 crds

This course addresses the study and analysis of phonology with a focus on monolingual and bilingual Spanish-English speakers. Topics include phonological analysis, the evaluation of distinctive features, and multidimensional analysis, integrating considerations of the interactions between the phonological systems of Spanish and English. Evaluative processes and treatment approaches based on linguistic theories, adapted to the needs of bilingual populations, will be discussed. Additionally, the course will explore topics related to phonological awareness, reading, and writing in both monolingual and bilingual children, considering how phonological patterns in both languages impact the development of these skills.

MSLP 520 Audiology for Speech Language Pathologists 3 crds

The study of standard and specialized audiometric procedures such as behavioral tests, otoacoustic emissions, audiological responses of the brain stem and impedance tests are analyzed. The anatomy and physiology of the auditory mechanism and the physical characteristics of the sound are described. The interpretation of audiograms and their clinical diagnostic relationship are described, discussed, and evaluated. The strategies for planning intervention, provision of services and recommendations are presented considering cultural variables, integrity, empathy, responsibility, and professionalism. The course is aimed at audiology issues that relate to the practice of speech-language pathology according to the evidence-based practice and critical thinking through clinical cases, test analysis and practice exercises.

MSLP 541* Ethics and Professional Issues in SLP 2 crds

This course discusses the study of legal, administrative and professional issues of practice in different scenarios or settings. Includes current scope of practice according to the Puerto Rico Law 77 from 1983, and the American Speech-Language-Hearing Association (ASHA), ASHA certification standards, professional law, licensure, ethics, responsibilities, and local licensure guidelines. Policy and practice for service delivery in the context of health care, schools, hospitals, private practice, and other work settings are analyzed. Measures to provide quality health services are described. Scope of practice and professional legislation is described in accordance with the Organización Puertorriqueña de Patología del Habla-Lenguaje y Audiología (OPPHLA).

MSLP 542* Multilingual and Multicultural Issues 2 crds

This course explores the impact of cultural and linguistic diversity on the practice of speech-language pathology in the United States and Puerto Rico. It includes the study of bilingualism, second language acquisition, and its relationship with normal language development. The course also

addresses the barriers that cultural and linguistic minorities face in accessing appropriate clinical and healthcare services, integrating legal, ethical, and social perspectives. It examines contemporary intercultural dynamics, including those related to migrants from Asia, Africa, Latin America, and the Caribbean, as well as African American and Native American groups. Emphasis is placed on assessment, intervention, and educational programming for linguistically diverse learners, incorporating technological tools and culturally sensitive approaches.

MSLP 550**Clinical Assessment Skills****3 crds**

Analytical study of the principles of assessment, observation, interviewing, effective interpersonal communication, and self-evaluation. Theories in language assessment are discussed. Students will select and administer appropriate speech and language test. The diagnostic report format and writing process is described. Clinically related academic activities and practical experiences are provided. Introduction to interdisciplinary evaluation. Assessment in each area is studied according to the guiding principles and the fundamental components of Preferred Practice Patterns for the profession of speech-language pathology document from the American Speech-Language and Hearing Association. Expected outcomes, clinical/educational indications, clinical process, setting/equipment specifications, safety and health precautions and documentation are discussed according to ASHA guidelines.

MSLP 570***Augmentative Alternative Communication****2 crds**

This course is designed so that participants can learn the alternatives offered by assistive technology and augmentative and alternative communication (AAC) in developing communication skills in populations with severe communication disorders. Symbol systems and vocabulary selection strategies are described. The Augmentative Alternative Communication Predictive Assessment Model is discussed and analyzed. Motor access and visual consideration strategies are studied. Use of AAC with individuals evidencing specific disabilities such as apraxia of speech, autism, multiple sclerosis and physical disabilities are demonstrated. Funding and legal issues in augmentative and alternative communication are discussed.

MSLP 580**Aural Rehabilitation****3 crds**

The principles of aural rehabilitation are discussed and analyzed including the theoretical framework, its applications, and components within the context of responsibility, professionalism, empathy, and cultural variables. The impact of hearing problems on speech and language development are analyzed from the framework of evidence-based practice and integrity. The theoretical and methodological aspects of aural rehabilitation are studied developing critical thinking. Manual and visual communication, auditory training, communication strategies, counseling and technological assistance teams for hearing are discussed and studied standing out the communication use of the profession.

MSLP 594+**Simulation in SLP****2 crds**

This course provides students with hands-on experience in a simulated clinical setting, designed to integrate theory with real-world practice. Students will engage in patient simulations, case studies, and collaborative exercises, focusing on evidence-based practice, cultural competence, and the management of diverse, multilingual populations. The course emphasizes clinical assessment, treatment planning, interprofessional collaboration, and ethical decision-making. Through guided simulations and reflective practice, students will develop their diagnostic, therapeutic, and professional communication skills.

MSLP 596+**Clinical Intervention Internship****2 crds**

This course provides the opportunity to continue and expand practical experiences in the field of speech-language pathology. Through the internship, participants will work in supervised clinical settings, developing and applying evidence-based interventions to address the communicative needs of diverse populations.

The course emphasizes the integration of advanced clinical skills, critical case analysis, and the adaptation of therapeutic approaches to multicultural and bilingual contexts. Students will have the opportunity to collaborate with interdisciplinary teams, implement personalized evaluation and intervention strategies, and demonstrate competencies in clinical documentation and professional communication.

This internship is designed to foster comprehensive professional development, consolidating the theoretical and practical foundations necessary for ethical and effective practice in speech-language pathology.

MSLP 601**Feeding and swallowing disorders in children and adults****3 crds**

This course explores the assessment, diagnosis, and treatment of feeding and swallowing disorders across the lifespan. Students will learn about the anatomy and physiology of swallowing, common pathologies, and evidence-based intervention strategies. Emphasis will be placed on interdisciplinary collaboration, case studies, and clinical applications, including pediatric and adult populations. The course will also cover ethical considerations and cultural competency in the management of swallowing disorders. Students will gain practical experience through simulated clinical scenarios and clinical practicum opportunities.

MSLP 603***Craniofacial and Genetic Disorders****2 crds**

This course studies the anatomical, physiological and psychosocial aspects of genetic and craniofacial conditions. Basic anatomical information pertinent to craniofacial growth and development, as well as genetic and embryological information, is described. These conditions and their medical implications for infants, preschool children, school-aged children, adolescents, and adults are discussed, with emphasis on aspects of communication. Evaluation and intervention procedures in speech, language and hearing are studied in clients with genetic and craniofacial conditions. Interprofessional support in these cases is described.

MSLP 605*	Research Methods in Speech-Language Pathology	2 crds
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The research paradigms will be discussed and analyzed: qualitative, quantitative, and mixed. The different approaches of conceptual frameworks, sampling, data collection, data analysis and dissemination will be presented. The student will be exposed to the effective search for literature review and professional writing style. Students will be introduced to all aspects and steps necessary to conduct research responsibly, in accordance with the laws and regulations applicable to research and human subjects in research, compliance and the requirements of the UAGM Institutional Review Board (IRB). They will present a research proposal according to a topic of interest and impact in the field of speech and language pathology.

MSLP 607*	Supervision in SLP	2 crds
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This course presents conceptual and empirical literature on supervision, including models, approaches, techniques, relationships, and situations within the process, as well as the ethical and legal considerations involved in supervision. Particular emphasis is placed on the importance of integrating cultural, linguistic, and social diversity into all aspects of the supervisory process. The course provides students with the knowledge and skills necessary for the successful development of competencies in supervision, adopting an inclusive perspective that promotes equity and cultural sensitivity. Comprehensive models of clinical supervision are included, addressing the specific needs of multicultural populations, self-assessment with a focus on cultural competence, and the evaluation of supervisee development in diverse contexts. Additionally, intervention techniques in the supervisory relationship are addressed, fostering respect for individual differences and recognizing sociocultural factors that may influence the process.

MSLP 611+	Clinical Practice Experience I	3 crds
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Hands-on clinical experience. Students will accumulate the first 187.5 hours of the required 375 supervised clinical practicum hours at a variety of settings including Clínica de Servicios Interdisciplinarios Universidad Ana G Méndez in-house clinic, hospitals, schools, clinical private practice, among others. Observation, interviewing, basic assessment, clinical diagnosis, and intervention experiences are provided in children and adults

MSLP 612+	Clinical Practice Experience II	3 crds
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This course is a continuation of MSLP 600. This course requires interns to continue providing direct services to clients with communication disorders in various clinical settings. Students will accumulate 187.5 hours of the 375 hours of required supervised clinical practice in a variety of settings including: the Ana G. Méndez-Gurabo University Interdisciplinary Services Center. Emphasis is placed on the use of diagnostic and identification techniques in conjunction with evidence-based intervention strategies, therapeutic techniques, file management and report writing, as well as the interprofessional aspect. Orientation to parents, teachers and related service personnel is an integral part of this internship as well as multicultural and multilingual considerations of clients.

MSLP 686***Evidence Based Practice Seminar****1 crd**

This seminar focuses on the integration, analysis, and application of all Master's level Speech-Language Pathology courses (MSLP code courses) with a strong emphasis on evidence-based clinical practice. The course highlights the application of current research and best practices in the evaluation, diagnosis, and treatment of various speech-language pathologies through case studies. Special attention is given to the use of evidence-based interventions and the critical analysis of clinical scenarios to ensure the development of effective, culturally competent, and patient-centered therapeutic strategies.

Equipment and Physical Facilities

Universidad Ana G. Méndez has demonstrated its commitment with the continued development of the MSLP Program. Financial support for equipment purchases and maintenance during the past years has been consistent and increasing. UAGM- Gurabo Campus has invested important financial resources in the purchase and maintenance of equipment to enhance and support the MSLP Program student's academic and clinical learning experience.

UAGM Speech-Language Pathology and Audiology Clinic

In support of the bachelor's, master's, and doctoral programs in Speech-Language Pathology, UAGM, Gurabo Campus, is proud to offer specialized services in the assessment and diagnosis of communication disorders and delays, as well as offering intervention services. These services strengthen all academic programs, positioning the clinic as a welcoming center for students, research, academic work, and community service.

The clinic's office hours are Monday through Friday, from 8:00 a.m. to 5:00 p.m. and the services offered include:

- Screenings and evaluations for children and adults in speech (apraxia, dysarthria, articulation, phonology, oromotor, etc.), language (oral and written, for all ages), voice, fluency, feeding, dysphagia, and hearing.
- Intervention and treatment for children and adults in speech, language, voice, fluency, feeding, and dysphagia.
- Individual and group intervention for adults with Parkinson's disease through the SPEAK OUT! © Program.
- Treatment focused on cognitive skills in adult patients with neurological conditions.
- Counseling for families and the community at large on speech and language-related conditions.

Audiology

The UAGM Speech-Language Pathology and Audiology Clinic offers services to individuals of all ages from infants to the elderly. The services include otoscopy, middle ear evaluations (tympanometry, acoustic reflex, reflex decay), and basic hearing evaluation (pure tone air and bone conduction thresholds, and speech audiometry,). We have a sound booth, a Middle Ear Analyzer with Reflexes and Reflex Decay and a PC Based audiometer with Sound Field.

The clinic also has portables screening audiometers designed to meet quality and safety standards within a lightweight model. The audiometers have the advantage of small dimensions for easy handling. The frequency range is 125 Hz to 8000 Hz and a hearing level range of -10dB HL to 100dB HL. The audiometers are portable and lightweight, also enable testing in a full range of frequencies and intensity levels with steady, frequency-modulated, and pulsed stimulus modes. These portables audiometers are used to perform hearing screenings both at the clinic and as part of our community services outside of the clinic.

There also some comprehensive aural rehabilitation services offered through our clinic to enhance communication and quality of life. These services may consist of auditory training, speech reading, personalized communication strategies, and supportive counseling, all tailored to meet the unique needs of each individual.

Voice and Swallowing

The equipment housed within the voice and swallowing lab in the Clinic, is used to diagnose and treat voice disorders, class demonstrations and for research. The equipment includes a Computerized Speech Lab (CSL) And Multi – Speech Equipment (model 4500) which are used in the voice and speech lab to record, display and analyze acoustic parameters of speech and voice signals for linguistic and communication sciences application. The swallowing lab has two digital swallowing stroboscope systems with scopes- including two naso-pharyngo-laryngoscopes with digital video color processor and digital video recording module.

Audio Recording Equipment

Marantz PMD671 Compact Flash Recorder can record audio files to Microdrives or Compact Flash cards. Designed for compatibility with MP3, MP2, BWF, and WAV formats. Features include: non-stop recording with 6 hours of battery life; menu-driven remote operation; and an EDL marking system for creating new files on-the-fly during recordings for easy file selection during playback.

Marantz PMD-620 Pro Handheld SD MP3/WAV Recorder Handheld portability with one-touch stereo recording, professional recording features and flexible file formats, digital recording with file size limited only by SD card capacity, on-board editing and playback features, full inputs and outputs, including USB 2.0 connectivity.

MSLP Program Student Academic Policies And Procedures

Student Policies and Procedures

UAGM has adopted several policies related to Students and Academic Affairs. These policies have been approved by institutional governing bodies and students are expected to familiarize themselves with these policies and procedures and adhere to them. Questions regarding each policy may be addressed by the office or department in charge of implementing them. There are other policies and procedures that are specific to the master of speech-language pathology academic program and have been vetted by the program's faculty and may be reviewed yearly or as needed.

Admission to the UAGM Gurabo Campus, MSLP Program

Universidad Ana G. Méndez Gurabo Campus, and the School of Health Sciences (SHS) MSLP Program are committed to the principles of nondiscrimination and equal opportunity for all persons. Students are evaluated for admission to the MSLP Program without regard to race, color, religion, gender, age, or national origin.

Admission to the MSLP Program occurs each year only for the fall semester. The admissions process begins formally in March 1st and continues until the end of Summer. Students must meet all of the following admission requirements:

1. Hold Bachelor's degree or an equivalent degree from an accredited institution of higher education with a minimum grade point average (GPA) of 3.0 out of a 4.0 scale.
2. Complete a graduate programs application and submit it with the nonrefundable application fee.
3. Submit official transcripts of credits with the graduate application for admission. This transcript must demonstrate the candidate's compliance with the following courses:
 - *Biological Sciences*
Biology, human anatomy and physiology, neuroanatomy and neurophysiology, human genetics, veterinary science
 - *Physical Sciences*
Physics or Chemistry
 - *Social/Behavioral Sciences*
 - *Psychology, sociology, anthropology, or public health*
 - *Statistics*
 - *A stand-alone course in statistics is required. Research methodology courses in communication sciences and disorders (CSD) may not be used to satisfy the statistics requirement.*

*Courses taken only as a pre-requisite requirement **do not** count toward the students GPA for admission. At the moment of the evaluation for admission a student may have in progress **only two** (2) of the required courses. Interested candidates are strongly encouraged to submit their transcripts ahead of time to the MSLP Program Director in order to receive an academic requisites evaluation.*

4. Candidates who meet the requirements and submit the necessary documentation (admissions application and transcripts for academic assessment of prerequisite courses and GPA), will be invited to participate in an interview with the appointed MSLP Program admission committee. Part of the interview process includes a written essay (which may be completed in Spanish or English), and the submission of letters of recommendation to evaluate both academic and non-academic qualities.

These components allow the admissions committee to assess critical thinking, written and verbal communication skills, leadership potential, professionalism, and commitment to the field. The program maintains a holistic review process, ensuring that applicants are evaluated on their academic achievements as well as their interpersonal and professional attributes, preparing them for success in speech-language pathology.

The interview interaction is conducted mainly in Spanish with specific questions focused on the student's self-assessment of their abilities with the English language and partial participation in oral English expression.

Readmission to the UAGM Gurabo Campus, MSLP Program

A student readmitted to the Program need to complete a minimum of nine (9) credits during the last semester in order for the degree to be awarded. In order to be considered for readmission to the UAGM MSLP Program students:

1. Must have interrupted his/her studies for a full academic term or more.
2. Must have a cumulative grade point average of 3.0 in the MSLP Program.
3. Must have been in academic good-standing during the last semester of studies.
4. Will be subject to an interview by the MSLP Program Director in addition to the regular admission committee interview.
5. Must meet the requirements for the admission to the MSLP Program as well as other general readmission requirements.

Transfer Credits into the MSLP Program

Students transferring from other CAA-ASHA accredited institutions or with completed masters or doctoral degrees in other disciplines must meet all the admission requirements established for the MSLP Program (undergraduate GPA, interview, and specific academic requisites).

Candidates must not have been subjected to any academic or disciplinary sanctions at their previous academic Institution. Official transcripts must be provided for the program director to issue an academic evaluation of the courses that may be considered for transfer.

Registration of Courses

Students will register for courses in person at the School of Health Sciences. In addition, students can make an electronic authorization for the department's academic coordinator to complete their courses registration. Clinical practice courses (MSLP 594; MSLP 596, MSLP 611, and MSLP 612) cannot be registered on-line. These courses will be registered by the department's academic coordinator with the approval of the program's clinical coordinator.

