



CERTIFICATION PROGRAM & APPLICATION

Certificate E: Flexible Endoscopic Evaluation of Voice & Swallowing (FEEVS) for Adults

APPLICANT INFORMATION [mandatory Full registration status]

Name:		Registration #	
Email or phone:			
Training/employment setting:			
Hospital Outpatient Agency Private Clinic School Other			

I hereby attest that, pursuant to Part 10 of the College Bylaws and as prescribed below, I have successfully completed the certificate program requirements for Certificate E within three years prior to the date of this application, and that the information in respect of the following knowledge, skills, and competency is accurate and complete.

Applicant Signature	Application Date

SUPERVISOR INFORMATION [mandatory Full registration status and a holder of Certificate E, or other qualified health professional subject to approval]

1. Name:			
Contact email or phone:		Registration #	
Health Care Professional designation and Certificate E where available:			

Supervisor Signature:			
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2. Name:			
Contact email or phone:		Registration #	
Health Care Professional designation and Certificate E where available:			

Supervisor Signature:			
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Completed Form & Fee:	<p>\$50.00 per certificate to a maximum of \$100 regardless of the number of certificates held.</p> <p>After completion of the Certification Program, please upload this form and submit the application fee through the Registrant Portal of the CSHBC website.</p>
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Date Submitted:	
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PRE-REQUISITES: CERTIFICATE E

The following PRE-REQUISITES are required prior to commencement of the CERTIFICATION PROGRAM objectives -- pre-requisite education/courses must have been completed within the past 7 years.

Pre-requisite 1	Full registration status as a Registered Speech-Language Pathologist (RSLP).	
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CERTIFICATION PROGRAM: CERTIFICATE E

The CERTIFICATION PROGRAM is a progressive learning process that includes knowledge, clinical judgment, practical application of skills, and demonstrated competencies -- the program must be completed within three years.

Program Objectives	Knowledge, Skills, and Demonstrated Competencies for Certification Program	
Objective 1	Attains foundational experience for attaining the Flexible Endoscopic Evaluation of Voice & Swallowing (FEEVS) certificate	Supervisor initials
1.1	Minimum one-year clinical experience – training may commence prior to completion of the one-year experience	
1.2	Training setting allows for hands on practical experience with the relevant population	
1.3	Experience in clinical voice and swallowing assessments	
	<i>Specify:</i>	
1.4	Understands the roles of applicable team members in the provision of endoscopy services related to voice and swallowing disorders	
Objective 2	Attains the background clinical knowledge for conducting FEEVS	Supervisor initials

2.1	Knows the purposes of the SLP endoscopic assessment and understands the objectives of the procedure including expected outcomes	
2.2	Describes the advantages and disadvantages of endoscopy in lieu of other instrumental examinations	
2.3	Understands other instrumental procedures such as videofluoroscopy and video-stroboscopy	
2.4	Knows normal and abnormal swallowing and respiration in terms of the underlying anatomy and pathophysiology	
2.5	Knows normal and abnormal phonation and respiration in terms of the underlying anatomy and pathophysiology	
2.6	Knows postural changes and compensatory gestures as they affect voice production and swallowing	
Objective 3	Makes appropriate patient/client selection	Supervisor initials
3.1	Demonstrate proficiency in client selection by:	
3.1.1	<ul style="list-style-type: none"> ▪ Obtaining information from medical records 	
3.1.2	<ul style="list-style-type: none"> ▪ Reviewing patient's history and screening results 	
3.1.3	<ul style="list-style-type: none"> ▪ Determining possible signs of laryngeal dysfunction affecting swallowing and/or voice 	
3.1.4	<ul style="list-style-type: none"> ▪ Determining client appropriateness based on their current cognitive, neurological, medical status and goals for care 	
3.1.5	<ul style="list-style-type: none"> ▪ Knowing the clinical indications for an endoscopic exam in addition to or in lieu of a fluoroscopic examination as the preferred objective diagnostic exam(s) 	
3.1.6	<ul style="list-style-type: none"> ▪ Determining the patient's ability to comply with or tolerate the procedure 	
Objective 4	Understands the FEEVS procedure, including risks and precautions	Supervisor initials
4.1	Knowledge of the risks, benefits, and precautions for specific patient populations, including but not limited to:	

