

Tutorial

Teaching With TalkBank Grand Rounds: A Tutorial on Implementing Evidence-Based Educational Tools for Adult Neurogenic Communication Disorders

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ABSTRACT

Purpose: The TalkBank platform, widely known for its research infrastructure, also offers educational resources and tools to enhance speech-language pathology education. In particular, the TalkBank Grand Rounds are freely available, online educational resources developed by experts that provide foundational information, multimedia illustrative cases, activities, and discussion questions to promote evidence-based learning and clinical decision-making. Currently available for adult neurogenic communication disorders, the Grand Rounds can be implemented in various learning environments, including classroom curricula, clinical instruction, and self-directed learning activities.

Method: Following an expert panel of adult neurogenic discourse researchers and ensuing discussion at the 2026 International Cognitive Communication Disorders Conference, this tutorial was developed by a group of clinical researchers with expertise in discourse and experience teaching cognitive-communication disorders and developers within the TalkBank system. Situating Grand Rounds within a taxonomy of evidence-based teaching, this tutorial offers clinicians and educators a practical guide for effectively integrating and adapting these resources for their specific instructional or learning needs.

Results: Using robust case examples, this tutorial illustrates how TalkBank Grand Rounds can support clinical reasoning, differential diagnosis, and intervention planning across populations with aphasia, traumatic brain injury, right-hemisphere brain damage, and dementia.

Conclusion: This tutorial provides a brief history of TalkBank Grand Rounds and practical applications to ease the burden on educators and clinicians in creating and implementing instructional resources for adult neurogenic communication disorders.

Correspondence to Anna K. Saylor: aksaylor@udel.edu. **Publisher Note:** This article is part of the Special Issue: Select Papers From the Fifth International Cognitive-Communication Disorders Conference. **Disclosure:** Elise Bogart, Brielle C. Stark, Alyssa M. Lanzi, and Jamila Minga are members of the TalkBank Advisory Board. Jamila Minga codeveloped the RHDBank and developed the RHDBank Grand Rounds. Elise Bogart codeveloped the TBIBank Grand Rounds. Anna K. Saylor and Alyssa M. Lanzi codeveloped the DementiaBank Grand Rounds. Brielle C. Stark developed the prototype assignments discussed in the article. Davida Fromm is a co-investigator of TalkBank and supporting developer of all TalkBank Grand Rounds. Brian MacWhinney is the principal investigator of TalkBank.

In the past decade, enhancing graduate education to better prepare students for their careers has garnered significant interest in the field of speech-language pathology (American Speech-Language-Hearing Association [ASHA], 2020). Knowledge and awareness of neurogenic communication disorders, in particular, are consistently reported at low levels (e.g., Lanzi et al., 2022; Morrow et al., 2021; Parlak et al., 2025). Additional concerns for speech-language pathology career preparedness include insufficient departmental faculty to cover the full scope of practice, limited time to incorporate all necessary content into the curriculum, and a shortage of externship sites across various settings (ASHA, 2020), as well as inconsistent exposure to interprofessional education (Venkatesan et al., 2026). Yet, there remains a critical demand for speech-language pathologists (SLPs). Shortages of SLPs persist in the United Kingdom (Royal College of Speech and Language Therapists, 2023), Arabic-speaking countries in the Middle East (Ghali et al., 2023), India (Singh et al., 2022), and Australia (McGill et al., 2020), for example. In Canada, annual SLP employment growth is projected at 2.2%—higher than the national average (Government of Canada, 2025). In the United States, speech-language pathology jobs are expected to increase by 15% by 2034 (U.S. Bureau of Labor Statistics, U.S. Department of Labor, 2025). Thus, leveraging existing educational resources is essential to overcome these barriers, enhance education, and meet global speech-language pathology workforce needs. TalkBank, the world's largest open-source repository of spoken language data, is best known for its research infrastructure (MacWhinney, 2019), but importantly, it also features freely available, robust educational tools. In particular, the TalkBank online educational resources known as “Grand Rounds” hold substantial potential to support speech-language pathology education.

At the 2026 International Cognitive Communication Disorders Conference, tutorial authors A.K.S., E.B., B.C.S., A.M.L., and J.M. presented the use of TalkBank Grand Rounds for adult neurogenic communication disorder education. The discussion among conference attendees following the presentation highlighted the need for (a) further dissemination of these educational resources and (b) future directions involving user feedback to support implementation and development of Grand Rounds. Following the conference, the Grand Rounds developers and the core TalkBank team (authors D.F. and B.M.) wrote this tutorial in order to respond to the educational community needs.