Students, who are in a study plan because of a failed course, or another academic performance issue will review their plan with the department's academic coordinator or program director, **every term** before completing the enrolment process. Students must be aware that once they fail a course there is no guarantee that the courses the student needs to take according to his personalized plan will be available. If time conflicts occur with needed courses, the department's academic coordinator or program director, will

advise the student on which course to take and will re-arrange the plan of study. Program completion dates will likely be affected by a revision of the plan of study.

Semester Academic Load

The MSLP Program courses are designed to be completed on blocks. Courses are offered once a year only. Students must follow their assigned block each semester. If a student fails one of the block courses, he will need to wait until the failed course is offered again. No further courses requiring the failed requisite can be taken. Students taking 6 credits are considered full-time students by UAGM. Students taking anything less than 6 credits are considered part-time students by UAGM.

Absences

Students are expected to be diligent in the pursuit of their studies and regular in their class and clinical attendance. Loss of time in any course (defined by the student missing 4 or more class meetings in any semester or summer sessions) may require that the student repeat the course. This will be evaluated on individual basis through the mechanism of academic mentoring.

Students have the responsibility of making arrangements satisfactory to the instructor regarding all absences. Such arrangements should be made prior to the absence whenever possible.

Policies for making up work missed as a result of an absence are at the discretion of the instructor. Students should inform themselves at the beginning of each semester concerning these policies. The MSLP Program in consultation with the faculty member(s) involved **reserves the right to withdraw a student** from a course because of excessive absences that interfere with the attainment of course objectives and the development of knowledge and skills.

Clinical learning experiences represent a commitment and responsibility to clients as well as essential application of knowledge. Satisfactory demonstration of course requirements and clinical competency is necessary for successful completion of the course.

Academic Withdrawals

Academic withdrawals must be made through the Registrar's Office or a failing grade will be recorded. Deadlines for withdrawal are provided by the Institution each semester.

Grades

All MSLP code lecture courses must be approved with a minimum grade of B. Clinical practicum courses (MSLP 594, MSLP 596, MSLP 611 and MSLP 612) are on a (P) pass or (NP) not pass grade system. Universidad Ana G. Méndez is on a 4.0 grade point system. Graduate courses are graded A, B, C, D, and F. The grading scale for the MSLP Program is:

NUMBER	GRADE
90 – 100	A
80 – 89	B
70 – 79	C
60 – 69	D
Bellow 59	F

Incomplete (I) Grade

In **lecture courses** students who fail to take the final examination and have at least one partial grade, may be given an incomplete grade. Students must present official evidence to the professor of a valid reason for their absence to the final test (e.g. hospitalization, accident or serious family illness).

It is the student's responsibility to make the necessary arrangements with the professor to complete any final class requirements and/or take the final exam in order to remove the incomplete grade. Students need to complete this process thirty (30) days after the next semester begins. If the grade is not made up within the time period required, it will be changed automatically to the calculated grade with the missing academic work. After this is completed, the professor does not have any responsibility of making up course work for the student or to change the final grade.

MSLP Program Graduation Requirements

In order to be awarded with the Master of Science in Speech-Language Pathology the student must:

1. Complete all the required MSLP code courses (64 credits) with a minimum grade of B or Pass in clinical practicum courses.
2. Complete the prerequisites courses ideally prior to admission: 3 social science credits, 3 biological science credits, 3 physics or chemistry credits and 3 statistics credits
3. Complete a minimum of 400 clinical practicum hours. A minimum of 375 hours must be accrued while the student is engaging in direct client-patient contact. Up to a maximum of 25 clinical observation hours will be counted toward the grand total.
4. Taking a comprehensive degree exam (in the style of a board exam or "mock test").

MSLP Program Comprehensive Examen -"Mock" Board Test

The MSLP Program Comprehensive Exam or Mock Test is a departmental test developed by faculty members according to their area of expertise. The examination consists of 100 multiple choice questions in English distributed in the areas of Basic Human Communication Processes; Phonological and Language Disorders; Speech Disorders; Neurogenic Disorders; Audiology/Hearing; Clinical Management; and Professional Issues/Psychometrics/Research. The passing score of the MSLP Program Comprehensive Examination is 70 points.

The MSLP Program Comprehensive Exam or Mock Test is given at the end of the Fall semester at the conclusion of the first External Clinical Experience (MSLP 611). If a student fails the Mock Test, the student will be referred to Universidad Ana G. Méndez Gurabo Campus Quality of Life and Retention Office as well as referred to the Academic Advisor for the development of an Individualized Intervention Plan (IIP) for remedial action before the student is invited to take the Mock test again.

Students with Special Needs and Requests for Accommodations

All students in the MSLP Program, including students with disabilities, are expected to meet the standards outlined by ASHA's Scope of Practice upon graduation from the program. The Master's Program in Speech-Language Pathology at UAGM, Gurabo Campus, adheres to the university's policies and procedures for ensuring that students with disabilities or functional diversity have access to appropriate and reasonable academic accommodations. These procedures are in full compliance with Puerto Rico Law 250 (2012, as amended) and are implemented in a manner that ensures confidentiality, dignity, and equity.

The university has an established process, coordinated through its Office for Services to Students with Disabilities or Functional Diversity, to determine the need for accommodations and to facilitate their provision. The program ensures that these institutional policies are consistently applied and supported by program faculty and administrators.

<https://uagm.edu/es/vida-estudiantil/servicios-para-estudiantes-con-impedimentos>

Process for Requesting and Implementing Accommodations

Students seeking accommodations are guided through the following standardized steps:

1. Initial Orientation
The student visits the designated office for disability services to receive orientation regarding available support services, required documentation, and the procedures to request reasonable accommodations.
2. Formal Request and Documentation
The student completes a Request for Reasonable Accommodation form and submits all required supporting documentation. An interview is conducted with a licensed rehabilitation counselor or professional counselor.
3. Evaluation and Notification
Once the application and documentation are reviewed, the student is notified of the decision and the approved accommodations. The counselor prepares an official Accommodation Letter.
4. Student-Faculty Communication
The student is responsible for delivering the Accommodation Letter to each professor. Accommodation becomes effective only after the faculty member receives and acknowledges the letter. Students are encouraged to discuss with their professors how the accommodations will be implemented in each course.
5. Documentation and Implementation
The student returns a signed copy of the Accommodation Letter, confirming agreement with the professor regarding the accommodation. Accommodation is not retroactive and must be renewed at the start of each academic term.
6. Ongoing Support
Any concerns, questions, or adjustments related to accommodations are addressed directly through the Office for Services to Students with Disabilities or Functional Diversity.

Consistency and Program Responsibility

The Speech-Language Pathology program is committed to ensuring consistent implementation of these procedures. Faculty are informed of their responsibilities under this policy and are trained to collaborate respectfully and proactively with students and disability services personnel. Program administrators coordinate closely with the institutional office to monitor compliance and to support a learning environment that is inclusive and accessible for all students.

UAGM, Gurabo Non-Discriminatory Policy

Our Institution does not exclude from participating and do not reject benefits, nor discriminate against any person for reasons of ethnicity, sex, age, color, place of birth, origin or social condition, impairment or political, religious, social or labor views.

The Universidad Ana G. Méndez (UAGM) Gurabo Campus, MSLP Program faculty, staff, students and visitors in the academic area and the program's clinic are treated in a nondiscriminatory manner—that is, without regard to race, color, religion, sex, national or ethnic origin, disability, age, sexual orientation, genetic information, citizenship, or status as a covered veteran.

https://documento.uagm.edu/asuntos_estudiantiles/UAGM_Student_Manual_Translation.pdf

MSLP Program and Language Proficiency Requirement

The Master Program in Speech-Language Pathology at Universidad Ana G. Méndez, Recinto de Gurabo requires all applicants to demonstrate proficiency in both English and Spanish, as the program is designed to prepare bilingual clinicians capable of delivering evidence-based services to Spanish-speaking, English-speaking, and bilingual populations across Puerto Rico and beyond. However, the program's main language of instruction is Spanish.

Program Philosophy and Rationale on Language Proficiency

The MSLP program's bilingual proficiency requirement aligns with the linguistic and cultural reality of Puerto Rico, as well as the program's mission to train clinicians who are culturally responsive, linguistically competent, and prepared to serve diverse communities. Upholding clear and consistent language expectations, ensures that graduates are fully equipped to meet the demands of clinical service delivery and professional communication in both Spanish and English.

In cases where an applicant demonstrates strength in one language but has limitations in the other, the committee may consider conditional admission, with language support or remedial coursework as part of the academic plan, provided the applicant shows potential for functional bilingual performance.

Language Proficiency Expectations

Proficiency is defined as the ability to read, write, speak, and understand both languages with a level of fluency that supports graduate-level academic work and clinical service delivery. Applicants must show functional academic and clinical proficiency in:

- Spanish: for conducting evaluations, therapy, counseling, and documentation with monolingual and bilingual Spanish-speaking clients and families.
- English: for engaging with academic literature, preparing written assignments, and completing national certification when applicable (e.g., the Praxis® exam in English).

Methods for Verifying Language Proficiency

In order to ensure consistency in the application of this policy, the following standardized procedures are used during the admissions process:

- **Application Materials** - Personal statement and written submissions are reviewed in both languages (when applicable) to assess clarity, grammar, and expressive language skills.
- **Letters of Recommendation** - Recommenders are asked to comment on the applicant's oral and written communication skills in both English and Spanish.
- **Admissions Interview** - All applicants participate in an interview with a panel of faculty members which includes components in both English and Spanish, allowing the admissions committee to directly assess expressive language abilities in real time.
- **Undergraduate Coursework** - Completion of undergraduate coursework in communication sciences or related fields in either language is considered, with special attention to the applicant's ability to function professionally in bilingual environments.
- **Consistency in Application** - The Admissions Committee applies a consistent rubric to evaluate language proficiency across all applicants, regardless of their language background. Rubric items are aligned with the program's defined expectations for oral and written language performance in both English and Spanish.

Confidentiality and Policy for the Retention and Disposal of Student's Academic Records

In accordance with federal statutes and regulations, student records are confidential. Students may have access to their record upon request. Disclosure of any information contained in student records to anyone other than the student will be made only with written permission of the student. A form for release or information is available from the SHS Student Services Director.

The Institutional Policy for the Retention and Disposal of Academic Records establishes the time for record retention:

- Registrar Office - for life
- Admission and Financial Assistance Office - 5 years
- Treasurer Office - 5 years if the student has no debt, if they have a debt with the Institution their record is retained for life.

Speech-Language Pathology Program - 5 years (clinical and academic records). A permanent electronic record of students accrued clinical hours is kept in the Program for life. After the five-year period is completed each May, Program graduates will be informed through their electronic mail on file that their academic records will be disposed and the date this will be done. Graduates will have the option of picking up their records at the Program. Days and times for records pick up will be included in the electronic communication. If a graduate wants someone else to pick up his record, a written and signed authorization must be received at the Program. After the deadline for records pick up has passed, records will be disposed. **Graduates expressly release the Program of the responsibility of any record not claimed and properly disposed after the deadline.**

Academic, Clinical Services and Research Honesty

In their academic, clinical, and independent research activities, students are expected to maintain high standards of honesty and integrity. Passing off as one's own the work of another (plagiarism) is totally unacceptable.

A student is expected to maintain the professional and ethical standards of the SLP discipline. Students are referred to the American Speech-Language and Hearing Association Board of Ethics document *Ethics in Research and Scholarly Activity* available at: <http://www.asha.org/Practice/ethics/Ethics-in-Research-and-Scholarly-Activity/>

DEFINITIONS OF UNACCEPTABLE BEHAVIOR

1. Plagiarism: Taking credit for someone else's ideas, words or statements or other works as one's own without proper acknowledgment. Plagiarism is the presentation of someone else's work, thoughts, words, or ideas, as if they were your own. It is viewed as serious academic misconduct and may result in your **exclusion** from the program. Plagiarism, in any of its forms, will not be tolerated. Examples include:

- **Word-for-Word Plagiarism** – copying exactly from someone else's text.
- **Section-by-Section Plagiarism** – lifting phrases from someone else's text.
- **Select-Term Plagiarism** – lifting a special term from a text not one's own.
- **Paraphrasing** – using someone else's ideas as if they were one's own thoughts.
- **Borrowing facts, statistics and other illustrative material** – unless the information is common knowledge.

2. Cheating: Committing fraud on a record, report, paper, computer assignment, examination or other course requirement. Examples of cheating include:

- **Using unauthorized notes**, study aids or information from another student or student's paper on an examination or any other course requirement, including giving or receiving assistance from another student without the instructor's permission.
- **Altering a graded work** after it has been returned and then submitting the work for re-grading.
- **Allowing another person to do one's work** and to submit the work under one's own name.
- **Submitting two copies of the same or nearly similar papers** to two professors without prior approval.
- **Fabricating data in support of laboratory or fieldwork.** Dishonesty in reporting results, ranging from sheer fabrication of data, improper adjustment of results, and gross negligence in collecting or analyzing data, to selective reporting or omission of conflicting data for deceptive purposes.

3. Aiding and abetting dishonesty: Providing material or information to another person with knowledge that the material or information will be used improperly.

4. Falsification of an academic records and official documents: Altering documents affecting academic or University records; forging signatures of authorization; or falsifying information on an official academic document, election form, grade report, letter of permission, petition, clinical record or any other document.

5. Misuse of computers: Violating the University's condition of use statement, this defines proper and ethical use of computers.

6. Misuse of available facilities: Intentionally abusing available facilities. Examples of available facilities include, but are not limited to, laboratories, classrooms and libraries.

7. Patient relationships: The students are expected to exhibit behavior appropriate to the profession of SLP. They must assume personal responsibility for being in physical and mental condition to give safe SLP care and for the knowledge and skills necessary to give this care. Unacceptable behavior includes, but is not limited to, the following examples:

- **Providing SLP care in an unsafe or harmful manner.**
 - Carrying out an evaluation or intervention without competence or without the guidance of a qualified person.
 - Willfully or intentionally doing physical and/or mental harm to a client.
 - Exhibiting careless or negligent behavior in connection with the treatment of a client.
 - Finding one unable to assume the assigned and necessary treatment of a client and failing to find alternative measures for the delivery of that intervention.
- **Falsifying patient's records or fabricating patient experience.**
 - Failing to report omission of or error in treatments.
 - Fabricating patient experiences.
- **Disrespecting the privacy of a client.**
 - Disclosing the full name or position of a client in a manner that violates the individual's privacy.
 - Discussing confidential information in inappropriate areas, such as elevators or waiting rooms, or with inappropriate persons, such as media representatives.
 - Discussing confidential information about a patient with third parties who do not have a clear and legitimate need to know.

8. Drugs and alcohol: Using, possessing, selling, or distributing illicit drugs; illegally using, selling, possessing or distributing any drugs or alcohol; or using prescribed and/or illicit substance or alcohol.

MSLP Students Academic Advising and Student Outcome Progress Monitoring

The MSLP program's procedures for monitoring student performance and implementing targeted interventions for students who do not meet expectations in either the academic or clinical components. aim to support the development of the knowledge and skills required for competent entry-level practice, in accordance with CAA Standard 4.3.

Knowledge and Skills Rubric

Each course includes defined learning outcomes aligned with ASHA standards. At the conclusion of every course, faculty complete a *Student Outcome Knowledge and Skills Rubric* for each student, documenting their level of mastery for each expected outcome. These checklists help faculty identify students who require academic support or remediation.

Academic Mentoring Advising

Every student is assigned an academic advisor upon admission to the program. Advisors meet with students at least once per semester and more often as needed to review academic performance, interpret outcome checklist data, offer guidance, and facilitate access to support services when necessary.