4.1.1	<ul style="list-style-type: none"> Neurological disorders 	
4.1.2	<ul style="list-style-type: none"> Other medical conditions (e.g., cancers) 	
4.1.3	<ul style="list-style-type: none"> Psychiatric conditions 	
4.1.4	<ul style="list-style-type: none"> Laryngeal breathing dysfunction, such as paradoxical vocal fold movement /adductor laryngospasm 	
4.1.5	<ul style="list-style-type: none"> For patients/clients of various ages across the life span 	
4.2	Recognizes and understands the indications and contraindications for the procedure including any anatomical and medical contraindications	
4.3	Knows potential adverse reactions including potential allergies and sensitivities (e.g. topical anesthetic, latex, nasal decongestants)	
4.4	Knows appropriate treatments for conditions such as: vasovagal response, nasal inflammation, vomiting, etc.	
4.5	Determines contraindications, including agitation, reduced compliance, history of epistaxis, movement disorders, acute cardiac conditions	
Objective 5	Performs the endoscopic procedure independently	Supervisor initials
5.1	<p>Completes additional education, which must include a combination of a workshop or course webinar, DVD etc., in the methodology, use and interpretation of endoscopy</p> <p><i>NOTE: A minimum 6 hours is required.</i></p>	
	Specify:	
	Certificate or proof of completion is required	
5.2	Prepares and instructs patient for the procedure	
5.3	Understands the use of topical anaesthetics, including potential adverse reactions and contraindications and application protocol(s)	
5.4	Inserts the endoscope trans-nasally and manipulates it within the hypopharynx to obtain desired view with minimal patient discomfort and/or complications	

5.5	Views pharyngeal and laryngeal anatomy to describe laryngeal and supra-laryngeal structures, postures and gestures	
5.6	Determines and elicits appropriate treatment intervention strategies to determine the effect on phonation	
5.7	Prepares appropriate bolus materials and selection of appropriate consistencies for patient testing	
5.8	Views pharyngeal and laryngeal anatomy for bolus flow and residue	
5.9	Trials swallowing maneuvers to determine appropriate treatment strategies and feeding conditions	
5.10	Directs patient through appropriate tasks required for a comprehensive exam	
5.11	Evaluates of anatomical structures at each point in the examination	
5.12	Knows appropriate infection control requirements for sterilization of equipment	
5.13	Knows the uses of endoscopy as a biofeedback tool	
5.14	Completes a minimum of ten (10) observations of complete endoscopic exams and interpretations. Observations may be of any qualified registrant or health care provider and not necessarily the supervisor of the applicant-in-training. Five (5) observations of the procedure may be in other modalities (e.g., digital recordings) if the applicant-in-training is accompanied by the supervisor.	
	Date(s) completed:	
5.15	Completes five (5) passes of the endoscope on 'normal' subjects, with constant supervision prior to the completion of objective 5.16	
5.16	Completes ten (10) passes of the endoscope on potentially abnormal subjects, with constant supervision	
5.17	Completes five (5) endoscopic examinations on clients, with close supervision including review and discussion with supervisor	
5.18	Completes five (5) endoscopic evaluations on clients, with general supervision	