Complexities of Neurogenic Disorders and a TalkBank Community

In both teaching and clinical practice, adult neurogenic communication disorders are rarely encountered in isolation. Educators often teach aphasia, right-hemisphere

brain damage (RHD), traumatic brain injury (TBI), and dementia in relation to one another (e.g., Morrow et al., 2021), and clinicians typically assess and treat them within shared service contexts (e.g., acute care or inpatient rehabilitation settings; e.g., ASHA, 2023). An integrated tutorial such as this makes it possible to highlight the commonalities across Grand Rounds educational resources as well as the collaborative strength of the TalkBank resource itself—all while maintaining elements of rigorous evidence-based teaching. This tutorial synthesizes shared principles and practical applications across teams to provide a unified entry point for evidence-based teaching. This collective approach reduces redundancy across separate papers, lowers implementation burden for educators, and helps readers see how the resources can be used both comparatively and complementarily. In this way, the tutorial mirrors how learners and clinicians actually encounter adult neurogenic communication disorders: across populations, across settings, and in relation to real-world clinical decision making.

Breaking Ground: AphasiaBank

Grand Rounds originated in 2015 as part of the AphasiaBank project. After 8 years of funding, AphasiaBank (MacWhinney et al., 2011) had amassed a large database of video-recorded discourse samples (i.e., connected speech and language) from people with aphasia—a rich resource for educational purposes. However, its size and scope overwhelmed individual instructors trying to use it strategically and efficiently. To address that obstacle, Dr. Audrey L. Holland, co-principal investigator of AphasiaBank and a renowned clinician, researcher, and educator (Fromm & MacWhinney, 2024; Richardson et al., 2024; Togher & Bogart, 2024), collaborated with her team to curate exemplary cases and share them with the broader community using the online TalkBank platform. They reviewed roughly 500 samples from people with aphasia who had completed either AphasiaBank's discourse protocol (MacWhinney et al., 2011) or the Famous People protocol (Holland et al., 2019), which was developed specifically for individuals whose aphasia severity precluded substantial discourse sampling. The name “Grand Rounds” was inspired by the traditional format of inpatient medical education, in which a patient's case is presented and discussed by doctors, residents, interns, and medical students, with the attending physician posing leading questions about the medical problem, assessment results, and treatment options (Jattan & Francois, 2022).

In the case of AphasiaBank Grand Rounds, Dr. Holland served as the expert clinician and educator. She designed discussion questions and treatment-focused prompts to stimulate and guide learners in analyzing each specific case. The cases are presented with video examples and descriptive text. They feature individuals with the classical types of

aphasia, which are most likely to be encountered in clinical practice and represent the theoretical basis for popular tests such as the Boston Diagnostic Aphasia Exam and the Western Aphasia Battery (Goodglass et al., 2001; Kertesz, 2007): Wernicke's, Broca's, conduction, anomic, global, transcortical sensory, and transcortical motor aphasias. For individuals with global aphasia or severely limited output, the examples show how they use their remaining skills (e.g., gestures) to meet communicative needs. For the others, the examples illustrate typical language behaviors across a standard set of discourse tasks. A cautionary case about an individual whose aphasia did not fit neatly into any of the classical categories is also included. Overall, the AphasiaBank Grand Rounds use cases to introduce these classic aphasia types while stressing the importance of assessing and describing each person's communication strengths and weaknesses through discussion questions and prompts. The AphasiaBank Grand Rounds also inspired the development of additional Grand Round resources for other neurogenic communication disorders.

Building on Success: RHDBank, TBIBank, DementiaBank

The RHDBank Grand Rounds, developed in 2016 as an educational complement to RHDBank (Minga et al., 2021), use discourse samples to promote awareness and understanding of language disorders following right-hemisphere stroke. Educational resources for this population remain limited, and students often have scant clinical exposure to these individuals. The RHDBank Grand Rounds are divided into three main sections: (a) Communication Impairments, (b) Case Presentations, and (c) Research Highlights. The first section summarizes and defines five areas of linguistic and cognitive impairments associated with RHD: apraxia, anosognosia, aprosodia, attention, and executive functions. Reflecting recent research developments, the diagnostic label "apraxia" was added in 2022 following recommendations from the International Right Hemisphere Collaborative to describe language disorders after RHD (Minga et al., 2023). The case presentations feature three examples, each including a brief background statement, video segments from the RHDBank Discourse Protocol (Minga et al., 2021), and discussion questions. Finally, the Research Highlights section lists articles addressing behaviors from the cases (e.g., anosognosia, aprosodia), along with the limited research investigating treatments for communication-related disorders after RHD.