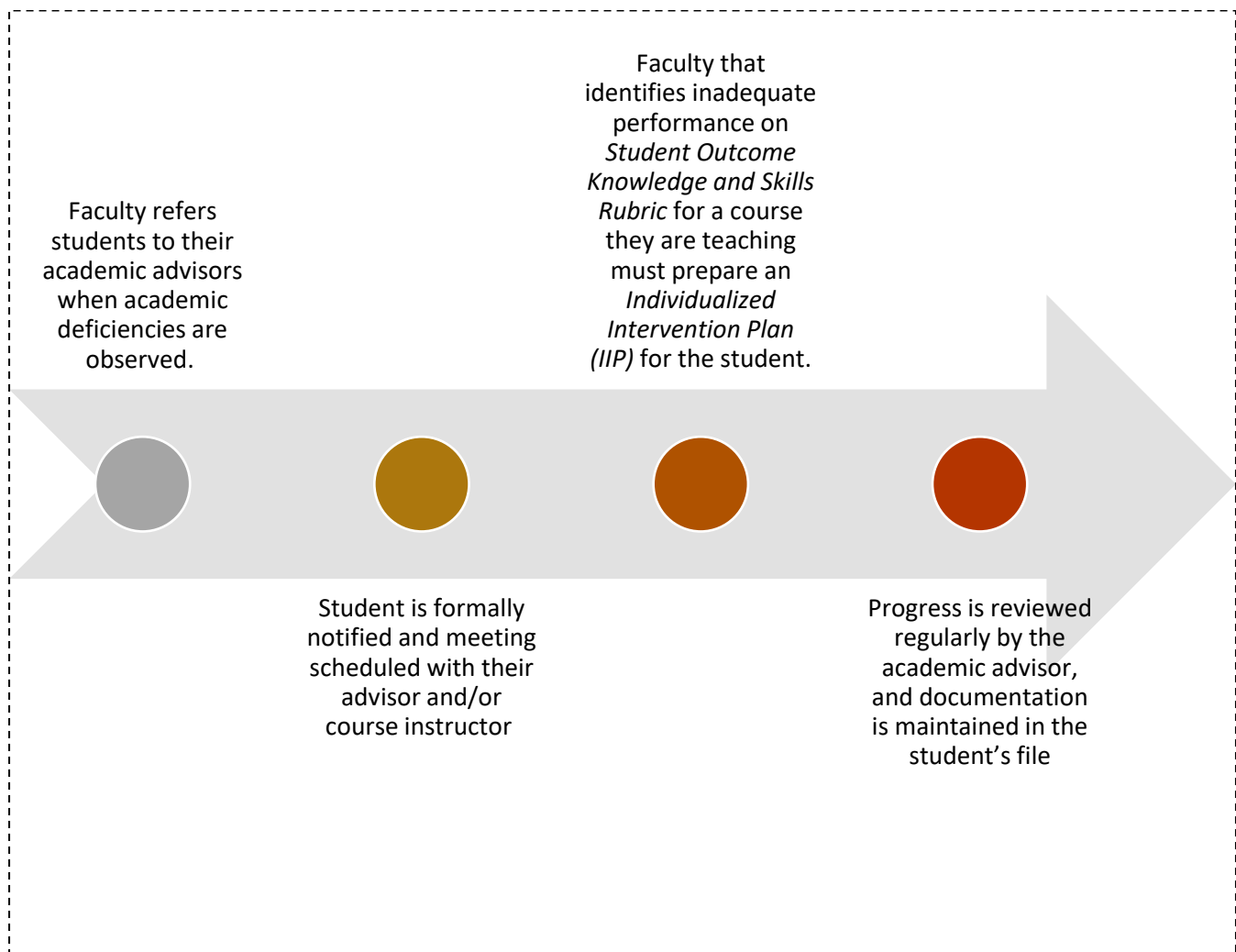
Academic Progress Intervention Procedures

Identification of Academic Intervention Needs

A student may be identified for academic intervention and advising under the following conditions:

- Final grade below B (3.0) in any required course
 - Cumulative GPA below 3.0
 - Inadequate performance on *Student Outcome Knowledge and Skills Rubric* for a course.
 - Repeated instances of incomplete, late, or poor-quality assignments
 - Failure to demonstrate required knowledge competencies aligned with the program and ASHA standards.
1. Identification and Referral
 - Faculty or advisors refer students to their academic advisors in writing when academic deficiencies are observed.
 2. Notification and Meeting
 - The student is formally notified and scheduled for a meeting with their advisor and/or course instructor to discuss concerns.
 3. Faculty that identifies inadequate performance on *Student Outcome Knowledge and Skills Rubric* for a course they are teaching must prepare an *Individualized Intervention Plan (IIP)* for the student. This IIP will be implemented by the faculty in charge of the course and its progress monitored by the student's academic advisor.
 4. Individualized Intervention Plan (IIP)
 - An IIP is developed outlining the following:
 - i. Specific areas of academic concern

- ii. Measurable academic goals
 - iii. Recommended resources (e.g., tutoring, writing center, study groups)
 - iv. Timeline and success criteria
4. Monitoring and Documentation
- Progress is reviewed regularly by the academic advisor, and documentation is maintained in the student's file.
5. Possible Outcomes
- Successful Completion: Student meets academic goals.
 - Plan Extension: Partial progress prompts plan modification.
 - Unsuccessful Completion: Referral to program director. May result in academic probation, course repetition, or dismissal per graduate policies.



MSLP Program Procedures for Monitoring Student Clinical Performance Monitoring Clinical Progress

Clinical Evaluations

Students are evaluated using standardized formative and summative clinical performance rubrics. Supervisors provide regular written and verbal feedback on skill development, professionalism, and clinical reasoning.

Clinical Faculty Oversight

Clinical progress is monitored by the Clinical Coordinator and faculty. Concerns raised by supervisors are reviewed promptly to ensure that students receive the support needed to meet clinical expectations.

Identification of Clinical Intervention Needs

A student may be identified for clinical intervention under the following conditions:

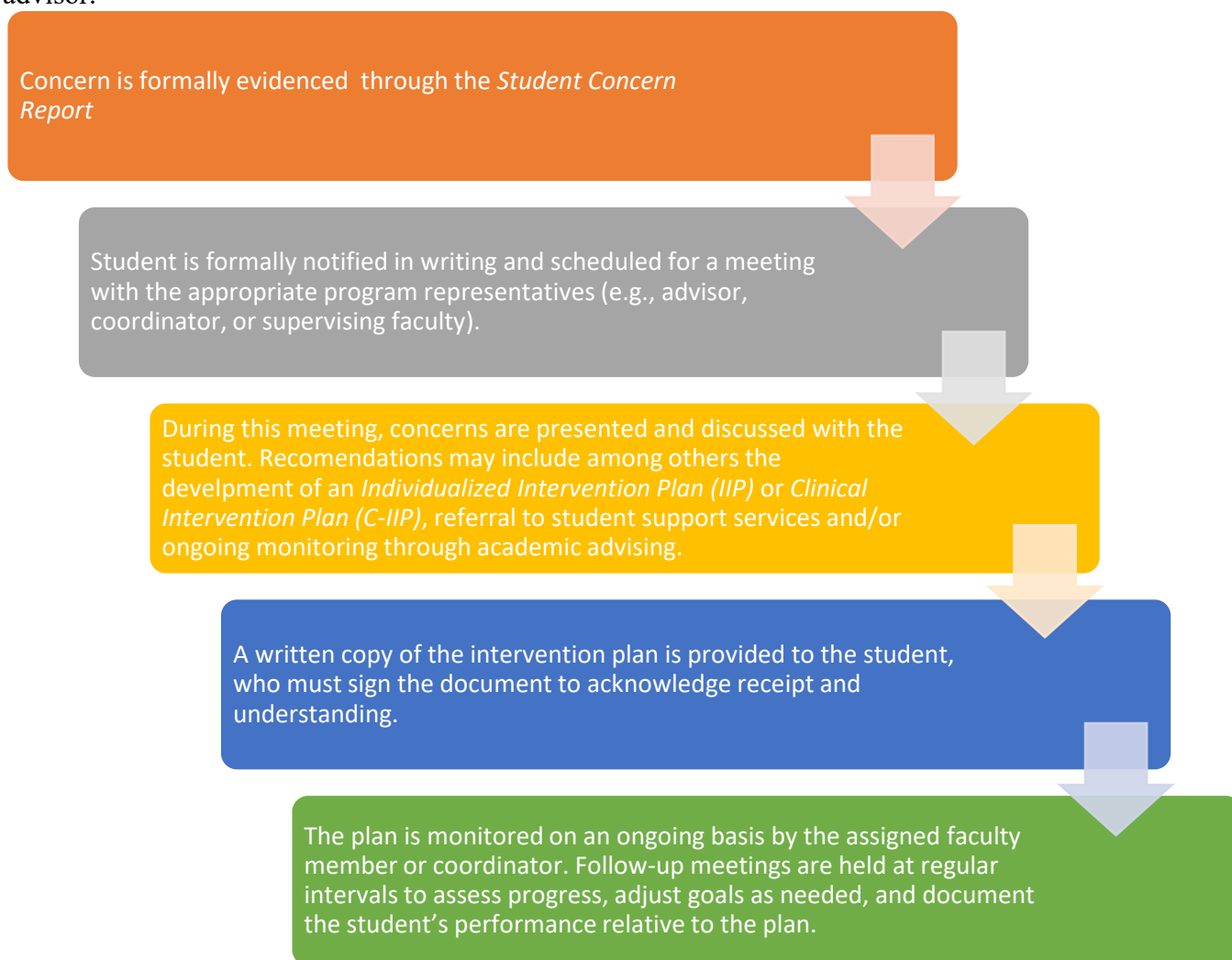
- Ratings below expected levels on clinical evaluations
- Lack of progress toward required clinical competencies.
- Unsafe clinical practices or poor clinical judgment
- Supervisor concerns regarding preparedness, interaction with clients, or unprofessional conduct
- Failure to meet clinical documentation standards or expectations

Clinical Intervention Procedures

1. Identification and Referral
 - Supervisors or clinical faculty submit a *Clinical Concern Report*, to the clinical coordinator, when issues are noted.
2. Notification and Meeting
 - The student is notified and required to meet with the Clinical Coordinator to discuss concerns and determine next steps.
3. *Clinical Individualized Intervention Plan (C-IIP)*
 - A C-IIP is developed and includes:
 - i. Clearly defined clinical performance concerns
 - ii. Specific goals and skill targets
 - iii. Required remediation activities (e.g., shadowing, extra supervision, clinical skills lab)
 - iv. Timeline for review and success criteria
4. Monitoring and Documentation
 - Clinical performance is reviewed at designated intervals, and written documentation is stored in the student's clinical file.
5. Possible Outcomes
 - Successful Remediation: Student meets all targets.
 - Plan Revision: More time or modifications required.
 - Unsuccessful Remediation: Referral to the program director. May result in delayed clinical progression, placement removal, or dismissal according to program policy.

MSLP Program procedures for ensuring implementation of intervention plans, documented, and provided to students

The Master of Science in Speech-Language Pathology program at Universidad Ana G. Méndez – Recinto de Gurabo has established a clear and hierarchical process to ensure that student intervention plans are effectively implemented, thoroughly documented, and clearly communicated to the student. When a student is identified as not meeting academic or clinical expectations—based on course grades, clinical performance evaluations, Student Outcome Checklists, or faculty/supervisor concerns—a formal Student Concern Report is submitted by the identifying faculty or clinical supervisor. This initiates a review by the Academic or Clinical Coordinator in collaboration with the student’s assigned academic advisor.



Once the concern is validated, the student is formally notified in writing and scheduled for a meeting with the appropriate program representatives (e.g., advisor, coordinator, or supervising faculty). During this meeting, the Individualized Intervention Plan (IIP) or Clinical Intervention Plan (C-IIP) is developed collaboratively. The plan includes clearly defined performance concerns, measurable goals, recommended supports or remediation strategies, a timeline for completion, and specific benchmarks for success. A written copy of the intervention plan is provided to the student, who must sign the document to acknowledge receipt and understanding.

The plan is monitored on an ongoing basis by the assigned faculty member or coordinator. Follow-up meetings are held at regular intervals (e.g., biweekly or monthly) to assess progress, adjust goals as needed, and document the student's performance relative to the plan. All notes, updates, and decisions are documented in the student's academic or clinical file using secure storage systems that comply with FERPA and institutional confidentiality policies.

This structured approach of monitoring MSLP Students academic and clinical progress and outcomes ensures transparency, consistency, and accountability in the intervention process, while offering students a clear path to remediate deficiencies and achieve program standards. Regular review of the implementation process is conducted by the program faculty and the curriculum and assessment committee to ensure fidelity and ongoing improvement.

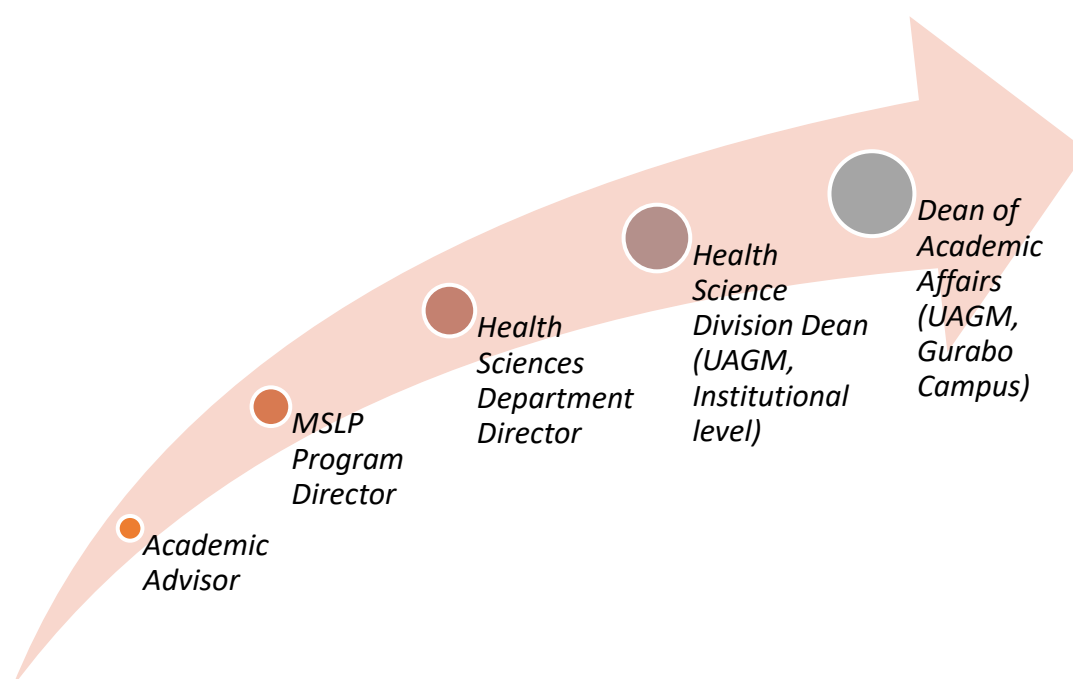
MSLP Program policy and procedures for student complaints

The Master of Science in Speech-Language Pathology (MSLP) program at Universidad Ana G. Méndez, Recinto de Gurabo (UAGM-Gurabo), maintains a clear and structured process for addressing student complaints in a fair, respectful, and timely manner. In alignment with institutional policies and the standards set forth by the Council on Academic Accreditation (CAA), the program ensures that all students are informed of their right to file complaints and the procedures by which these concerns can be addressed.

As part of its commitment to student support and academic integrity, the program has implemented a tiered complaint resolution pathway designed to address concerns at the most immediate and appropriate level. Every student in the program is assigned an *academic mentor*, a faculty member who serves as the primary point of contact for academic and professional guidance. The mentor is also the first individual a student should approach when a concern arises, whether academic, clinical, interpersonal, or procedural in nature.

If the issue cannot be resolved at the mentor level, the student is guided to present the concern to the *MSLP Program Director*, who works collaboratively with faculty and clinical educators to address programmatic or instructional issues. Should further resolution be needed, the complaint proceeds to the *Health Sciences Department Director*, who holds administrative oversight over the MSLP program as part of the Department and ensures that the issue is reviewed in the context of program policy and institutional standards. At the UAGM institutional level the next point of contact for resolution of issues and complaints is the *Health Science Division Dean*.

At any point in this process, if institutional resolution has not been achieved, students may submit their formal complaint to the *Dean of Academic Affairs*, in accordance with the official student grievance procedures of UAGM. All formal complaints filed at this level are reviewed following university protocol, as outlined in the **UAGM Student Manual**, publicly available at www.uagm.edu.



MSLP PROGRAM ASHA STANDARDS AND KNOWLEDGE AND SKILLS

ASHA Accreditation Standards and Certification Standards

ASHA has Accreditation Standards for academic programs and Certification Standards for graduates seeking ASHA professional credentialing. Accreditation Standards are developed to guide academic programs in the process of accreditation and curriculum development. Certification Standards are developed for professionals who will seek ASHA Accreditation (Certificate of Clinical Competence-CCC).

Accreditation Standards - Council On Academic Accreditation (CAA)

The intention of the CAA accreditation is to promote excellence in educational preparation while assuring the public that graduates of accredited programs are educated in a core set of knowledge and skills required to qualify for state and national credentials for independent professional practice. The most recent accreditation standards are from 2017, and revised in January 2023.

