

LD010

M.Sc. (IV Semester) Examination, May/June 2005
(Semester Scheme)
Speech-Language Pathology
Adult Language Disorders

Time: 3 Hours

Max. Marks: 80

Instruction: All questions carry equal marks.

- I. 1. Classify acquired dyslexias. Describe the basic of the classificatory system you have used. Add a short note on characteristics of each type with suitable illustrations. 16
2. Describe the metabolic disorders that lead to language disorders. Discuss the salient language characteristics of each of these. 16
- II. 3. Describe the cognitive - communicative impairments in persons who manifest alcohol induced language disorders. 16
4. Describe the cognitive -linguistic, features of Alzheimer's disease. Give examples wherever necessary. 16
- III. 5. 'Differential diagnosis of persons v/ith dementias and TBI is not possible only on the basis of cognitive- linguistic characteristics. Justify your view point. 16
- OR
6. 'Neurolinguistic characteristics of normal healthy adults and those with language disorders differ only in quantity'. Discuss with suitable studies, 16
- IV. 7. Speech language pathologists play an important role in the assessment of communicative functions in non-aphasic adult language disorders'. Justify from your clinical experience. 16
- OR
8. 'Cognitive- linguistic assessment always supplements neurodiagnostic assessment'.- Give your views. Illustrate wherever necessary. 16
- V. 9. Propose a pragmatic framework to enhance cognitive-communicative management program for clients with non-aphasic adult language disorders. 16
- OR
10. Propose a cost effective cross-disciplinary framework that best suits our conditions for cognitive-communicative rehabilitation of adults. 16

LD020

IV Semester M.Sc. Examination, May/June 2005
(Semester Scheme)
Speech - Language Pathology
Alternative and Augmentative Communication

Time : 3 Hours

Max. Marks : 80

Instruction : Answer *all* questions.

- I. 1. a) List the historical events which led to the emergence of AAC as a rehabilitation field. 6
- b) Describe in brief the superordinate and subordinate levels of classification in AAC. 10
- OR**
2. a) Highlight the differences between a "symbol set" and "symbol system" quoting suitable examples. 6
- b) How would you classify the AAC users based on the need for learning language? 10
- II. 3. a) Write a short note on Blissymbols. 4
- b) Describe the following features of **any one** type of aided AAC symbol system. 12
- 1) Decodability
- 2) Clarity
- 3) Logicality
- 4) Relevancy
- 5) Reproducibility
- 6) Abstraction
- OR**
4. a) Classify the unaided symbol systems based on the linguistic and sensory features. 6
- b) Comment on the similarities and differences in the syntactic structures of British Sign language, American Sign language and Indian Sign language. 10
- III. 5. a) Describe in detail, the "capability model" used in the assessment of AAC candidates. 10
- b) What are the essential pre-language skills that need to be acquired by non oral AAC clients ? 6

OR

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6. a) What are the essential components of language that needs to be evaluated in a prospective AAC candidate ? 8
- b) "Seating, positioning and motor control play a very important role in facilitating communication in a AAC user". Justify the statement giving suitable examples. 8
- IV. 7. a) What are the 4 types of direct selection techniques used with high technology devices ? 4
- b) Describe each of the following in not more than 4 **sentences**: 4
- 1) Circular scanning
 - 2) Linear scanning
 - 3) Group item scanning
 - 4) Row column scanning.
- c) Discuss the "word prediction" facilities available in high technology AAC devices. 8
- OR
8. a) What are the essential components of a low technology AAC device ? Discuss. 8
- b) Describe the following in not more than **2 sentences** : 8
- 1) Alphabet encoding
 - 2) Alphanumeric encoding
 - 3) Numeric encoding
 - 4) Semantic encoding
 - 5) Conceptual encoding
 - 6) Visual-motor encoding
 - 7) Display based encoding
 - 8) Memory based encoding.
- V. 9. a) As an AAC therapist, what would be your advice to improve the environment at home and school of an AAC client to facilitate maximum communication ? 10
- b) Write a note on the strengths and weaknesses of AAC rehabilitation as used in various centers in India. 6
10. a) How can you use parent, care givers and teachers as facilitators of AAC communication mode. 8
- b) Propose a brief research plan to study any one factor related to AAC rehabilitation. 8

LD030

M.Sc. (IV Semester) Examination, May/June 2005
(Semester Scheme)
Speech-Language Pathology
Motor Speech Disorders

Time : 3 Hours

Max. Marks : 80

Instruction : Answer all the questions.

- I. 1) a) What is the role of parietal lobe in motor speech control ? What do you understand by the term "transcortical reflex" and "Sensorimotor control" ? 10
- b) Explain how "Globus Pallidus" acts as a crucial junction for most of the projection fibres responsible for motor control. Draw a neat diagram of the process. 6

OR

- 2) a) Draw a neat diagram, identify the following : 12
- 1) Primary motor area
 - 2) Pre-motor area
 - 3) Supplementary motor area
- Describe their role in speech motor control.
- b) Draw a neat diagram and represent the somatotopy of orofacial structures in the frontal cortex as in the brain of monkeys. 4

- II. 3) a) What do you understand by the term "motor equivalence" ? Describe, with research evidence the role of motor equivalence in achieving a speech motor goal. 10
- b) Expand the following and write short notes on the following : 6
- a) EMMA
 - b) CPG

OR

- 4) a) Describe the relevance of feedback and feed forward loops in understanding the development of speech motor control in children. 10
- b) What are the major neural substrates which explain maturation of speech motor control ? 6

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- III. 5) a) Describe the meaning of the following : 8
- 1) K.R. delay
 - 2) Goal selector
- b) Describe the specific features of dysarthria observed in cases with 8
- 1) Worster-Drought syndrome
 - 2) Moebius syndrome.
- 6) a) Describe the major characteristics of spastic dysarthria. 4
- b) Give a brief account of different phonemic errors exhibited by children with developmental apraxia of speech. 4
- c) What are the behavioral, linguistic and oral motor cues which aid in the diagnosis of verbal apraxia in children and adults. 8
- IV. 7) a) Describe the oral phase of swallowing for solids. 6
- b) Explain the strategies used to correct dysphagia using indirect therapy techniques. 10
- 8) a) Explain "GERD" and mention the signs and symptoms of GERD which are reflected as disorders of the phonatory mechanism. 6
- b) With a schematic diagram of the esophagus, describe the swallowing process. What are the common swallowing symptoms observed when there is deficit in the esophagus. 10
- V. 9) a) Compare and contrast Friedrich's ataxia with congenital ataxia. 6
- b) What is the principle and basic assumption of "Compensatory technique" in the treatment of dysarthria ? Explain by citing examples from the speech system. 10
- OR
- 10) a) What is the principle of "PROMPT" technique and how is this executed with apraxics ? 8
- b) Describe a few techniques to facilitate movement of the lips using oromotor exercises. 8