The TBIBank Grand Rounds, established in 2021, drew inspiration from the AphasiaBank and RHDBank Grand Rounds amid a shortage of similar educational resources for TBI. Like the other databases described

earlier, TBIBank housed rich standardized discourse samples (Elbourn et al., 2023) ripe for developing teaching materials. Its creators adopted a modular approach, building "modules" around key teaching questions such as, "What is a cognitive-communication disorder?" (Module 1) and "How does cognitive-communication disorder vary across contexts?" (Module 3). Each module features a brief evidence summary, curated case samples and videos illustrating core concepts, and targeted discussion questions to promote critical thinking and clinical application. Over time, the resource has evolved in response to user feedback (Bogart et al., 2025) and new research developments such as communication access in health care environments (Karmas et al., 2022; Module 9, added in 2025).

The DementiaBank Grand Rounds were established in 2025 following the accumulation of extensive discourse data from their standardized protocol (Lanzi et al., 2023) with rich examples of older adults across the spectrum of cognitive aging (i.e., typical aging to dementia). Inspired by prior Grand Rounds and informed by substantial user feedback (Stagge et al., 2026), the DementiaBank team systematically developed this resource. Like TBIBank Grand Rounds, it employs a modular approach, exemplifying modules such as "Introduction to Neurocognitive Disorders" (Module 1). Each module features learner objectives, foundational information, case studies with videos representing three stages of cognitive decline (e.g., cognitively unimpaired, mild neurocognitive disorder [mild cognitive impairment], major neurocognitive disorder [dementia]), opportunities to practice knowledge application and integration (e.g., discussion questions), and additional resources for learning.

Each clinical bank (i.e., AphasiaBank, RHDBank, TBIBank, DementiaBank) collected discourse data for research purposes with standardized protocols (Elbourn et al., 2023; Lanzi et al., 2023; MacWhinney et al., 2011; Minga et al., 2021). Notably, the protocols used to elicit discourse include overlapping tasks across each population (e.g., each protocol includes a procedural discourse task on how to make a sandwich). Table 1 lists the discourse protocol tasks used to develop each set of Grand Rounds materials. These rich data used in the Grand Rounds allow educators to compare and contrast discourse across populations. For example, learners would likely observe differences in a client with aphasia versus a client with TBI explaining how to make a sandwich. The client with aphasia might produce a coherent, step-by-step response that includes multiple paraphasias (e.g., "fanvitch" for "sandwich," "pred" for "spread," "peter" for "peanut"); the client with TBI might demonstrate less coherent discourse but no paraphasias. Examples of using Grand Rounds to compare populations is further described in the section "Using Grand Rounds Resources Collaboratively."

Table 1. TalkBank discourse types and tasks used to develop Grand Rounds.

Discourse type and tasks	AphasiaBank ^a	RHDBank	TBIBank	DementiaBank
Free speech				
[Stroke/injury] Story & coping	X	X	X	
First encounter		X		
Important event			X	
Hometown				X
Picture descriptions and story narratives				
Broken window	X		X	
Refused umbrella	X		X	
Cat rescue	X	X	X	X
Cookie theft		X		X
Cinderella	X	X	X	X
Norman Rockwell “Going & Coming”				X
Procedures				
Simple sandwich	X	X	X	X
Favorite sandwich				X
Tea				X
Question production				
Unfamiliar object tasks		X		

^aAphasiaBank Grand Rounds also include discourse elicited from the Famous People protocol (Holland et al., 2019) for severe aphasia cases unable to complete discourse sampling.

Teaching With and Learning Through Discourse

By using discourse samples in the Grand Rounds cases, learners can observe and understand the impact of communication impairments through more ecologically valid means, beyond what “traditional” test scores may provide (e.g., Lanzi et al., 2023; Mueller et al., 2018). Discourse extends beyond isolated language use and depicts performance in everyday function (Togher, 2001). As the field of speech-language pathology moves toward a more person-centered care approach (ASHA, n.d.-a), discourse analysis and outcomes can be leveraged to better illustrate a client’s communication capabilities in “real-life” activities that are both meaningful and functional. For example, there may be a link between discourse skills and return-to-work outcomes (e.g., Meulenbroek & Cherney, 2019), social outcomes (e.g., Galski et al., 1998), and psychosocial outcomes (e.g., Elbourn et al., 2019). Indeed, with its relationship to functional tasks, discourse is an excellent modality to teach person-centered care to students.