The CAA has identified the following six components as essential to quality education in the professions and has established its accreditation standards accordingly:

Standard 1.0: Administrative structure and governance

Standard 2.0: Faculty

Standard 3.0: Curriculum (3.0 B- Speech-Language Pathology)

Standard 4.0: Students

Standard 5.0: Assessment

Standard 6.0: Program resources

Review more information on CAA accreditation standards at:

<https://caa.asha.org/siteassets/files/accreditation-standards-for-graduate-programs.pdf>

ASHA Certification Standards

The most recent 2020 ASHA Certification Standards aims to ensure the credentialing of ensuring qualified professionals who meet specific knowledge, skills, and experience requirements. The Certification Standards are the following:

Standard I—Degree

Standard II—Education Program

Standard III—Program of Study

Standard IV—Knowledge Outcomes

Standard V—Skills Outcomes

Standard VI—Assessment

Standard VII—Speech-Language Pathology Clinical Fellowship

Standard VIII—Maintenance of Certification

For more information on the specific criteria and parameters of each standard please visit:

<https://www.asha.org/certification/2020-slp-certification-standards/?srsltid=AfmBOopRBCTHaCyMtOwoEUX7eEGXbfZO72zfDtep8towgOUV1TG1vP7R>

ASHA Knowledge and Skills

The 2020 standards and implementation procedures for the Certificate of Clinical Competence in Speech-Language Pathology emphasize the need for each student to track their own progress towards meeting certification standards.

Students will need to work closely with their academic advisor in order to monitor their progress achieving of all the standards.

UAGM MSLP Program follows ASHA's Knowledge and Skills as the basis for the structure and content of its curriculum. The MSLP program faculty will work with the students in facilitating their progress and achievement of ASHA requirements. UAGM's MSLP Program students must demonstrate knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

1. articulation
2. fluency
3. voice and resonance, including respiration and phonation
4. receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, and writing
5. hearing, including the impact on speech and language
6. swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding, orofacial myology)
7. cognitive aspects of communication (attention, memory, sequencing, problem solving, executive functioning)
8. social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)
9. augmentative and alternative communication modalities

For each of the areas specified in the student must demonstrate current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

Learn more about ASHA CAA Knowledge And Skills at:

<https://www.asha.org/policy/ks2008-00294/?srsltid=AfmBOooyzv10uJgigBRxCvFLmdx2CPSJFQBvRkFzJV1GzWso95kOC3un>

Requirements for SLP professional credentialing

PUERTO RICO BOARD AND LICENSURE PROCEDURES

The Puerto Rico Board of Speech-Language Pathology, Speech-Language Therapy and Audiology is a division of the Puerto Rico Department of Health. Graduates from the MSLP Program need to complete an application for the board test and the provisional license as soon as they receive their degree. Since April 2013 the fee for application is \$50.00 and the registry fee is \$75.00.

New graduates of Speech-Language Pathology must take and pass a board exam prepared and administered under the direction of the *Speech-Language Pathology and Audiology Board of the Health Department in Puerto Rico*. The board exam contains 100 items and the passing grade is 70. Once a license candidate passes the board examen then they can request their license as a Speech-Language Pathologist. Licensed Speech-Language Pathologists are required to renew their SLP license on time every three years through the evidence of 30 credit hours of continuing education. Failure to renew the SLP license on time, may carry a monetary penalty as well as the inability of continue to work as a SLP clinician.

Renewal candidates should contact the board for specific course requirements since those had changed from time to time. The following link is to the *Speech-Language Pathology and Audiology Board of the Health Department in Puerto Rico* webpage: <https://www.salud.pr.gov/CMS/338>

AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION

ASHA Certification

The Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC) is a semi-autonomous credentialing body of the American Speech Language-Hearing Association. The charges to the CFCC are: to define the standards for clinical certification; to apply those standards in granting certification to individuals; to have final authority to withdraw certification in cases where certification has been granted on the basis of inaccurate information; and to administer the certification maintenance program.

Being "certified" means holding the Certificate of Clinical Competence (CCC), a nationally recognized professional credential that represents a level of excellence in the field of Audiology (CCC-A) or Speech-Language Pathology (CCC-SLP).

Those who have achieved the CCC—ASHA certification—have voluntarily met rigorous academic and professional standards, typically going beyond the minimum requirements for state licensure. They have the knowledge, skills, and expertise to provide high quality clinical services, and they actively engage in ongoing professional development to keep their certification current.

Audiologists and speech-language pathologists establish the standards for certification for audiology and speech-language pathology, respectively, who are members of ASHA's Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC). Certificate holders are expected to uphold these standards and abide by ASHA's Code of Ethics. More than 166,000 professionals currently hold ASHA certification.

HOW TO APPLY FOR CERTIFICATION IN SPEECH-LANGUAGE PATHOLOGY

<https://www.asha.org/certification/slpcertification/>

The [2020 Standards for Certification in Speech-Language Pathology](#) are now in effect. An applicant for the Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP) applies under the standards that are in effect at the time their application is received by ASHA, not the standards in effect at the time of their graduation.

Applying for the CCC-SLP

If you have graduated from a program accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) or from a program with CAA-candidacy status, you may submit your online application any time after completing the necessary coursework and graduate clinical practicum, and after receiving confirmation from your program director that the requirements in Standards I–V have been met.

All academic coursework and clinical practicum must be completed before beginning the Clinical Fellowship (CF) experience. If any coursework or practicum is incomplete, which includes all prerequisite (i.e., basic biology, chemistry, or physics, etc.) and core coursework, the hours completed toward your CF experience will not count toward your minimum 1,260 hours.

Additional Required Documents

To complete your online application for certification, you must also submit the following documents.

- Passing Praxis Exam scores (sent directly to ASHA from ETS).
- Official graduate transcript* which verifies the date and degree awarded (may arrive directly from institution).
- Speech-Language Pathology Clinical Fellowship (SLPCF) Report and Rating Form report through your online application portal.
- Disclosure documents: If you checked yes to a disclosure question on the application, please review the [requirements for certified copies of court or other legal documents](#).

*Internationally educated applicants: Please read [Certification Information for International Applicants](#) to learn what you need to apply for ASHA certification.

ASHA Clinical Fellowship

<http://www.asha.org/certification/Clinical-Fellowship.htm>

The speech-language pathology CF is the transition between being a student enrolled in a communication sciences and disorders (CSD) program and being an independent provider of speech-language pathology clinical services. The CF is a mentored professional experience after the completion of academic course work and clinical practicum.

The purpose of the CF is to integrate and apply the knowledge from academic education and clinical training, evaluate strengths and identify limitations, develop and refine clinical skills consistent with the [Scope of Practice in Speech-Language Pathology](#), and advance the Clinical Fellow from needing constant supervision to being an independent practitioner.

CF Mentor Qualifications

In order to be eligible to mentor a Clinical Fellow, all CF mentors must meet the following requirements:

- Hold a **current CCC-SLP throughout the entire CF experience**.
- The CF mentor and Clinical Fellow cannot be related in any way.
- For all applicants who apply under the 2020 standards and earn hours toward the completion of their CF on or after January 1, 2020, their CF mentors
 - **must have 9 months of full-time experience** (or its part-time equivalent) working as a speech-language pathologist after being awarded the CCC-SLP; and
 - **must have completed 2 hours of professional development in the area of supervision** at least once in your career after being awarded the CCC-SLP.

Duration of the CF Experience

The ASHA CF experience is a minimum of 1,260 hours **and** a minimum of 36 weeks of full-time experience or its part-time equivalent. The majority of applicants will complete this experience in one location with one mentor in a full-time setting. Part-time experiences will require additional weeks to

reach the minimum required 1,260 hours. The CF experience is divided into three equal segments, and each segment represents one third of the total experience.

Full-time CF experience is considered 35 hours per week for 36 weeks, for a total of 1,260 hours. Working more than 35 hours per week will not shorten the length of the CF experience; however, working fewer than 35 hours per week will extend the number of weeks required to reach 1,260 hours. Part-time experiences must be a minimum of 5 hours per week in order to be counted toward the total 1,260 hours.

Eighty percent of the Clinical Fellow's work week must be spent in direct clinical contact related to the management of disorders that fit within the ASHA [*Scope of Practice in Speech-Language Pathology*](#). Examples of direct clinical contact include the following:

- Screening, Response to Intervention (RtI), and/or observations of the client/patient
- Assessment/diagnostic evaluations
- Treatment
- Writing of reports, notes; billing
- Family/client consultation
- Family/client counseling
- Individualized Education Program (IEP) meetings, Individualized Family Service Plan (IFSP) meetings, rounds, or other meetings related to the management of a client/patient's diagnosis and treatment plan

Twenty percent of the work week may be spent doing other activities such as attending in-services or providing trainings and presentations. As a Clinical Fellow, you are required to complete your CF experience within 4 years (48 months) or less from the date your CF began.

Clinical Fellow: Qualifications

The ASHA CF experience may be started only **after** all academic coursework and supervised clinical practicum have been completed, as outlined in the [*ASHA SLP Certification Standards*](#), including all prerequisite coursework (Standard IV-A), core coursework (Standard IV-C), and supervised clinical practicum (Standard V). Professional experiences prior to the completion of all academic coursework and practicum may not be used or applied toward your CF experience.

ASHA Action Center

http://www.asha.org/about/contacts/ <i>The ASHA Action Center welcomes questions and requests for information from members and non-members.</i>	
Available	8:30 a.m.-5:00 p.m. EST Monday-Friday
Members	1-800-498-2071 1-301-296-5700
Non-Members	1-800-638-8255
Fax	1-301-296-8580
TTY	1-301-296-5650
E-Mail	actioncenter@asha.org
Address	2200 Research Boulevard Rockville, MD 20850-3289

PRAXIS Examination

The PRAXIS exam in Speech-Language Pathology assesses beginning practitioners' understanding of the essential content and current practices in speech language pathology. The PRAXIS Examination in Speech-Language Pathology is an integral component of the ASHA certification standards. The development of the PRAXIS exam is commissioned by ASHA and facilitated by the Educational Testing Service (ETS) to provide a system of thorough, fair, and carefully validated assessment.

The PRAXIS exam is used as a requirement for the ASHA Certificate of Clinical Competence (CCC) in Speech-Language Pathology or Audiology. The PRAXIS exam in Speech-Language Pathology has 132 questions. Test-takers have two hours to complete the exam. Accommodations for test takers whose primary language is not English are offered on specific dates. Candidates need to check the ETS web site periodically for this and other options related like dates and test centers (http://www.ets.org/praxis/register/centers_dates/paper/).

The exam consists of multiple-choice questions with varying degrees of complexity, including case study questions. The exam is comprehensive, covering material learned throughout both undergraduate and graduate courses. As a result, test-takers will need to synthesize information they have learned from many sources and understand the subject as a whole. Content is distributed as follows (<https://www.ets.org/s/praxis/pdf/5331.pdf>):

Content Categories	Approximate Number of Questions	Approximate Percentage of Questions
I. Foundations and Professional Practice	44	33 1/3 %
II. Screening, Assessment, Evaluation and Diagnosis	44	33 1/3 %
III. Planning, Implementation and Evaluation of Treatment	44	33 1/3 %

Reference: <https://www.ets.org/s/praxis/pdf/5331.pdf>

For ASHA Certification students need to approve the PRAXIS examination in Speech-Language Pathology with 162 points. Students are responsible for the PRAXIS dues and the compliance with the registration and examination dates.

CAA Complaint Procedure

Any student may submit a complaint about an accredited program. All complaints must be signed and submitted in writing to the Chair, Council on Academic Accreditation (CAA), American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850.

The written correspondence must clearly describe the specific nature of the complaint, the relationship of the complaint to the accreditation standards, and must provide supporting data for the charge.

MSLP Program Professional Organizations & Student Organizations

ORGANIZACION PUERTORRIQUEÑA DE PROFESIONALES DEL HABLA-LENGUAJE & AUDIOLOGOS (OPPHLA)



<https://opphla.org/>

The Puerto Rican Organization of Speech-Language Pathology and Audiology Professionals (OPPHLA) is the only organization that consistently works, monitors, and protects the rights of speech-language pathology, speech-language therapy, and audiology professionals. The organization has participated in the review of various government proposed bills and presented their position.

Mission

To unite professionals and students dedicated to speech-language pathology and audiology in Puerto Rico.

Vision

To provide community outreach services through counseling, screening clinics, donations, and professional counseling.

OPPHLA History

By the 1950's there were some Speech-Language Pathologists who received their education in the United States, practicing the profession in Puerto Rico. By the 60's there were around a dozen SLP's practicing in the Island. At that time a group called *Asociación Puertorriqueña de Patología del Habla, Lenguaje y Audiología* (APPHLA) was conformed. Some of these group members were Gloria Bueno, Anina Vivaldi, Iris Piñeiro, and Edna González.

In 1967 the Speech Language Pathology and Audiology School was founded in the Medical Sciences Campus of the University of Puerto Rico. Dr. Cruz Cancel was the Program's first director. By 1971 the first class composed of 23 students completed their graduation requisites. At the time students graduated with different specialties like Audiology, Speech Pathology, Language Pathology, Speech-Language Pathology, and Deaf Rehabilitation. Between 1972 and 1973 students from the UPR organized and formed what was called at that time *Organización de Habla, Lenguaje y Audiología* (OHLA). Having two organizations was not good for the profession. So a group of professionals under Flor Ossorio presidency achieved the union of the two organizations. By 1976 the new name *Organización Puertorriqueña de Patología del Habla-Lenguaje y Audiología* (OPPHLA) was adopted. Actually, the name is *Organización Puertorriqueña de Profesionales del Habla-Lenguaje y Audiólogos* (OPPHLA).

The American Speech and Hearing Association (ASHA) recognized the organization under Kenneth Johnson presidency. Dr. Patsy Martínez was the first OPPHLA president. OPPHLA embarked in two major tasks, incorporating the organization under the Commonwealth of Puerto Rico bylaws and working to develop a law for the professions. By 1977 OPPHLA was incorporated. After 6 years of hard work on June 3rd 1983 the Law was signed. The new project in the agenda was the constitution of the

board, the development of the board tests, and the process of continued education for the professionals in the field.

Excellent professionals with purpose, dedication, and compromise established the grounds for our today's organization: Daisy Tomassini (78-80), Nydia Santiago (80-82), Sandra Mattos (82-84), Lucy Figueroa (84-85), Nelly Torres (85-86), Ada Zoraida López (86-87), María Bustillo (87-90), Annie Ramos (90-91), Mayra Cabrera (91-93), Soraya Chelleuite (93-94), Suzzette Ruitort (94-96), Alvin Millán (96-98), Maria Socorro Marin (98-2000) Lourdes Serrano (2000-2002) Sara Gonzalez (2002-2003) Iris Mañosa (2003-2004), Calimar Morales (2004-2005), Carmen Hernández (2005-2007) Hilda Malave (2008 2009), Evelyn E. Rivera (2010), Jacquelinne Giannonni (2011-2012), Gildemar de las Angeles Pares (2012-2013), Elba Gándara (2013-2014) , Evelyn E. Rivera Rodríguez (2014-2015), Vilma Valentín (2015-2016), Migdoel Pacheco (2016-2017), Soami Santiago (2017-2020). Today OPPHLA *has* an enrollment of over 400 professionals who can access all of the Organization information through their electronic site at www.opphla.org. For information regarding student participation and enrollment contact OPPHLA at www.opphla.org or OPPHLA Facebook page.

American Speech-Language-Hearing Association (ASHA)



ASHA <https://www.asha.org/about/>

The American Speech-Language-Hearing Association (ASHA) is the U.S. national professional association for speech-language pathologists, audiologists, and support personnel. ASHA represents over 200,000 members in the U.S. its territories and internationally. ASHA establishes academic standards for education and graduate programs accreditation, professional certification of speech-language pathologists and audiologists, as well as leading advocacy for individuals with communication and swallowing disorders, professional development, supporting research and evidence-based practice, and providing ethical and better practices guidance.

Vision

Making effective communication, a human right, accessible and achievable for all.

Mission

We are a dynamic community of audiologists, speech-language pathologists, scientists, assistants, and other affiliated professionals, dedicated to transforming lives. Through partnership and collaboration, we advance science, foster excellence in education and professional practice, establish standards, and advocate for accessible and quality care for all.

Core Values

- We are two professions, with a shared purpose, that are stronger together.
- Scientifically based professional practice advances the discipline of human communication sciences and disorders.
- Collaboration, diversity, equity, inclusion, innovation, and integrity are essential and indispensable in our work.
- We are member-centric and people-focused at our core.

MSLP Student Participation and Representation in Student Associations and Organizations

Student Participation



Capítulo Estudiantil de Profesionales Habla-Lenguaje (Student Chapter of Speech-Language Professionals)

The Student Affairs Office at UAGM, Gurabo Campus promotes the establishment of student associations affiliated to specific academic programs as an important initiative that contributes to the development of student's leadership, social skills, civic responsibility and strengthens ties to the community. Student's participation in student associations enriches university life experiences and the overall development of students as future professionals.

The Student Chapter of Speech-Language Professionals ("*Capítulo Estudiantil de Profesionales Habla-Lenguaje*") invites students from all three speech-language programs, undergraduate and graduate, to become members and active participants in an inclusive community of learning and service.

All students, in compliance with institutional regulations, may belong to student associations recognized by the institution. Any group of ten (10) or more students may form a student association. Interested student groups must follow the procedures established in the Student Regulations and the Student Association Procedures Manual.

