2. CONTINUING EDUCATION DOCUMENTATION

Please note: All applicants must document receipt of at least 7.5 CEUs that relate to dysphagia within the last 3 years. A minimum of 4.5 of the CEUs need to be ASHA sponsored courses and up to 3.0 of the CEUs may be non-ASHA sponsored continuing education activities. (Please refer to the website for latest information on the current requirements)

Conference Name: Dysphagia Interdisciplinary Imaginary Annual Meeting
Presenter(s): Various
Sponsoring Organization: Dysphagia Association of America
Location: Chicago, IL
Dates: 03-08 thru 03-10 2019

Please check one:
Course Level: Intermediate X
Advanced

Please check one:
Live / on-site X
Online
CEU 1 Other/Related
Please explain Other/Related
Total CEU 1: 2.5

Conference Name: Pharyngeal Dysphagia Treatment: What's the Evidence?
Presenter(s): S. Peach Path, CCC-SLP, BRS-S
Sponsoring Organization: Happy Hollow Hospital
Location: Newburg, IN
Dates: 01-21-19

Please check one:
Course Level: Intermediate
Advanced X

Please check one:
Live / on-site X
Online
CEU 2 Other/Related
Please explain Other/Related
Total CEU 2: .6

Conference Name: Esophageal Disorders
Presenter(s): Caryn Easterling, Ph.D. CCC-SLP, BRS-S; Barbara Messing,
Sponsoring Organization: Specialty Board Swallowing & Swallowing Disorders
Location: On-line
Dates: 11-01-2020

Please check one:
Course Level:
Intermediate
Advanced X

Please check one:
Live / on-site
Online X

CEU 1 Other/Related
Please explain Other/Related
Total CEU 3: .2

Conference Name: 14th Annual Head and Neck Symposium, Update on Voice and Swallowing Disorders
Presenter(s): various
Sponsoring Organization: American Head and Neck Society
Location: Dallas, TX
Dates: 04-22-19

Please check one:
Course Level:
Intermediate
Advanced X

Please check one:
Live / on-site X
Online

CEU 4 Other/Related: X
Please explain Other/Related: Voice and Swallowing Disorders from the ENT perspective
Total CEU 4: .2 (full symposium offered at .75 CEU’s, .2 of these focused directly on swallowing disorders, see attached program for review.)

These are only examples
TOTAL # CEUs LISTED _____________
(ALL MUST RELATE TO SWALLOWING OR SWALLOWING DISORDERS). Please do not list in hours, list in CEUs:
3. DOCUMENTATION OF CLINICAL HOURS

P=Pediatric and A=Adult

Facility: Happy Hollow Hospital  Dates: 07-01-11 to present
Approximate hours per week of:
Evaluation: 18 Treatment: 10 Counseling: 5 Caseload: ☒ P ☐ A

Facility: Merry Mountain Long Term Care  Dates: 05-01-10 to 07-01-11
Approximate hours per week of:
Evaluation: 7 Treatment: 8 Counseling: 4 Caseload: ☐ P ☒ A

Facility: Tiny Toddlers Early Intervention  Dates: 04-07-09 to 05-01-10
Approximate hours per week of:
Evaluation: 10 Treatment: 8 Counseling: 3 Caseload: ☒ P ☐ A

Total Number of Clinical Hours in each year: 1650  855  1155
EXAMPLES OF RELATED PROFESSIONAL SKILLS

All professional activities must be at an intermediate to advanced level that go beyond those expected in the applicant's job description. Therefore, it is critical and expected that professional activities related to dysphagia include activities outside the applicant's institution. The activities listed below are examples and are not exhaustive but serve as suggestions for each category.

Categories

EDUCATION/MENTORSHIP
- Research or clinical Presentations at state, regional or national meetings
- Clinical supervisor for several clinicians or students for dysphagic clients
  - Indicate location, Number of students, dates
- Implementing evidence based programs on dysphagia at local facility,
- Educational presentations on dysphagia in community
- Guest lectures on dysphagia at local universities
- Teach graduate level dysphagia course
  - Attach syllabus, dates
- Clinical or educational publications
  - Attach copy
- Primary academic/clinical advisor to graduate student

LEADERSHIP
- Service on dysphagia related committees local, state, national
- Leadership in professional organizations with focus on swallowing
- Development and/or expansion of a swallowing program
  - Provide description

SCHOLARSHIP/RESEARCH
- Peer reviewed publications (primary or secondary authorship)
- Presentation of peer-reviewed research
- Ongoing research on dysphagia
  - Provide description
Verification of hours: Application for American Board of Swallowing and Swallowing Disorders

Applicant’s Name: ________________________________

Recipients’ Name: ________________________________

Title: ________________________________

Facility Name: ________________________________

Address: ______________________________________

Phone Number: ________________________________

What is board certified? Speech–language pathologists (SLPs) who have advanced knowledge, skills and experience are recognized by the designation of BCS-S or American Board Certified in Swallowing and Swallowing Disorders. This certificate is akin to Board Certification that qualified physicians hold. The American Speech-Language Hearing Association, that grants basic certification to all SLPs as an entry level requirement for practice, began this program of Specialty Recognition (now known as Board certified) in 1995. It became known as board certified January 1, 2014. While BCS-S is voluntary, it is becoming the standard for identifying an SLP who is an expert in dysphagia, or swallowing disorders.

To whom it may concern:

You have been asked by the applicant to verify that he/she has a minimum of 350 clinical hours per year (for Clinical Track) of evaluation and treatment of swallowing disorders or 100 hours per year (for Administrative/Academic Track) of evaluation and/or treatment of swallowing disorders and/or research on human subjects with normal or abnormal swallowing. These hours must have been completed within a year (12-month period) for each of 3 years prior to applying for BRS-S membership. In addition, applicants in the Administrative/Academic Track must have 450 hours in the 4 years before applying.

Please complete this letter within 30 days and mail to American Board of Swallowing and Swallowing Disorders, 563 Carter Court, Suite B, Kimberly, WI 54136

I have worked with the applicant for the following # of years: _____________________________
Briefly describe the nature of your professional relationship: __________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

_____ I attest that the applicant has 350 clinical hours per year (for Clinical Track) of evaluation and treatment of swallowing disorders

OR

_____ I attest that the applicant has 100 hours per year (for Administrative/Academic Track) of evaluation and/or treatment of swallowing disorders and/or research on human subjects with normal or abnormal swallowing.

_____ I cannot attest that the applicant has sufficient annual clinical and/or administrative hours.

Signature: ___________________________ Print Name: ________________________________

Date Signed: ______________________

If you have any questions, please contact the AB-SSD office at info@swallowingdisorders.org or 920-560-5625.