Another unique and beneficial aspect of teaching and learning with discourse is that it allows for the study of multiple components of communication in tandem. While a full history of discourse research is beyond the scope of this tutorial, in brief, research has explored the vast components of discourse including microstructural elements such as lexical-semantic use (e.g., Stark et al., 2025), macrostructural use such as coherence (e.g., Leaman & Edmonds,

2021), social elements (e.g., Minga et al., 2022; Rietdijk et al., 2020), and multimodal aspects of communication such as gesture use (Dresang et al., 2026; Stark & Oeding, 2023). The multilevel nature of discourse exceeds the singular outcomes that are measured in standardized communication assessments. For example, administering an assessment of confrontation naming assesses only lexical-semantic ability, whereas a narrative discourse task can assess a variety of targets at once, including not only lexical-semantic ability but also narrative organization, main concepts, and nonverbal social communication.

Though each Grand Rounds resource is distinct to its population of interest, which are all currently related to neurogenic communication disorders, all of the Grand Rounds contain core elements that promote a rich understanding of communication: cases, video examples, and discussion questions. These resources encourage learners to move beyond categorical thinking and develop a richer understanding of communication as it relates to everyday function. It is important to note that each Grand Rounds resource has been previously described as a discrete entity, with dedicated discussions of its development and content. Readers are referred to these respective papers for foundational details on each Grand Rounds (AphasiaBank: Fromm et al., 2020; RHDBank: Minga et al., 2021; TBIBank: Elbourn et al., 2023; DementiaBank: Stagge et al., 2026).

True to Dr. Holland’s guiding principles for the AphasiaBank Grand Rounds, all resources are intended as organic and dynamic tools, reflecting Audrey’s lifelong approach

to pioneering learning while honoring traditional foundations in communication disorders. Overall, this tutorial frames the Grand Rounds concept within an evidence-based teaching taxonomy to help concretely describe learner objectives, provides necessary knowledge to access the Grand Rounds resources, and equips educators with resources and strategies that can be implemented across diverse educational settings.

Situating Grand Rounds Within Evidence-Based Teaching Practice

Fink's Taxonomy of Significant Learning

Taxonomies are useful tools to describe the educational goals that instructors have for their learners (e.g., Adams, 2015). For example, ASHA uses the well-known taxonomy from Dr. Benjamin Bloom (1956) to suggest terminology that is helpful for instructors or presenters to design learning outcomes, plan teaching activities, and develop assessments (ASHA, n.d.-b). While Bloom's taxonomy is perhaps the most well-known, here, we describe and use Dr. L. Dee Fink's Taxonomy of Significant Learning. This framework was chosen because it shifts instruction from a content-centered paradigm of higher education to one that is learning centered. Central to this taxonomy is the view that significant learning requires change in the learner (Fink, 2013). To foster such learning in students, Fink (2013) describes two major implications for educators:

The first is that the learning goals for a course should include but also go beyond content mastery. Including something besides foundational knowledge will make the learning experience inherently more worthwhile and at the same time make it more interesting for learners. The second is that if teachers use a combination of significant learning goals, it will be possible to create some interaction effects and synergy that greatly enhance the achievement of significant learning by students. (p. 38)

Fink's description not only summarizes key considerations for educators adopting this learning approach but also underscores a primary aim of the TalkBank Grand Rounds. The overarching goal of these Grand Rounds is to foster thoughtful, evidence-informed, and person-centered clinicians equipped to handle the complexities of real-world practice. This taxonomy aligns well with clinical education objectives, which seek to build competency with knowledge, skill, and clinical training. Indeed, TalkBank Grand Rounds enable instructors to pursue a wide range of learning goals for their students (e.g., apply theoretical knowledge to impaired populations; select appropriate assessment

and treatment measures; identify resources to find current evidence-based practices; show cultural awareness and sensitivity). Moreover, Fink's Taxonomy of Significant Learning has been employed across various health/medical education fields such as speech-language pathology, nursing, and cancer care to assess student learning (e.g., Cubelo, 2023; Dabney & Eid, 2024; Thao et al., 2026). Table 2 outlines fundamental information about Fink's taxonomy and how it relates to TalkBank Grand Rounds resources.