Student Representation

Students in the MSLP Program are eligible and encouraged to serve as representatives on the Student Chapter of the Puerto Rico Organization of Speech-Language Pathology and Audiology (OPPHLA), and the National Student Speech Language Hearing Association (NSSLHA)

OPPHLA Student Chapter, *Capítulo Estudiantil de OPPHLA*



Student Members of OPPHLA's student chapter:

- Will have the right to speak, but not to vote, at the meetings.
- May participate in all of the Organization's activities and will benefit from the privileges granted by the Assembly and/or the Board of Directors.
- Are entitled to receive a certificate of participation in continuing education activities.
- May change your classification to professional member as soon as you meet the requirements for that category and will be extended the courtesy of a fee waiver for the professional member category for the current year. The current annual dues paid as a student member through December of that calendar year will also be honored.
- Will benefit from the privileges granted by the Assembly and/or the Board of Directors to this membership category.
- For more information, please review OPPHLA's Bylaws. www.opphla.org

NATIONAL STUDENT SPEECH LANGUAGE HEARING ASSOCIATION (NSSLHA)



The National Student Speech Language Hearing Association (NSSLHA) is a pre-professional membership association for students interested in the study of communication sciences and disorders. National membership is available to undergraduate, graduate, or doctoral students enrolled full- or part-time in a communication sciences program or related major. Students pursuing academic study as speech-language pathology assistants, students pursuing a doctorate of philosophy or doctorate of audiology, as

well as students enrolled in a CSD program outside of the United States can be members of national NSSLHA. (<http://www.nsslha.org/default.htm>).

NSSLHA membership provides benefits that help students stay current on advancements in the field, enhance their academic knowledge, find internships and employment, network with other students with similar interests, and save money on products and services. Founded in 1972, NSSLHA is the only official national student association recognized by the American Speech Language Hearing Association (ASHA).

NSSLHA has approximately 13,000 members at 319 independently operated chapters located on college campuses and universities in the United States, Canada, Mexico, Greece, Israel, and Saudi Arabia.

NSSLHA Contact Information	
Mail	2200 Research Boulevard #322 Rockville, MD 20850-3289
E-Mail	nsslha@asha.org

BECOMING A NSSLHA MEMBER

UAGM Gurabo Campus MSLP Program students are strongly encouraged to become NSSLHA members. Main benefits of membership are: online access to **ALL ASHA journals**; access to NSSLHA/ASHA **members only content**; discounted pricing to attend the ASHA Convention; eligibility for the ASHA Conversion Discount; and eligibility for professional liability insurance. To join:

1. Use the on-line application (UAGM Institutional code is 0961). You may call the Action Center to pay over the phone at 800-638-8255 using a Visa, Discover, or MasterCard.
2. If you wish to pay by check, please go through the online application and choose that option. Once the check option has been selected, instructions will be provided on where to send the check after the application has been received. Please ensure that you print your confirmation and send a copy with your check.

National NSSLHA membership dues are \$60. A new membership year opens each September and last through December of the membership year you pay for. For example, if you pay for 2019 National NSSLHA membership dues on September 15, 2018, and your dues will last from the date of purchase through December 31, 2019. Dues are not prorated.

NSSLHA members can take advantage of the NSSLHA to ASHA membership conversion. The Conversion Discount is a discount of \$225 off the initial dues and fees of \$511 for ASHA membership and certification. The Conversion Discount is a benefit from ASHA exclusively for national members of NSSLHA. To qualify for the Conversion Discount a student must be a national member in NSSLHA the year before and the year of the master's or doctoral graduation. The Conversion Discount is applied when a student submits an application for ASHA membership and certification. The application for ASHA

membership and certification must arrive in the national office before August 31 (up to the year after graduation) to receive the Conversion Discount.

Gift to the Graduate is another incentive. This incentive is available to national members of NSSLHA as well as to non-members. The Gift to the Graduate extends ASHA membership for up to 18 months in the first year of ASHA membership and certification. The application for ASHA membership and certification must be received in the national office between May 1 and August 31 annually to receive this incentive.

NSSLHA CHAPTER

UAGM Gurabo Campus has been promoting among its MSLP students the development of a NSSLHA local chapter. Having a NSSLHA chapter ensures that a student will have access to resources and information to succeed in the field of audiology, speech-pathology, and speech-hearing research. To start a NSSLHA Chapter students need to:

- Download a copy of the Chapter Application. <http://www.asha.org/NSSLHA/chapters/Start-a-NSSLHA-Chapter/>
- Identify an ASHA member to serve as your NSSLHA Chapter Advisor.
- Identify at least four students with membership in the national association to serve as chapter officers.
- Draft Chapter Bylaws.
- Submit the NSSLHA Chapter Application and chapter bylaws to the national office by e-mailing nsslhaprograms@asha.org.

NSSLHA Chapters offer many advantages:

- Resources and technical assistance from the national office to recruit members.
- Complimentary copies of all NSSLHA publications, as well as The ASHA Leader.
- Complimentary mailing lists of other chapters in the region.
- Complimentary advertising through NSSLHA's Newsletter, NSSLHA Now!, and through NSSLHA's monthly email blasts to chapters and students.
- Access to Regional Project Grant funds to facilitate educational and professional development projects at your university.
- Access to Community Service Grant funds to facilitate equipment purchases for individuals living with communication disorders.
- Recognition of the chapter, chapter advisor, and/or individual members through the NSSLHA Honors program.
- Eligibility for students from this chapter to apply for open regional councilor positions.
- Recognition of fundraising efforts in support of the "NSSLHA Loves" campaign.
- Permission to use the national logo on advertising and promotional materials.

MSLP PROGRAM CLINICAL COMPONENT OF THE PROGRAM

MSLP Program Clinical Practice Experience Manual and MSLP Program Clinical Simulation Manual

The MSLP Program has developed separate dedicated clinical manuals; one regarding all aspects of clinical practice experience and one for the integration of clinical simulations. These two manuals are made available in digital format to MSLP program students when they are enrolled in the first (MSLP 594) of the four clinical practice courses (MSLP 594, MSLP 596, MSLP 611, and MSLP 612) in the curriculum.

Nevertheless, we include specific elements regarding the clinical component of the curriculum and the MSLP program in the student handbook as a general orientation of the program requirements and expectations.

Clinical Observations Requirement

The MSLP Program component requires students to complete 25 clinical observations hours. A maximum of 25 observation hours will be counted toward the 400 clinical hour requirement. Students may complete the clinical observation hours in a variety of clinical settings. Observation hours are usually assigned as class work and they should be completed as instructed by the course professor. Students will not use clinical hours completed as a requirement of one course, to fulfill the requirements of another course. Clinical observation hours as well as practicum hours can be signed and supervised only by professionals who hold the ASHA Certificate of Clinical Competence (CCC).

During clinical observations students will complete the corresponding form (assessment or intervention). Students will hand the form to the service provider for the corresponding signature. Students are encouraged to clarify doubts with the service provider. They should not be judgmental for what they are observing. Professional conduct is expected from the student at all times.

Students will keep the original Clinical Observation Form. The Forms will become part of the student's clinical record when applying for clinical practicum. Only original forms with legible original signatures and time recorded will be accepted for the clinical practicum application. Students must not use any type of corrector (liquid or tape) in clinical forms including the clinical observation forms. They must strikethrough any mistake and write down the corresponding initials.

Students can coordinate observations in external settings. They will need to use a presentation letter available in this Manual. Students will be responsible for obtaining the Clinical Coordinator's signature in this letter. Students must adhere to the MSLP program's dress code when doing clinical observations. Any violation to the established rules in a clinical setting will be reported to the Clinical Coordinator for proper action.

Clinical Practice Component and Requirement

The MSLP Program clinical experience requirement adheres to ASHA's 2020 Standards and Implementation Procedures for the Certificate of Clinical Competence in Speech-Language Pathology which consists of a total of **400 clock hours** which include

- a **minimum** 25 clinical observation hours before engaging in direct client/patient contact
- a **minimum** of 250 hours of supervised clinical practice hours within the graduate program acquired through on-site and in-person direct contact
- a **maximum** of 75 direct contact hours may be obtained through clinical simulations (CS) at the discretion of the graduate program
- up to a **maximum** of 125 contact hours of services provided via telepractice, at the discretion of the graduate program and when permitted by the employer/practicum site and by prevailing regulatory body/bodies—and when deemed appropriate for the client/patient/student and the applicant's skill level and with under the supervision of clinical educator/supervisor skilled in providing and supervising services that are delivered through telepractice

The Clinical Practice Experience Manual will further explain in details all the norms, procedures, documentation and regulations regarding the clinical practice experience of MSLP students. The MSLP Clinical Practice Experience Manual is also discussed during a required orientation meeting before students begin their clinical practice experiences.

Clinical Assignments

While completing their 4th semester (during their Program's second year for evening program students) and while completing their 2nd semester (during their Program's first year for day program students) students will complete the *Clinical Practicum Application Form*. In their application, students will evidence their compliance with clinical practicum coursework requisites. They will specify contact information and their availability for completing clinical placements. Enrollment in clinical practicum is dependent on the successful completion (grade B or better) of the required coursework and evidence of having completed the 25 clinical observation hours. A failing grade in any of the pre-requisite courses precludes the student from participating in clinical practicum.

The Program's Clinical Coordinator will collect student's applications in order to verify academic information and assign students for their first clinical experience through the MSLP 595 course.

MSLP Student Handbook Program Forms

HEALTH SCIENCES DIVISION
ALLIED HEALTH SCIENCES DEPARTMENT
SPEECH-LANGUAGE PATHOLOGY PROGRAM

CLINICAL OBSERVATION FORM - TREATMENT

STUDENT NAME	STUDENT ID
DATE	SETTING
COURSE	CLINICIAN'S NAME
DURATION (please select) <input type="checkbox"/> 1hr <input type="checkbox"/> 45min <input type="checkbox"/> 30min <input type="checkbox"/> 20min <input type="checkbox"/> 15 min	SLP SIGNATURE PR LICENSE AND ASHA #

PATIENT RECEIVING SERVICE (please select) ☐ adult ☐ adolescent ☐ children ☐ infant

INTERVENTION TYPE (please select) ☐ speech ☐ language ☐ combined

SELECT TREATMENT AREA (please select) ☐ feeding/dysphagia ☐ voice ☐ fluency ☐ articulation ☐ language ☐ AAC ☐ aural rehabilitation

Answer the following questions using narrative style. Use an additional sheet of paper as necessary. Hand this Form to the clinician delivering the service. Have the clinician sign the form and include his/her PR license and ASHA account number.

1. How was the intervention session initiated?

2. What strategies did the clinician use to elicit the client's participation in the tasks presented?

3. Describe the intervention physical space in terms of its arrangement and how materials are managed and presented? What strategies for the organization and integration of materials, did you observe in this intervention?

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SPEECH-LANGUAGE PATHOLOGY PROGRAM

4. Which motivational strategies the clinician use during the intervention? Taking into consideration the patient's age and clinical presentation; in your opinion, did these strategies seem pertinent?

5. Which strategies did the clinician use to ensure the patient understood the clinical task instructions and what was expected from him/her?

6. List at least three of the materials used during the intervention.

7. Which security and protection measures did the clinician use during intervention?

8. How did the clinician document data for the intervention? (Note taking during the intervention, writing therapy progress notes at the end of the session, etc)

9. Describe how did the intervention conclude. How did the clinician summarize the client's performance, selection of therapy materials, activities conducted, and follow up plan to parents, family members or to the patient himself/herself?

HEALTH SCIENCES DIVISION
ALLIED HEALTH SCIENCES DEPARTMENT
SPEECH-LANGUAGE PATHOLOGY PROGRAM

CLINICAL OBSERVATION FORM - ASSESSMENT

STUDENT NAME	STUDENT ID
DATE	SETTING
COURSE	CLINICIAN'S NAME
DURATION (please select) <input type="checkbox"/> 1hr <input type="checkbox"/> 45min <input type="checkbox"/> 30min <input type="checkbox"/> 20min <input type="checkbox"/> 15 min PATIENT RECEIVING SERVICE (please select) <input type="checkbox"/> adult <input type="checkbox"/> adolescent <input type="checkbox"/> children <input type="checkbox"/> infant INTERVENTION TYPE (please select) <input type="checkbox"/> speech <input type="checkbox"/> language <input type="checkbox"/> combined SELECT ASSESSMENT AREA (please select) <input type="checkbox"/> feeding/dysphagia <input type="checkbox"/> voice <input type="checkbox"/> fluency <input type="checkbox"/> articulation <input type="checkbox"/> language <input type="checkbox"/> AAC <input type="checkbox"/> aural rehabilitation	SLP SIGNATURE PR LICENSE AND ASHA #

Answer the following questions using narrative style. Use an additional sheet of paper as necessary Hand this Form to the clinician delivering the service. Have the clinician sign the form and include his/her PR license and ASHA account number.

1. How was the patient's case history taken?

2. Which case history questions were more meaningful to you?

3. Do you think all questions asked during the case history were adequate and appropriate given the patient's situation?

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4. During your observations while the clinician gave instructions in the implementation of formal assessment tasks; which parts of the process were more noteworthy to you?

5. Which strategies did the clinician use to make sure the patient understood the formal test instructions?

6. Which formal tests were administered?

7. Which informal (criterion referenced) activities were administered?

8. Which measures did the clinician take to safeguard the patient emotional state and minimize possible anxiety during performance in evaluation tests?

9. Describe the conclusion of the assessment session when the clinician summarizes the patient's performance to parents, family members or to the patient himself/herself.

HEALTH SCIENCES DIVISION
ALLIED HEALTH SCIENCES DEPARTMENT
SPEECH-LANGUAGE PATHOLOGY PROGRAM
STUDENT ADVISING
STUDENT CONCERN REPORT

Student Identification:

Student Name:	ID Number
MSLP Program Cohort: <input type="checkbox"/> Daytime <input type="checkbox"/> Evening	Date of Referral: ____ / ____ / ____
E-Mail:	Phone (optional):

Reporting Party:

Name of Faculty/Clinical Educator:	Role/Title:
Email:	

Description of Concern:

Nature of the Concern (Check all that apply):	<input type="checkbox"/> Academic Performance <input type="checkbox"/> Clinical Performance <input type="checkbox"/> Professional Behavior <input type="checkbox"/> Communication Skills <input type="checkbox"/> Attendance/Punctuality <input type="checkbox"/> Ethical Conduct <input type="checkbox"/> Other: _____
Context in which concern was observed:	<input type="checkbox"/> Academic Course (Name/Code): _____ <input type="checkbox"/> Clinical Site (Name): _____ Date(s) of Incident or Observation: ____ / ____ / ____
Detailed Description of Concern: (Provide a clear and objective description of the issue)	
Specific Examples: (Refer to evidence, assignments, behaviors, incidents, or documentation)	

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Severity and Potential Impact on Student's Progress:	<input type="checkbox"/> Minor (Requires monitoring) <input type="checkbox"/> Moderate (May affect performance if unaddressed) <input type="checkbox"/> Severe (Likely to impact academic or clinical standing) Brief Explanation:
Preliminary Recommendations:	<input type="checkbox"/> Faculty/Advisor Meeting with Student <input type="checkbox"/> Referral to Clinical Coordinator <input type="checkbox"/> Individualized Intervention Plan (IIP) <input type="checkbox"/> Individualized Clinical Intervention Plan (C-IIP) <input type="checkbox"/> Ongoing Monitoring <input type="checkbox"/> Referral to Counseling or Support Services <input type="checkbox"/> Other:
Comments or Follow-Up Suggestions:	

SIGNATURES

Reporting Party Signature: _____ Date: ____ / ____ / ____

Academic Advisor Signature: _____ Date: ____ / ____ / ____

Program Director Signature: _____ Date: ____ / ____ / ____

HEALTH SCIENCES DIVISION
ALLIED HEALTH SCIENCES DEPARTMENT
SPEECH-LANGUAGE PATHOLOGY PROGRAM
CLINICAL PRACTICE EXPERIENCE APPLICATION FORM

GENERAL INFORMATION:

Name: _____ ID Number: _____
Month/year applying for Clinical Externship I (MSLP 611): _____
Expected Graduation Year: _____

CONTACT INFORMATION:

Phone Numbers: _____
E-mail: _____
Postal Address: _____

Area of residence? _____
Other accessible geographical areas? (if applicable): _____

AVAILABILITY INFORMATION:

Please state days of the weeks and times available for clinical practice. **Please be as specific as you schedule allows:**

DAYS OF THE WEEK	AM (8:00 to 12:00m)	PM (1:00 to 5:00pm)
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		

FOR THE USE OF THE CLINICAL COORDINATOR:

Student has fulfilled all of the academic clinical practicum requisites ____ Yes ____ No

Please indicate the course(s) that have not yet been approved by the student:

Student submitted the Clinical Observation Record Form as evidence of having completed 25 Clinical Observation

Hours ____ Yes ____ No

Student has submitted evidence of Hepatitis B vaccination ____ Yes ____ No

Student has submitted evidence Puerto Rico Background Check Program (Law 300) ____ Yes ____ No

HEALTH SCIENCES DIVISION
ALLIED HEALTH SCIENCES DEPARTMENT
SPEECH-LANGUAGE PATHOLOGY PROGRAM

CLINICAL OBSERVATION RECORD SUMMARY FORM

- Total observation hours to be completed 25 -

Student Name: _____

Identification Number: _____

Year student initiated the graduate program: _____

Applying for Clinical Externship I (MSLP 611): _____ (month)/ _____ (year)

General Instructions: Group clinical observation hours completed by month and year.