Objective 6	Interprets the endoscopy results	Supervisor initials
6.1	Knowledge of normal and abnormal oral, pharyngeal and laryngeal anatomy and physiology	
6.2	Able to describe the effects of body, head and neck posturing and compensatory gestures on the patient's laryngeal postures and vocal fold movements	
6.3	Recognition of abnormal patterns, signs and symptoms of voice problems	
6.4	Able to accurately describe the patient's laryngeal postures, gestures and phonation patterns	
6.5	Constant supervision of a minimum of 5 patient study interpretations, in real time, including report writing with evidence of high inter-rater consistency of results	
6.6	General supervision and review of a minimum of 3 additional patient interpretations and associated reports- may be conducted via recorded images	
6.7	Constant supervision of a minimum of 5 presentations of results and implications to patient and/or family with recommendations for follow-up and treatment/interventions	
6.8	Knows normal and abnormal oral, nasopharyngeal, pharyngeal, and laryngeal anatomy	
6.9	Knows normal and abnormal physiology of swallowing and laryngeal function for voice, breathing and airway protection	
6.10	Recognizes the physical signs of pharyngeal residue, laryngeal penetration and tracheal aspiration	
6.11	Recognizes the physical signs of airway obstruction	
6.12	Describes the effects of body, head and neck posturing on the patient's laryngeal function as it relates to breathing, airway protection and voice production	
6.13	Recognizes abnormal patterns and symptoms of oropharyngeal dysphagia	
6.14	Describes the patient's mechanical, durational and temporal aspects of the swallow	



6.15	Recognizes abnormal patterns, signs and symptoms of voice and laryngeal breathing problems	
6.16	Describes the patient’s laryngeal postures, movements and phonation patterns	
Extensions:	By mutual agreement between the supervisor and trainee, any or all objectives may be extended beyond minimum requirements	
Objectives extended? YES <input type="checkbox"/> NO <input type="checkbox"/>		
If yes, specify objective(s) by number		

CSHBC RELATED DOCUMENTS

Certified Practice (SOP-PROF-06)

Approved Certification Programs (POL-QA-04)

Infection Prevention and Control Guidelines for Audiology (ACPG-08)

Supervision (SOP-PRAC-07)

APPENDIX A: RECOMMENDED LEARNING RESOURCES FOR CERTIFICATE E PROGRAM

GENERAL RESOURCES

[Basics of Flexible Nasoendoscopy.](#)

[Beyond the Scope: A self-study FEES interpretation practice.](#)

[Differential Diagnosis of Paradoxical Vocal Fold Movement.](#) Kaufman, J and Block, C. American Journal of Speech-Language Pathology, Vol. 17, 327-334, Nov. 2008.

Dynamic Voice Evaluations using Flexible Endoscopy. Carroll, T. 2018

Endoscopic Evaluation & Treatment of Swallowing Disorders. Langmore, S., 2000

[Fiberendoscopic Evaluation of Swallowing.](#) Bartow, C, Provo-Bell, G., Craig, J.

[Fibreoptic Endoscopic Evaluation of Swallowing \(FEES\): An Advanced Practice for Speech Pathologists.](#) Position paper. Retrieved from: www.speechpathologyaustralia.org.au

[Fiberoptic Endoscopic Evaluation of Swallowing.](#) Position paper of the Royal College of Speech Therapists FEES paper.

The Irritable Larynx Syndrome. Morrison, M., Rammage, L., Emami, A.J. Journal of Voice, Vol. 13, No. 3, 447-455, 1999

The Irritable Larynx Syndrome as a Central Sensitivity Syndrome. Morrison, M., Rammage, L. Canadian Journal of Speech-Language Pathology and Audiology, Vol, 34 No. 4, winter 2010

PVCM, PVCD, EPL and Irritable Larynx Syndrome: What are we talking about and how do we treat it? Andrianopoulos, M.V., Gallivan, G.J., Gallivan, K.H. Journal of Voice, Vol 14, No.4, 607-18, 2000.

[Speech and Language Therapy Endoscopy for Voice Disordered,](#) Sean Parker Institute for the Voice.

Training and Interpretation of FEES in Adults (DVD-ROM). Hapner, F.R., 2010.

[Why FEES?](#)

COURSES

[Langmore FEES.com](#)

[Northern Speech Services.com](#)

[Speech Pathology.com](#)



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CASLPA 13.pdf



Paradoxical Vocal
Fold Motion The rol