Finally, the components of Fink's taxonomy are interactive, with one type of learning influencing and enhancing others (Fink, 2013). This interactivity is also central to the TalkBank Grand Rounds. For instance, a novice speech-language pathology student might learn about word-finding deficits in aphasia through AphasiaBank Grand Rounds, which provide foundational knowledge on word-finding difficulties, illustrate the concepts with case examples from actual individuals with aphasia, and include clinical discussion questions. Thus, students gain both theoretical foundations (i.e., foundational knowledge) and real-world applications from real people (i.e., application) fostering deeper appreciation (i.e., caring) of impairments, such as how anomia affects daily function, which may ultimately shape their clinical decision making. In another example, a later stage speech-language pathology student may learn about considerations that can affect assessment and treatment management. Through reviewing Module 5 of the TBIBank Grand Rounds, the student reads about specific areas often observed in TBI population, such as depression, emotional lability, or fatigue (i.e., gaining foundational knowledge), and watches case examples of clients with TBI demonstrate such behaviors (i.e., "real-world" application). Using the discussion questions posed at the end of Module 5, students have the opportunity to integrate their newfound knowledge with the case examples to consider how they may conduct and/or change their clinical practice (i.e., integration). This interactivity of Fink's components, as illustrated via Grand Rounds, is further emphasized in the Practical Examples and Resources section below.

Case-Based Learning and Principles of Learning

The goal of graduate speech-language pathology programs is to prepare students to become independent, competent clinicians ready for the workforce. Case-based learning offers a mechanism for students to use clinical cases to promote thinking and learn in ways that simulate clinical practice that they will encounter in the workforce (McCabe et al., 2009). Indeed, various applications of case-based learning have been shown to be useful in speech-language pathology education (e.g., Brock, 2025; Keck et al., 2025; McCabe et al., 2009; Wallace & Benson, 2018). As discussed above,

Table 2. Connecting Fink's (2013) components of significant learning to TalkBank Grand Rounds.

Significant learning component	Brief description	Connection to TalkBank Grand Rounds
Foundational knowledge	The basis of significant learning; learners must have an in-depth understanding of subject matter.	Grand Rounds provide foundational information on topics that are presented in case format or in modules to support learner understanding of relevant content.
Application	Learners use foundational knowledge to develop particular skills.	Case-based examples paired with discussion questions offer opportunities for clinical reasoning and decision making, translating into clinical skill building. Collaborative commentaries can be used within Grand Rounds for students to practice clinical skills such as the identification of communicative behaviors or reflecting on clinical practices.
Integration	Learners connect and relate various information to each other.	Grand Rounds can be used collaboratively to teach key concepts across disorders and/or compare and contrast communicative behaviors across populations.
Human dimension	Learners develop and explore relationships and interactions with themselves and with others.	Person-centered case presentations foreground the lived experiences of people with communication disorders fostering clinical skill development and personal reflection.
Caring	Learners value a topic differently or care more deeply about something (e.g., an idea, others, the learning process itself).	Materials and stimuli present novel opportunities for the learner to experience content and client interactions and/or think about themselves as a future clinician.
Learning how to learn	Learners are equipped with resources to continue learning for the rest of their life.	Additional resources and materials are provided for additional or deeper learning. References are linked (when able) to support access to learning resources.

the TalkBank Grand Rounds include real case examples of clients across adult neurogenic communication disorders that serve as the foundation for case-based learning. Case-based learning also targets a principle of evidence-based teaching, “Students’ motivation generates, directs, and sustains what they do to learn” (Ambrose et al., 2010, p. 69). Suggested strategies to establish value for students include providing authentic real-world tasks and showing relevance to not only current academic lives but also future professional lives (Ambrose et al., 2010). Given that the TalkBank Grand Rounds present real case examples from clients with communication disorders that students will encounter in their future careers, using these cases could be a valuable way to support students’ motivation to learn topics and/or skills.

A secondary evidence-based learning principle suggests that to develop mastery (i.e., a high degree of [clinical] competence in an area), “students must acquire component skills, practice integrating them, and know when to apply what they have learned” (Ambrose et al., 2010, p. 95). Similar to the components of Fink’s taxonomy, Grand Rounds offer a unified platform for students to work through stages of learning to reach mastery. This includes developing a key set of skills, practicing the skills such that they can be used fluently and with some automaticity, and lastly knowing when to apply those skills (Ambrose et al., 2010). The Grand Rounds cases offer a unified platform for students to work through these components. For example, in DementiaBank Module 1, they first develop component skills to identify modifiable risk and protective factors for dementia, and then they are given the opportunity

to practice applying that skill to the three example case studies. This offers a low-stakes opportunity to work toward mastery of that skill with the aim of supporting efficiency and recognition of when it may be appropriate to apply that knowledge with future clients.