Specify the time completed the supervisor's name, and ASHA and PR license numbers.

<i>Month and year when hours were completed</i>	<i>Number of hours, minutes or hours and minutes completed</i>	<i>Supervisor's Name</i>	<i>ASHA Account Number</i>	<i>PR License Number</i>

Student Signature

MSLP Clinical Coordinator

HEALTH SCIENCES DIVISION
ALLIED HEALTH SCIENCES DEPARTMENT
SPEECH-LANGUAGE PATHOLOGY PROGRAM
RESEARCH AUTHORSHIP AGREEMENT FORM

Through this document _____ (student's name) accepts _____ (professor's name) invitation to participate on his/her research study titled _____

The student has been advised and understands that his/her work regarding this research will not be counted as equivalent to credits or other MSLP programs established requirements (including academic courses, course work, clinical practice activities, required comprehensive "mock" test, among others). The student is responsible for completing all the MSLP program requirements to obtain the master's degree.

In voluntary agreement, the student and the professor here specify the assigned tasks for student participation in this research project.

(INCLUDE A LIST OF ASSIGNED TASKS)

As part of the participation in this research the student will be invited to participate in a series of professional activities _____ (list potential professional activities thought). The student participates in the presentation of the research results in the role of _____, (co-author/collaborator/participant...) as agreed upon at the beginning of the participation. The student's name will appear in alphabetical order after the first author's name if she/he completed the assigned research task. Every oral presentation, poster, article or reference will be written using all last names in the order specified.

Data collected through this investigation can be used in future research not related to this one according to the IRB regulations. In this case the student's authorship would not apply since it would be considered to be a different research project.

I, _____, the student, make the agreement of following up all research endeavors until my participation in this research project is completed and to collaborate in all related research presentations as it is possible.

SIGNED TODAY: month _____ day _____, 20____.

Principal Author (Faculty)

Student

SLP PROFESSIONAL CODE OF ETHICS



Organización Puertorriqueña de Profesionales del Habla-Lenguaje y Audiólogos

Según enmendado y aprobado en Asamblea Extraordinaria del 26 de agosto de 2023

Preámbulo

La Organización Puertorriqueña de Profesionales del Habla- Lenguaje y Audiólogos, en **adelante**, la "**Organización** " u **OPPHLA**), **ha seguido** principios y estándares comunes a la práctica profesional desde su fundación **en 1976**. Este compromiso se formalizó en 2005 con la creación de nuestro primer código ético. En aras de continuar fortaleciendo la integridad y los pilares éticos se ha revisado y ajustado el código para reflejar la práctica actual y cumplir con los retos, cambios y beneficios de las profesiones.

La comunicación es el proceso vital para el intercambio de información entre los individuos. Para que exista una comunicación efectiva se requiere una coordinación de diferentes sistemas físicos y ambientales.

Deficiencias en una de estas áreas puede resultar en desordenes de comunicación. Esto a su vez puede afectar el desarrollo integral del individuo e interferir con las funciones cognoscitivas, sociales, emocionales y educativas. El/la patólogo/a del habla y lenguaje, el/la audiólogo/a y el/la terapeuta del habla y lenguaje son los profesionales capacitados y licenciados por ley para ofrecer servicios a individuos con desórdenes de comunicación descritos en la ley número 77, "Ley para Reglamentar el Ejercicio de las Profesiones de Patología del Habla-Lenguaje, Audiología y Terapia del Habla-Lenguaje", del 3 de junio de 1983. Como profesionales ofrecemos los servicios de acuerdo con las funciones descritas en la misma ley.

El Código de Ética de OPPHLA refleja los principios fundamentales de beneficencia, no maleficencia, de autonomía y de justicia los cuales deben permear en cada dominio del alcance de la práctica. Su contenido es vinculante, representativo y explicativo, ya que define el rol del profesional teniendo como propósito universal el asegurar el bienestar de los consumidores y proteger la reputación e integridad de la profesión. El Código de Ética proporciona una guía para que los profesionales respalden sus acciones, omisiones y decisiones éticas diarias.

En el desempeño de nuestra labor, aceptamos la responsabilidad de poseer las competencias necesarias, aplicamos nuestro conocimiento y competencias de manera objetiva y velamos por los mejores intereses de nuestros clientes, colegas, estudiantes, participantes en investigaciones y por los intereses de la sociedad en general.

Este Código Ético establece los principios básicos y las normas que se consideran importantes a tal efecto y se aplica a los siguientes profesionales:

- Socio profesional

- Socio estudiantil o estudiantes pertenecientes a los Capítulos estudiantiles universitarios afiliados a OPPHLA.

El Código de Ética tiene como objetivo brindar orientación a los miembros o candidatos a membresía en la toma de decisiones relacionadas con las áreas de:

1. Responsabilidad
2. Competencia
3. Confidencialidad
4. Bienestar del Consumidor
5. Declaraciones Públicas
6. Relaciones Profesionales
7. Prestación de Servicios en Práctica Privada

Los principios de ética profesional que a continuación se enumeran son adaptados por OPPHLA como normas mínimas que fijan de manera más concreta la conducta que la sociedad les exige a los miembros de la Organización. Dado que el Código de Ética no pretende abordar situaciones específicas y no cubre todos los posibles dilemas éticos, se espera que los profesionales respeten el contenido del Código y cumplan con su espíritu y propósito. La lealtad y adhesión al Código de Ética conduce al respeto por la profesión y tiene un impacto positivo en quienes se benefician de nuestros servicios.

La enumeración de deberes específicos, sin embargo, no deja de hacer mandatorios otras obligaciones no señaladas en este cuerpo de normas y que son inherentes a la responsabilidad social y profesional de los Patólogos del habla y lenguaje, Audiólogos y Terapeutas del habla y lenguaje, y a la conducta moral que se espera de todo miembro de la profesión. Cualquier acción que viole este Código debe ser considerado antiético.

PRINCIPIO I: RESPONSABILIDAD

En el desempeño de su profesión, los profesionales deben mantener un nivel de excelencia y aceptar la responsabilidad por las consecuencias de sus actos. Deben esforzarse por asegurarse que sus servicios sean utilizados apropiadamente:

A. Los profesionales deben:

1. Prestar servicios profesionales o en el ejercicio de actividades clínicas, profesionales, académicas y de investigación sin discriminar por motivos de edad; raza; color; expresión de género, identidad de género, orientación sexual; nacimiento, origen o nacionalidad, incluida la cultura, el idioma, el dialecto y el acento; condición social; ideas políticas o religiosas; discapacidad física o mental; la información genética; o estatus de veterano.
2. Abogar por el bienestar a nivel profesional de aquellas personas a quienes ofrecen sus servicios.
3. Hacer uso de procedimientos y técnicas adecuadas de acuerdo con las necesidades del cliente. Velando porque todos los equipos e instrumentos utilizados para prestar servicios, realizar investigaciones y actividades académicas se encuentren en buen estado de funcionamiento y debidamente calibrados.

4. Ofrecer a quien sirve, toda la información respecto a la naturaleza y posibles efectos del servicio.
 5. Proveer acceso adecuado a los expedientes de los clientes.
 6. Hacer uso de procedimientos y técnicas adecuadas de acuerdo con las necesidades del cliente. Velando porque todos los equipos e instrumentos utilizados para prestar servicios, realizar investigaciones y actividades académicas se encuentren en buen estado de funcionamiento y debidamente calibrados.
 7. Evitar delegar las tareas relacionadas con la prestación de servicios clínicos, destrezas, los conocimientos, las credenciales y el criterio especializados en su esfera de competencia profesional a ayudantes, auxiliares, técnicos o a cualquier otra persona, que no esté debidamente licenciada por la Junta Examinadora Patólogos del Habla-lenguaje, Audiólogos Y Terapistas del Habla-lenguaje de Puerto Rico. Esto incluye tareas de supervisión, investigación, y otras relacionadas al alcance de nuestra práctica.
 8. Evitar delegar las tareas relacionadas con la prestación de servicios clínicos que precisen las destrezas, los conocimientos y el criterio especializados en su esfera de competencia profesional a estudiantes, únicamente si tales estudiantes estén debidamente capacitados y se supervisan los servicios de manera apropiada. La responsabilidad del bienestar de las personas atendidas sigue recayendo en el audiólogo o patólogo del habla y el lenguaje certificado.
- B. Los profesionales como investigadores se responsabilizan por la selección de temas de investigación y sus posibles impactos en la sociedad, la persona, los animales y el desarrollo de la profesión. Asumen la responsabilidad por los métodos y estrategias analíticas utilizadas en sus investigaciones al igual que por la divulgación de sus resultados. Además, velarán por mantener la confidencialidad de los sujetos bajo estudio y les informarán el propósito de la investigación. Mantendrán el trato respetuoso de los animales utilizados en la investigación.
- C. En el ofrecimiento de los servicios, los profesionales asumen la responsabilidad de informar al patrono, agencia o institución donde trabajan de toda aquella situación que no provea el tiempo, las facilidades y otros recursos necesarios para mantener el nivel de excelencia y seriedad de las tareas que realiza el profesional y que actúen fuera del ámbito del Código de Ética.
- D. El profesional debe informar al Comité de Ética Profesional aquellas violaciones a este Código siguiendo los procedimientos establecidos en la Guía de Procedimientos para violaciones al Código de Ética aprobado en febrero de 1993 y revisado en 26 de agosto de 2023. El no informar al Comité sobre violaciones al Código constituye una violación al mismo.
- E. El profesional debe prestar toda su cooperación a los investigadores del comité de Ética Profesional en asuntos relacionados con este Código.

- F. Los profesionales tienen la responsabilidad de evaluar los servicios prestados para determinar su efectividad e informar los resultados al cliente y los cambios e implicaciones de estos resultados.
- G. El profesional debe sostener, apoyar y defender la dignidad de su profesión y aceptar voluntariamente las normas de la profesión.

PRINCIPIO II – COMPETENCIA

El profesional asume la responsabilidad de mantener los más altos estándares de Competencia profesional velando así por el bienestar de las personas que reciben los servicios profesionales clínicos o que participan en actividades académicas y de investigación. Debe mantener al día sus conocimientos profesionales en cuanto a los servicios que ofrecen.

- A. El profesional proveerá solamente aquellos servicios clínicos y utilizará las técnicas para las cuales está debidamente capacitado por adiestramientos, educación obtenida o experiencias, y realizará todas las actividades académicas o de investigación de manera competente.
- B. Debe mantenerse al día en cuanto a las investigaciones, cambios y nuevos enfoques en el ejercicio de la profesión de Patología del Habla y Lenguaje, Terapia del Habla y Audiología.
- C. El profesional en el ejercicio de las funciones específicas del Patólogo del Habla y Lenguaje; Audiólogo o Terapeuta del Habla y Lenguaje debe poseer licencia otorgada por la Junta Examinadora de Profesionales de la Salud del Estado Libre Asociado de Puerto Rico y cumplir con todos los requisitos de educación continua establecidos por la ley 77 del 3 de junio de 1983 para renovar la misma.
- D. El profesional no empleará a Patólogo del Habla y Lenguaje; Audiólogo o Terapeuta del Habla y Lenguaje, sin licencia para ofrecer los servicios descritos en ley para cada una de las profesiones, y no delegará servicios que requieran competencia profesional a personas no cualificadas.
- E. El profesional solo debe ofrecer los servicios del habla lenguaje y audición en una relación profesional. El ofrecimiento de los servicios de evaluación y terapia no podrán ofrecerse exclusivamente por correspondencia o correo electrónico. Esto excluye el seguimiento por correspondencia o el proveer información general de naturaleza educativa, orientación y prevención.

- F. El profesional no deberá proveer ni supervisar servicios en áreas en las que no haya sido preparado adecuadamente.
- G. El profesional en las áreas de PHL y Audiología, no deberá delegar servicios al terapeuta del Habla-Lenguaje o a personal de apoyo, si no le provee una supervisión apropiada y donde asume las responsabilidades que estipulan los reglamentos que regulan las organizaciones que rigen estas profesiones. En caso de ser provisto el servicio a través de estudiantes, el profesional asume toda responsabilidad del ofrecimiento de estos servicios y el cliente debe ser notificado y estar de acuerdo.
- H. En casos donde la intervención de otro profesional se estime necesaria, el profesional debe identificar fuentes de referidos competentes con propósitos de ampliar, aclarar o delinear resultados obtenidos durante evaluación o tratamiento, incluye además el referir en casos donde se entienda pueda haber conflictos por razón de enfoques, reglas sociales y morales, problemas personales que puedan repercutir de forma negativa el resultado de la intervención.
- I. En casos donde el profesional supervise estudiantes, este no podrá aceptar remuneración del supervisado.
- J. El profesional no discriminará en la prestación de servicios profesionales, ni en la realización de actividades académicas o de investigación por concepto de edad, ciudadanía, discapacidad, origen étnico, género, expresión de género, identidad de género, información genética, origen nacional, incluidos la cultura, el idioma, el dialecto, acento, raza, religión, sexo, orientación sexual o por ser Veterano.
- K. El profesional podrá prestar servicios a través de la telepráctica en conformidad con las normas profesionales y los reglamentos estatales y federales, pero no prestará servicios clínicos únicamente mediante comunicación escrita.
- L. El uso de métodos y herramientas tecnológicas estará de acuerdo con las pautas profesionales aplicables para el área de especialidad. Si tales métodos y herramientas tecnológicas están recomendados pero no están disponibles, el profesional debe referir al cliente para que reciba el servicio adecuado.

PRINCIPIO III- CONFIDENCIALIDAD

La confidencialidad es una de las obligaciones primordiales en la provisión de servicios profesionales en el campo de los desórdenes de comunicación. El profesional deberá tomar las medidas o precauciones necesarias para mantener, respetar y salvaguardar los derechos de confidencialidad de los clientes. Se entiende además que existen circunstancias especiales que limitan este principio. En estos casos es responsabilidad del profesional orientar a los clientes sobre estas limitaciones con la documentación adecuada. El profesional revelará información confidencial cuando cuente con el consentimiento escrito de la persona o su representante, o a menos que sea requerido por ley.

- A. El profesional no divulgará información profesional o sobre los participantes en investigaciones o actividades académicas o personal de los clientes servidos profesionalmente a personas o entidades no autorizadas sin que medie el consentimiento informado del cliente o de su tutor a menos que la misma sea solicitada por la ley, o que sea necesaria para proteger el bienestar de la persona, una tercera o la comunidad.
- B. Se obtendrá el consentimiento informado del cliente sobre la naturaleza de los servicios prestados, las tecnologías utilizadas o los productos distribuidos y los posibles riesgos e impactos de estos. Este deber también incluye informar al cliente de las posibles consecuencias de no seguir las recomendaciones de profesional respecto al tratamiento.
- C. Toda información obtenida en relación profesional con el cliente o participantes en investigaciones o actividades académicas debe mantenerse en expedientes y deben tomarse las medidas necesarias para proteger la confidencialidad y seguridad de éstos al ser archivados. Los expedientes deben incluir toda la información necesaria para ofrecer un servicio de calidad. Esta debe estar completa, actualizada y firmada. En casos de que el profesional requiera supervisión, la información debe estar contrafirmada y el expediente auditado continuamente, incluyendo los expedientes electrónicos. Los expedientes deben incluir toda la información necesaria para ofrecer un servicio de calidad. Esta debe estar completa, actualizada y firmada. En casos de que el profesional requiera supervisión, la información debe estar contrafirmada y el expediente auditado continuamente, incluyendo los expedientes electrónicos.
- D. La información obtenida en procesos de evaluación, consultoría y tratamiento se discutirán solamente con personas claramente relacionadas y autorizadas con el caso. En los informes presentados orales o escritos se presentarán datos pertinentes y relacionados con el propósito del servicio ofrecido. Debe evitarse en lo posible divulgar información privilegiada del individuo no relacionada a los servicios en las áreas del habla-lenguaje y audiología.
- E. Al profesional debe proveérsele un acceso seguro y adecuado para el manejo de los expedientes de los clientes a quienes se les ofrece servicio directo.

- F. E. Información que se utiliza con fines educativos e investigativos debe ser presentada con el consentimiento previo de la persona, o su tutor, o descrito de forma tal que la información no identifique a la persona a la cual se hace referencia.
- G. Todo procedimiento administrativo, clínico, educativo e investigativo debe registrarse por las leyes federales y estatales relacionadas a las prácticas de privacidad y confidencialidad.
- H. Todo procedimiento administrativo, clínico, educativo e investigativo debe registrarse por las leyes federales y estatales relacionadas a las prácticas de privacidad y confidencialidad.

