Background/ Problem
Interprofessional teamwork and education across healthcare disciplines is a key mission of our institution, but implementation is often challenging. We developed an activity in which students in the Speech-Language and Hearing Sciences Anatomy & Physiology course were assigned to work in small groups with medical students in the first-year Clinically Oriented Anatomy course. This experience allowed learners to discuss diagnosis, treatment, and long-term follow up for cleft lip/palate, analyze clinical and ethical challenges in a recent case involving vocal cord surgery, in order to identify their respective interprofessional roles and responsibilities in dealing with patients and families affected by speech disorders.

Session Learning Objectives:
- Describe embryological anomalies to the head and neck, including cleft palate and cleft lip.
- Identify key issues related to the diagnosis, treatment, and long-term follow up for cleft palate and cleft lip.
- Analyze a recent case involving vocal cord surgery and discuss its clinical and ethical challenges.
- Identify differences in interprofessional roles and responsibilities of the Cleft Team members in dealing with patients and families affected by speech disorders.

Pre-Session Resource Readings and Materials
- Overview of Cleft Palate & Cleft Lip, prepared with support from Pediatrics and SHS faculty who participate on Cleft Teams
- Cleft Palate Foundation “Information for Parents and Individuals,” http://www.cleftline.org/parents-individuals/publications/

Session Part 1: Coping with Cleft Palate and Cleft Lip
Students were given the case of “Hunter,” a baby born with cleft lip and palate. Two students in each group played the part of Hunter’s parents and were given sample questions to ask the remaining students, who functioned as members of the Cleft Palate Team. Cleft Team members were expected to provide accurate and thoughtful responses at two time points, after Hunter’s birth and during the course of his repair and management.

Session Part 2: Thyroplasty for Phonic Tics - An Ethical Case
Students were asked to discuss the Ahmed, Heckman and Dailey article, a case report describing thyroplasty performed on “Kade,” a teenage boy with autism who made extremely loud vocalizations. Also provided was a newspaper account of the case, which included comments posted about the story on the website.

Discussion Questions:
- How loud is 90 dB?
- How would Kade’s vocalization likely affect his family, including his twin brother, who is also autistic?
- What other strategies did the family and physicians attempt? Can you think of other approaches that might have been employed?
- This case prompted strong comments on all “sides” of the situation. What is your opinion?
- The article does not say if Kade himself gave consent for the surgery. Should he have done so, or is consent from the parents adequate in this case?
- What would you do, if Kade were your son?
- If you were Kade’s physician or speech pathologist, how would you counsel the family?
- What long-term speech therapy is Kade likely to need?

Challenges:
- Addressing the needs of students at very different levels of learning, including undergraduate SHS and medical students, all at the beginning of their respective training (in early September)
- Scheduling SHS faculty participation

Conclusions/ Usefulness:
- Post-session evaluation of the faculty indicated that students were extremely engaged throughout the session. Anticipated concerns about incongruencies in background and students being at different levels of learning were largely unfounded.
- The combination of the two sessions allowed ample opportunities for learners with a wide range of interests to become engaged and led to vigorous group discussions.
- The interprofessional activity was considered to be especially valuable because it allowed learners to better understand their respective roles and responsibilities on the Team.