PRINCIPIO IV – BIENESTAR DEL CONSUMIDOR

Los profesionales reconocen y entienden que el respeto a la integridad y bienestar de las personas a los que brindan servicio es esencial en la relación entre cliente y profesional. Debe mantener la objetividad en todos los asuntos que conciernen al bienestar de las personas servidas.

- A. No se falsearán credenciales, competencia, educación, capacitación, experiencia, ni contribuciones a investigaciones o a actividades académicas.
- H. Se evitarán las prácticas o actividades que presenten conflictos de interés en los que las consideraciones personales, profesionales, financieras, u otros intereses o relaciones amenacen afectar la objetividad, la competencia o la eficacia en el desempeño de las responsabilidades profesionales. Si no se pueden evitar tales conflictos de interés, es necesario divulgarlos y gestionarlos de forma adecuada.
- I. El profesional solo debe ofrecer tratamiento a las personas que lo ameriten tomando en consideración su diagnóstico y pronóstico. No les ofrecerá tratamiento a personas que no lo necesiten.
- J. No debe ofrecer servicios con fines de lucro, las intervenciones terapéuticas deben estar basadas en los resultados de las evaluaciones del cliente, sus necesidades y no con otros fines.
- K. El profesional no debe garantizar directa o indirectamente los resultados de los procedimientos terapéuticos. Puede hacer una pronóstico teniendo cuidado de no crear falsas expectativas en el tratamiento.
- L. Debe informarle al cliente al comienzo de su intervención profesional sobre los asuntos financieros de sus servicios en forma clara para evitar conflictos y proteger los derechos del consumidor.

- M. El profesional no facturará servicios que no haya ofrecido tanto a agencias de gobierno como privadas.
- N. El profesional no discriminará a sus clientes por razones de raza, sexo, religión, nacionalidad, edad, condición económica e impedimento.
- O. El individuo que dispone objetos recetados tales como audífonos y auxiliares auditivos, (sistema FM, etc.) a las personas servidas profesionalmente deberá observar las siguientes normas:
 - 1. Los productos recetados asociados con la práctica profesional deben ser dispensados a las personas servidas como parte de un programa abarcador de habilitación.
 - 2. Los honorarios establecidos por los servicios profesionales deben ser independientes de la dispensa de un producto recetado.
 - 3. Las personas servidas deben tener libertad para adquirir los productos recetados y escoger las fuentes de servicio de su preferencia.
 - 4. Con anterioridad a la prestación de un servicio profesional o la entrega de un producto recetado se le debe proveer información a la persona servida sobre el costo del servicio independiente del costo del producto.
 - 5. Los productos dispensados a las personas servidas deben ser evaluados para determinar su efectividad.
- P. Los honorarios de los profesionales deben estar de acuerdo con los servicios ofrecidos.
- Q. La provisión de los servicios de tratamiento de habla-lenguaje y audición estarán basadas en los resultados reflejados en la evaluación. No obedecerán los mismos a otros intereses, incluyendo lucrarse económicamente.
- R. Debe mantener expedientes adecuados donde se reflejen los servicios ofrecidos al cliente.
- S. El profesional garantizará que todo equipo utilizado en la provisión de servicios esté funcionando de manera óptima y de acuerdo con las especificaciones de las agencias reguladoras concernientes si aplica en su defecto o por las especificaciones del fabricante.
- T. Se ejercerá la independencia de criterio profesional al recomendar y proporcionar servicios profesionales cuando una directriz administrativa, una fuente de remisión o una receta impidan dar la máxima importancia al bienestar de las personas que reciban servicios.

PRINCIPIO V – DECLARACIONES PUBLICAS

El propósito de ofrecer declaraciones públicas, anuncios y promoción relacionada con los trastornos de la comunicación y audición es informar al público sobre los servicios y otras actividades relacionadas con la profesión. Por tanto, los mismos deben estar fundamentados con evidencia empírica y salvaguardando el bienestar público y de la profesión.

- A. La información debe ser precisa acerca de la naturaleza y manejo de los trastornos comunicológicos y de la profesión.
- B. El profesional no debe presentar una falsa imagen en relación a su preparación académica o sus competencias.
- C. El profesional no debe emitir declaraciones públicas proveyendo información sobre servicios y productos profesionales que sean representaciones falsas o engañosas.
- D. El profesional no debe utilizar afiliaciones profesionales o comerciales de manera que engañen o limiten los servicios de las personas servidas.
- E. El profesional debe anunciar sus servicios manteniendo un nivel alto de profesionalismo en la comunidad.
- F. Los anuncios y promociones de grupos de desarrollo personal, clínicas, opúsculos que promueven talleres, seminarios y otros programas, deben ofrecer una declaración exacta de su propósito y de lo que se ofrece. Se debe especificar el nombre, la educación, adiestramiento y experiencia de los miembros del equipo.
- G. El profesional incluirá su especialidad y número de licencia al anunciarse en algún medio de comunicación.
- U. Las declaraciones al público deberán proporcionar información precisa sobre las profesiones, los servicios y productos profesionales, y las actividades académicas y de investigación.
- V. Las declaraciones al público se ajustarán a las normas profesionales vigentes y no contendrán tergiversaciones cuando publiciten, anuncien o promocionen servicios profesionales, productos o investigaciones.
- W. No se harán a sabiendas declaraciones financieras o no financieras falsas y se completarán todos los materiales con honestidad y sin omisiones.

PRINCIPIO VI – RELACIONES PROFESIONALES

El profesional debe honrar su responsabilidad y lealtad para con el público; su profesión y sus relaciones con sus colegas y con miembros de profesiones relacionadas.

- A. El profesional no debe participar en actividades que estén en conflicto con los intereses de la profesión, con las normas sociales y morales que puedan afectar la imagen de la profesión.
- B. El profesional debe proveerle educación al público sobre los procesos y problemas del habla, lenguaje y audición y en materias relacionadas con sus competencias profesionales de manera clara y precisa.
- C. El profesional debe esforzarse en ampliar sus conocimientos dentro de la profesión y compartir sus conocimientos e investigaciones con sus colegas y otros profesionales.
- D. El profesional debe establecer relaciones armoniosas con sus colegas y con miembros de otras profesiones sobre los servicios que presta el patólogo del habla-lenguaje, el terapeuta del habla y lenguaje y el audiólogo, así como solicitar información recíproca a estos colegas.
- E. El profesional debe presentar los productos, trabajo o publicaciones que haya desarrollado a sus colegas manteniendo un alto nivel de profesionalismo dando crédito a aquellas personas que hayan contribuido a participar en el proceso.
- F. El profesional debe comunicarse con otros profesionales que estén brindando servicios similares a un cliente ya sea por (Patólogo del Habla, Terapeuta del Habla y/o Audiólogo) para evitar duplicidad de servicios innecesarios. (La comunicación debe ser escrita, telefónica, virtual o personal entre ambos). Sin embargo, el profesional puede proveer servicios bajo tales circunstancias siempre y cuando estos sean provistos luego de considerar cuidadosamente las repercusiones que pueda tener sobre el bienestar del cliente. El profesional discute con el cliente los pormenores de tales arreglos con el objetivo de minimizar el riesgo de confusión, conflicto o daño y en la medida que sea posible con los profesionales involucrados además luego de determinar que son servicios complementarios no ofrecidos en común.

- G. Si un profesional se percata de una violación ética por parte de otro profesional, deberá llevar a cabo un acercamiento informal para orientarlo sobre el asunto. Si la violación no fuera resuelta en este acercamiento informal, es deber del profesional presentar el asunto ante la atención del Comité de Ética de OPPHLA.
- H. El profesional podrá de igual forma hacer una querrela ante la junta examinadora de Patología del Habla y Lenguaje, Terapeuta del habla y Lenguaje y Audiología, o cualquier otro organismo regulador, si sospecha que el profesional ha violado la Ley que reglamenta las profesiones.
- I. El profesional es responsable ante su profesión y el público en general de reportar cualquier violación ante los principios expuestos en este Código de ética.
- J. El expresarse despectivamente de sus colegas u otros profesionales no es parte de la ética y la relación profesional. Cuando se tenga duda razonable de la competencia de un colega u otros profesional, se hablará inicialmente con una acción correctiva de acuerdo con los principios aquí expuestos.
- K. El profesional no participará en esquemas de remuneración o paga por referidos entre profesionales o compañías.
- L. El profesional velará por mantener la dignidad y autonomía de la profesión, manteniendo una relación armoniosa, a nivel colaborativo e interprofesional.
- M. El profesional no entrará en prácticas deshonestas, de fraude, falsa representación o de acoso sexual.
- N. El profesional no participará en actividades sexuales con clientes, estudiantes o colegas sobre quien se ejerce una autoridad profesional.
- O. El profesional debe hacer clara referencia sobre ideas de otros profesionales en charlas, conferencias o escritos.

PRINCIPIO VII – PRESTACION DE SERVICIOS EN PRACTICA PRIVADA

- A. El profesional que ofrece sus servicios en la práctica privada seguirá los principios antes expuestos en este código.
- B. El profesional podrá hacer acuerdos con organizaciones públicas y/o privadas para proveer servicios profesionales, siempre que estos acuerdos no violen los principios de este Código.
- C. El profesional proveerá únicamente los servicios profesionales para los que esté cualificado por virtud de educación obtenida o experiencia clínica.
- D. El profesional ejercitará todas las precauciones razonables para evitar hacer daño o lesionar a las personas que reciben los servicios profesionales.
- E. El profesional es responsable de orientar a sus clientes sobre la prognosis de los servicios a ofrecerse y no garantizará (explícita o implícita) los resultados de ningún tratamiento o procedimiento, o productos recomendados.
- F. El profesional proporcionará la supervisión adecuada y asumirá la responsabilidad por los servicios delegados al terapeuta del habla-lenguaje o por los servicios delegados al personal de apoyo.
- G. El profesional no delegará servicios que requieran competencia profesional a personas no cualificadas.
- H. El profesional no cobrará por servicios que no hayan sido prestados.
- I. El profesional obtendrá consentimiento informado de la persona a la que se prestan los servicios, sobre la índole y los posibles riesgos y efectos de los servicios prestados, la tecnología empleada o los productos recomendados. Esta obligación también incluye informar a la persona que recibe los servicios sobre las posibles consecuencias de no participar en el tratamiento o de no seguir las recomendaciones clínicas. Si se sospecha que la persona a la que se presta servicios sufre una disminución de la capacidad para tomar decisiones, se debe solicitar que un representante legal nombrado o autorizado para que otorgue la autorización apropiada para ellos.

- J. El profesional podrá cobrar penalidad a sus clientes por concepto de ausencias o cancelación del servicio, siempre y cuando el cliente o su representante haya sido notificado de dicha norma. Este concepto no aplica en los casos atendidos a través de un contrato con empresas públicas o privadas, las cuales no contengan dicha norma en sus procedimientos.

- K. El profesional podrá renunciar a un caso siempre y cuando le indique a su cliente o representante las razones por la cual no puede continuar ofreciendo sus servicios. El profesional deberá tomar aquellas medidas razonables que emiten perjuicio a su cliente, tales como orientación sobre lugares o profesionales donde pueda recibir los servicios necesarios para tratar su condición. Al hacer efectiva su renuncia, el profesional deberá entregar a su cliente o representante copia de todos los documentos necesarios para que otro profesional pueda continuar ofreciendo los servicios de tratamiento, y deberá estar disponible para cualquier discusión del caso.

Guía interna de normas y procedimientos sobre alegadas violaciones de socios al Código de Ética de la Organización Puertorriqueña de Patología del Habla, Lenguaje y Audiología

El Comité de Ética es el encargado de interpretar, administrar y hacer cumplir el Código de Ética de la Organización. El Comité de Ética adopta las siguientes prácticas y procedimientos para administrar y hacer cumplir el Código de Ética por los socios de la Organización.

Se reconoce que cada caso debe ser evaluado individualmente y que dos casos que se parezcan no tienen que ser idénticos. Por lo tanto, El Comité de Ética tiene la responsabilidad de ejercer su juicio, según los méritos de cada caso y en la interpretación del Código.

A. *Procedimientos investigativos:*

1. Las alegadas violaciones deben ser revisadas por el Comité y queda a su discreción si la cree necesaria y apropiada. Si luego de esta revisión el Comité decide investigar la alegación, debe notificar al querellado de la alegada ofensa por escrito. Además, debe orientar al querellado que debe responder a la acusación por escrito en o antes de 45 días naturales luego de la fecha de haber sido notificado por el Comité.
2. Queda a discreción del Comité, informar a la Junta Directiva de la Organización que el querellado está bajo investigación del Comité.
3. El Comité debe considerar toda la información firme para su investigación, incluyendo la contestación del querellado a la alegación y debe basar su determinación inicial en esa información.
4. Si el Comité encuentra que no hay evidencia suficiente que amerite continuar el procedimiento, debe notificarle al querellado y al querellante que la investigación terminó.
5. Si el Comité encuentra que hay evidencia suficiente para continuar el procedimiento, el Comité debe hacer una Determinación Inicial, la cual debe incluir lo siguiente:
 - a. la naturaleza de la violación
 - b. la sanción propuesta
 - c. el descubrimiento de la evidencia

6. El Comité puede, como parte de su Determinación Inicial, ordenar al querellado que cese y desista de cualquier práctica que se haya encontrado que viole el Código de Ética. El no cumplir con la orden de cese y desista es, en sí, una violación al Código, y usualmente resulta en una revocación de la membresía.

7. El Comité debe notificar al querellado de su Determinación Inicial. La notificación debe también orientar al querellado de su derecho a pedir una reconsideración del Comité.

B. *Notificaciones y respuestas:*

Todas las notificaciones y respuestas deben ser por escrito y deben ser enviadas al querellado por correo certificado a la dirección que aparezca en el registro de la organización.

C. *Sanciones:*

Las sanciones consistirán en una o más de las siguientes: reprimenda, censura o membresía retenida, suspendida o revocada.

D. *Descubrimiento:*

1. La decisión del Comité cuando sea final debe ser publicada En la revista boletín de la organización, a menos que la sanción sea una reprimenda. En el caso de una reprimenda, la decisión del Comité debe ser revelada al querellado, al abogado del querellado, y a la Junta Directiva, Los cuales deben ser advertidos que la decisión es estrictamente confidencial y que cualquier abuso a esa confidencialidad por cualquier parte que sea socio de la organización es, en sí, una violación al Código.

2. En algunos casos, Incluyendo la sanción de reprimenda, El Comité puede determinar que la decisión sea revetada para grabar las partes envueltas.

E. *Consideración adicional de la determinación inicial Comité de Ética:*

1. Cuando en la notificación de la Determinación inicial. Del comité se establezca que el querellado ha violado El Código de ética y se anuncia una sanción y un descubrimiento de prueba, el querellado puede solicitar al Comité de Ética Una consideración adicional a la determinación inicial.

2. La petición del querellado para una consideración adicional será por escrito y debe recibirse por el comité no más tarde de 30 días naturales, luego de la determinación inicial. La petición de una consideración adicional debe

especificar en qué aspectos La determinación inicial está alegadamente incorrecta y por qué. De una petición para una consideración adicional a tiempo, La determinación inicial será la decisión del Comité, la cual será final y no podrá ser apelada a la Junta Directiva.

3. Querellado somete una petición a tiempo para una consideración adicional, el Comité debe programar una vista y notificar al querellado. A la vista, el querellado puede someter un resumen corto O comparecer personalmente a presentar la evidencia y puede estar acompañado por un consejero. El proceso puede ser informal, El apegarse estrictamente a las reglas puede no ser observado, Pero la evidencia presentada debe dársele el peso que tiene. Como una alternativa a comparecer personalmente a la vista, el Comité puede conceder al querellado la oportunidad de hacer la presentación y responder a las preguntas del Comité por vía telefónica hecha el querellado por el Comité. Todos los costos personales relacionados con la vista de una consideración adicional incluyendo viaje y hospedaje del querellado, testigos del querellado, abogado y otros gastos, Son responsabilidad del querellado. La vista debe transcribirse en su totalidad. A solicitud del querellado se le dará una copia de la transcripción y este debe hacerse cargo de estos gastos.

4. Después de la vista de consideración adicional, el Comité debe tomar una decisión y notificar al querellado. Si la evidencia presentada en la vista es justificable, El Comité puede modificar los hallazgos, Aumentando o disminuyendo la severidad de la sanción y/o Modificar la extensión del descubrimiento Que fue notificado al Querellado en la notificación de la determinación inicial. Esta decisión será la decisión del Comité y en ausencia de una apelación a tiempo a la Junta Directiva, La decisión del Comité será final.

F. *Apelación de la decisión del Comité a la Junta Directiva:*

1. El querellado puede aceptar la decisión del Comité de la junta Directiva. Cuando la decisión requiera revocación de membresía o exposición de la sanción en el boletín o la revista. La petición de una apelación debe ser por escrito y recibirse por el comité no más tarde de 30 días naturales después del día de la notificación de la decisión del Comité.

Esta apelación debe especificar los aspectos de la decisión del comité, que están alegadamente erróneos, y por qué.

2. El procedimiento para vista ante la Junta Directiva, deberá ser descrito por la misma.

G. *Reinstalación:*

Las personas cuya membresía sean revocadas. Pueden ser reinstaladas dentro de 1 año con la aprobación de 2/3 partes del Comité. El solicitante dirigirá Sus esfuerzos a demostrar que la razón o razones para la revocación Ya no existen y que el solicitante, luego de la reinstalación, cumplirá con el Código de Ética.



ASHA
American
Speech-Language-Hearing
Association

CODE OF ETHICS

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PREAMBLE

The American Speech-Language-Hearing Association (ASHA; hereafter, also known as “the Association”) has been committed to a framework of common principles and standards of practice since ASHA’s inception in 1925. This commitment was formalized in 1952 as the Association’s first Code of Ethics. This code has been modified and adapted to reflect the current state of practice and to address evolving issues within the professions.

The ASHA Code of Ethics reflects professional values and expectations for scientific and clinical practice. It is based on principles of duty, accountability, fairness, and responsibility and is intended to ensure the welfare of the consumer and to protect the reputation and integrity of the professions. The Code of Ethics is a framework and a guide for professionals in support of day-to-day decision making related to professional conduct.

The Code of Ethics is obligatory and disciplinary as well as aspirational and descriptive in that it defines the professional’s role. It is an integral educational resource regarding ethical principles and standards that are expected of audiologists, speech-language pathologists, and speech, language, and hearing scientists.

The preservation of the highest standards of integrity and ethical principles is vital to the responsible discharge of obligations by audiologists, speech-language pathologists, and speech, language, and hearing scientists who serve as clinicians, educators, mentors, researchers, supervisors, and administrators. This Code of Ethics sets forth the fundamental principles and rules considered essential to this purpose and is [applicable to the following individuals](#):

- a member of ASHA holding the Certificate of Clinical Competence
- a member of ASHA not holding the Certificate of Clinical Competence
- a nonmember of ASHA holding the Certificate of Clinical Competence
- an applicant for ASHA certification or for ASHA membership and certification

ASHA members who provide clinical services must hold the Certificate of Clinical Competence and must abide by the Code of Ethics. By holding ASHA certification and/or membership, or through application for such, all individuals are [subject to the jurisdiction](#) of the ASHA Board of Ethics for ethics complaint adjudication.

The fundamentals of ethical conduct are described by Principles of Ethics and by Rules of Ethics. The four Principles of Ethics form the underlying philosophical basis for the Code of Ethics and are reflected in the following areas: (I) responsibility to persons served professionally and to

research participants; (II) responsibility for one's professional competence; (III) responsibility to the public; and (IV) responsibility for professional relationships. Individuals shall honor and abide by these Principles as affirmative obligations under all conditions of applicable professional activity. Rules of Ethics are specific statements of minimally acceptable as well as unacceptable professional conduct.

The Code of Ethics is designed to provide guidance to members, certified individuals, and applicants as they make professional decisions. Because the Code of Ethics is not intended to address specific situations and is not inclusive of all possible ethical dilemmas, professionals are expected to follow its written provisions and to uphold its spirit and purpose. Adherence to the Code of Ethics and its enforcement results in respect for the professions and positive outcomes for those who benefit from the work of audiologists, speech-language pathologists, and speech, language, and hearing scientists.

PRINCIPLE OF ETHICS I

Individuals shall honor their responsibility to hold paramount the welfare of persons they serve professionally or who are participants in research and scholarly activities.

RULES OF ETHICS

- A. Individuals shall provide all clinical services and scientific activities competently.
- B. Individuals shall use every resource, including referral and/or interprofessional collaboration when appropriate, to ensure that quality service is provided.
- C. Individuals shall not discriminate in the delivery of professional services or in the conduct of research and scholarly activities on the basis of age; citizenship; disability; ethnicity; gender; gender expression; gender identity; genetic information; national origin, including culture, language, dialect, and accent; race; religion; sex; sexual orientation; or veteran status.
- D. Individuals shall not misrepresent the credentials of aides, assistants, technicians, students, research assistants, Clinical Fellows, or any others under their supervision, and they shall inform those they serve professionally of the name, role, and professional credentials of persons providing services.
- E. Individuals who hold the Certificate of Clinical Competence may delegate tasks related to the provision of clinical services to aides, assistants, technicians, or any other persons only if those persons are adequately prepared and are appropriately supervised. The

responsibility for the welfare of those being served remains with the certified audiologist or speech-language pathologist.

- F. Individuals who hold the Certificate of Clinical Competence shall not delegate tasks that require the unique skills, knowledge, judgment, or credentials that are within the scope of their profession to aides, assistants, technicians, or any nonprofessionals over whom they have supervisory responsibility.
- G. Individuals who hold the Certificate of Clinical Competence may delegate to students tasks related to the provision of clinical services that require the unique skills, knowledge, and judgment that are within the scope of practice of their profession only if those students are adequately prepared and are appropriately supervised. The responsibility for the welfare of those being served remains with the certified audiologist or speech-language pathologist.
- H. Individuals shall obtain informed consent from the persons they serve about the nature and possible risks and effects of services provided, technology employed, and products dispensed. This obligation also includes informing persons served about possible effects of not engaging in treatment or not following clinical recommendations. If diminished decision-making ability of persons served is suspected, individuals should seek appropriate authorization for services, such as authorization from a legally authorized/appointed representative.
- I. Individuals shall enroll and include persons as participants in research or teaching demonstrations/simulations only if participation is voluntary, without coercion, and with informed consent.
- J. Individuals shall accurately represent the intended purpose of a service, product, or research endeavor and shall abide by established guidelines for clinical practice and the responsible conduct of research, including humane treatment of animals involved in research.
- K. Individuals who hold the Certificate of Clinical Competence shall evaluate the effectiveness of services provided, technology employed, and products dispensed, and they shall provide services or dispense products only when benefit can reasonably be expected.
- L. Individuals who hold the Certificate of Clinical Competence shall use independent and evidence-based clinical judgment, keeping paramount the best interests of those being served.
- M. Individuals may make a reasonable statement of prognosis, but they shall not guarantee—directly or by implication—the results of any treatment or procedure.

- N. Individuals who hold the Certificate of Clinical Competence may provide services via telepractice consistent with professional standards and state and federal regulations, but they shall not provide clinical services solely by written communication.
- O. Individuals shall protect the confidentiality and security of records of professional services provided, research and scholarly activities conducted, and products dispensed. Access to these records shall be allowed only when doing so is legally authorized or required by law.
- P. Individuals shall protect the confidentiality of information about persons served professionally or participants involved in research and scholarly activities. Disclosure of confidential information shall be allowed only when doing so is legally authorized or required by law.
- Q. Individuals shall maintain timely records; shall accurately record and bill for services provided and products dispensed; and shall not misrepresent services provided, products dispensed, or research and scholarly activities conducted.
- R. Individuals shall not allow personal hardships, psychosocial distress, substance use/misuse, or physical or mental health conditions to interfere with their duty to provide professional services with reasonable skill and safety. Individuals whose professional practice is adversely affected by any of the above-listed factors should seek professional assistance regarding whether their professional responsibilities should be limited or suspended.
- S. Individuals who have knowledge that a colleague is unable to provide professional services with reasonable skill and safety shall report this information to the appropriate authority, internally if such a mechanism exists and, when appropriate, externally to the applicable professional licensing authority or board, other professional regulatory body, or professional association.
- T. Individuals shall give reasonable notice to ensure continuity of care and shall provide information about alternatives for care in the event that they can no longer provide professional services.

PRINCIPLE OF ETHICS II

Individuals shall honor their responsibility to achieve and maintain the highest level of professional competence and performance.

RULES OF ETHICS

- A. Individuals who hold the Certificate of Clinical Competence shall engage in only those aspects of the professions that are within the scope of their professional practice and competence, considering their certification status, education, training, and experience.
- B. ASHA members who do not hold the Certificate of Clinical Competence may not engage in the provision of clinical services; however, individuals who are in the certification application process may provide clinical services consistent with current local and state laws and regulations and with ASHA certification requirements.
- C. Individuals shall enhance and refine their professional competence and expertise through engagement in lifelong learning applicable to their professional activities and skills.
- D. Individuals who engage in research shall comply with all institutional, state, and federal regulations that address any aspects of research.
- E. Individuals in administrative or supervisory roles shall not require or permit their professional staff to provide services or conduct research activities that exceed the staff member's certification status, competence, education, training, and experience.
- F. Individuals in administrative or supervisory roles shall not require or permit their professional staff to provide services or conduct clinical activities that compromise the staff member's independent and objective professional judgment.
- G. Individuals shall use technology and instrumentation consistent with accepted professional guidelines in their areas of practice. When such technology is warranted but not available, an appropriate referral should be made.
- H. Individuals shall ensure that all technology and instrumentation used to provide services or to conduct research and scholarly activities are in proper working order and are properly calibrated.

PRINCIPLE OF ETHICS III

In their professional role, individuals shall act with honesty and integrity when engaging with the public and shall provide accurate information involving any aspect of the professions.

RULES OF ETHICS

- A. Individuals shall not misrepresent their credentials, competence, education, training, experience, or scholarly contributions.
- B. Individuals shall avoid engaging in conflicts of interest whereby a personal, professional, financial, or other interest or relationship could influence their objectivity, competence, or effectiveness in performing professional responsibilities. If such conflicts of interest cannot be avoided, proper disclosure and management is required.
- C. Individuals shall not misrepresent diagnostic information, services provided, results of services provided, products dispensed, effects of products dispensed, or research and scholarly activities.
- D. Individuals shall not defraud, scheme to defraud, or engage in any illegal or negligent conduct related to obtaining payment or reimbursement for services, products, research, or grants.
- E. Individuals' statements to the public shall provide accurate information regarding the professions, professional services and products, and research and scholarly activities.
- F. Individuals' statements to the public shall adhere to prevailing professional standards and shall not contain misrepresentations when advertising, announcing, or promoting their professional services, products, or research.
- G. Individuals shall not knowingly make false financial or nonfinancial statements and shall complete all materials honestly and without omission.

PRINCIPLE OF ETHICS IV

Individuals shall uphold the dignity and autonomy of the professions, maintain collaborative and harmonious interprofessional and intraprofessional relationships, and accept the professions' self-imposed standards.

RULES OF ETHICS

- A. Individuals shall work collaboratively with members of their own profession and/or members of other professions, when appropriate, to deliver the highest quality of care.

- B. Individuals shall exercise independent professional judgment in recommending and providing professional services when an administrative directive, referral source, or prescription prevents them from keeping the welfare of persons served paramount.
- C. Individuals' statements to colleagues about professional services, products, or research results shall adhere to prevailing professional standards and shall contain no misrepresentations.
- D. Individuals shall not engage in any form of conduct that adversely reflects on the professions or on the individual's fitness to serve persons professionally.
- E. Individuals shall not engage in dishonesty, negligence, deceit, or misrepresentation.
- F. Individuals who mentor Clinical Fellows, act as a preceptor to audiology externs, or supervise undergraduate or graduate students, assistants, or other staff shall provide appropriate supervision and shall comply—fully and in a timely manner—with all ASHA certification and supervisory requirements.
- G. Applicants for certification or membership, and individuals making disclosures, shall not make false statements and shall complete all application and disclosure materials honestly and without omission.
- H. Individuals shall not engage in any form of harassment or power abuse.
- I. Individuals shall not engage in sexual activities with persons over whom they exercise professional authority or power, including persons receiving services, other than those with whom an ongoing consensual relationship existed prior to the date on which the professional relationship began.
- J. Individuals shall not knowingly allow anyone under their supervision to engage in any practice that violates the Code of Ethics.
- K. Individuals shall assign credit only to those who have contributed to a publication, presentation, process, or product. Credit shall be assigned in proportion to the contribution and only with the contributor's consent.
- L. Individuals shall reference the source when using other persons' ideas, research, presentations, results, or products in written, oral, or any other media presentation or summary. To do otherwise constitutes plagiarism.
- M. Individuals shall not discriminate in their relationships with colleagues, members of other professions, or individuals under their supervision on the basis of age; citizenship; disability; ethnicity; gender; gender expression; gender identity; genetic information; national origin, including culture, language, dialect, and accent; race; religion; sex; sexual orientation; socioeconomic status; or veteran status.

- N. Individuals with evidence that the Code of Ethics may have been violated have the responsibility to either work collaboratively to resolve the situation where possible or to inform the Board of Ethics through its [established procedures](#).
- O. Individuals shall report members of other professions who they know have violated standards of care to the appropriate professional licensing authority or board, other professional regulatory body, or professional association when such violation compromises the welfare of persons served and/or research participants.
- P. Individuals shall not file or encourage others to file complaints that disregard or ignore facts that would disprove the allegation; the Code of Ethics shall not be used for personal reprisal, as a means of addressing personal animosity, or as a vehicle for retaliation.
- Q. Individuals making and responding to complaints shall comply fully with the policies of the Board of Ethics in its consideration, adjudication, and resolution of complaints of alleged violations of the Code of Ethics.
- R. Individuals involved in ethics complaints shall not knowingly make false statements of fact or withhold relevant facts necessary to fairly adjudicate the complaints.
- S. Individuals shall comply with local, state, and federal laws and regulations applicable to professional practice and to the responsible conduct of research.
- T. Individuals who have been convicted of, been found guilty of, or entered a plea of guilty or nolo contendere to (1) any misdemeanor involving dishonesty, physical harm—or the threat of physical harm—to the person or property of another or (2) any felony shall self-report by notifying the ASHA Ethics Office in writing within 60 days of the conviction, plea, or finding of guilt. Individuals shall also provide a copy of the conviction, plea, or nolo contendere record with their self-report notification, and any other court documents as reasonably requested by the ASHA Ethics Office.
- U. Individuals who have (1) been publicly disciplined or denied a license or a professional credential by any professional association, professional licensing authority or board, or other professional regulatory body; or (2) voluntarily relinquished or surrendered their license, certification, or registration with any such body while under investigation for alleged unprofessional or improper conduct shall self-report by notifying the ASHA Ethics Office in writing within 60 days of the final action or disposition. Individuals shall also provide a copy of the final action, sanction, or disposition—with their self-report notification—to the ASHA Ethics Office.

TERMINOLOGY

The purpose of the following Terminology section is to provide additional clarification for terms not defined within the Principles of Ethics and Rules of Ethics sections.

ASHA Ethics Office

The ASHA Ethics Office assists the Board of Ethics with the confidential administration and processing of self-reports from and ethics complaints against individuals (as defined below). All complaints and self-reports should be sent to this office. The mailing address for the ASHA Ethics Office is American Speech-Language-Hearing Association, attn: Ethics Office, 2200 Research Blvd., #309, Rockville, MD 20850. The email address is ethics@asha.org.

advertising

Any form of communication with the public regarding services, therapies, research, products, or publications.

diminished decision-making ability

The inability to comprehend, retain, or apply information necessary to determine a reasonable course of action.

individuals

Within the Code of Ethics, this term refers to ASHA members and/or certificate holders and applicants for ASHA certification.

informed consent

An agreement by persons served, those with legal authority for persons served, or research participants that constitutes authorization of a proposed course of action after the communication of adequate information regarding expected outcomes and potential risks. Such an agreement may be verbal or written, as required by applicable law or policy.

may vs. shall

May denotes an allowance for discretion; *shall* denotes something that is required.

misrepresentation

Any statement by words or other conduct that, under the circumstances, amounts to an assertion that is false, erroneous, or misleading (i.e., not in accordance with the facts).

negligence

Failing to exercise a standard of care toward others that a reasonable or prudent person would use in the circumstances, or taking actions that a reasonable person would not.

nolo contendere

A plea made by a defendant stating that they will not contest a criminal charge.

plagiarism

Representation of another person's idea, research, presentation, result, or product as one's own through irresponsible citation, attribution, or paraphrasing.

publicly disciplined

A formal disciplinary action of public record.

reasonable or reasonably

Being supported or justified by fact or circumstance and being in accordance with reason, fairness, duty, or prudence.

self-report

A professional obligation of self-disclosure that requires (a) notifying the ASHA Ethics Office in writing and (b) sending a copy of the required documentation to the ASHA Ethics Office (see definition of "written" below).

shall vs. may

Shall denotes something that is required; *may* denotes an allowance for discretion.

telepractice

Application of telecommunications technology to the delivery of audiology and speech-language pathology professional services at a distance by linking clinician to client/patient/student or by linking clinician to clinician for assessment, intervention, consultation, or supervision. The quality of the service should be equivalent to that of in-person service. For more information, [see Telepractice](#) on the ASHA Practice Portal.

written

Encompasses both electronic and hard-copy writings or communications.