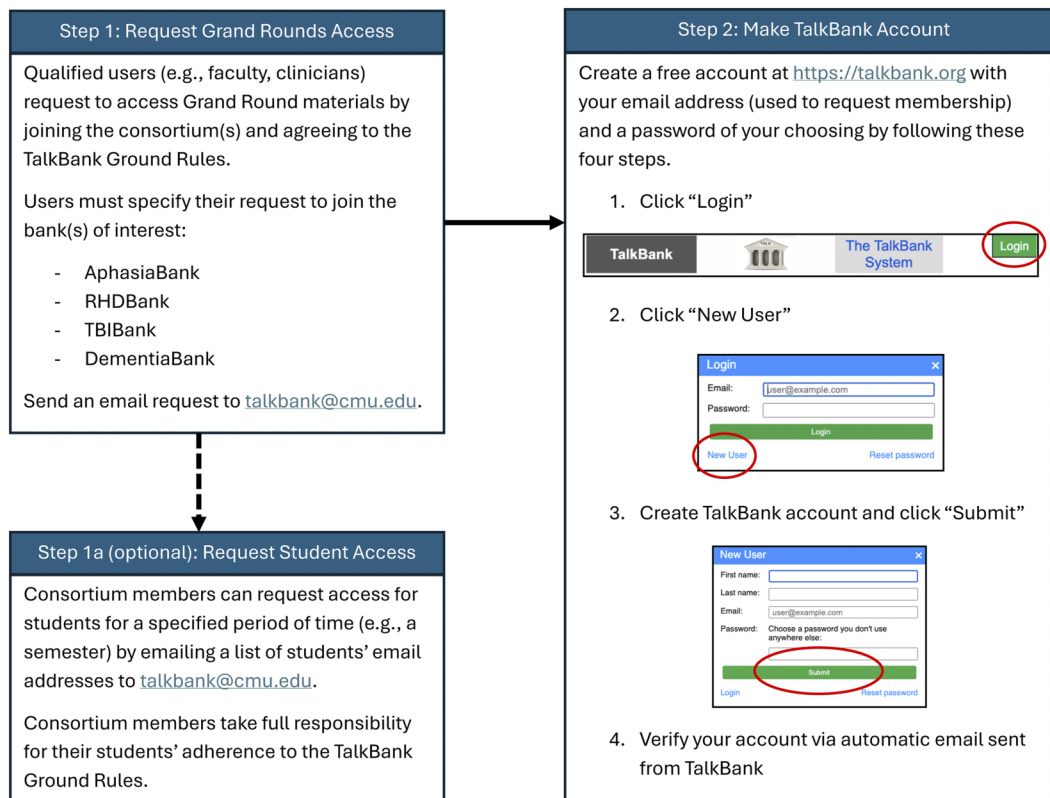
How to Access Grand Rounds

The online TalkBank Grand Rounds require minimal resources: Users need only a computer (or similar device) and a stable internet connection. Navigation is straightforward, with content formatted on continuous webpages and helpful hyperlinks guiding users to points of interest in many Grand Rounds. All Grand Round webpages are publicly and freely available. However, qualified users must register on the website to access the rich, multimedia case examples (i.e., audio and video examples), as described in Figure 1.

Practical Examples and Resources

Grand Rounds are designed to promote broad learning of communication in diverse educational contexts, drawing from rich discourse data. For example, activities to compare cases and populations can help learners appreciate both the patterns and variability that characterize communication disorders. Moreover, they can exemplify key elements of clinical practice: not merely observation, but interpretation; not just diagnosis, but reasoning. Whether in classrooms, workplaces, or at home, the Grand

Figure 1. Requesting access to Grand Rounds.



Rounds emphasize transferable clinical skills essential to academic and professional growth. Below, we provide guidance on integrating the Grand Rounds into various educational contexts, along with detailed "ready-to-use" assignments using the Grand Rounds resources.

Using Grand Rounds Across Educational Levels

One of the Grand Rounds' greatest strengths is flexibility to support learners at varying levels of experience and disciplinary backgrounds. In class, the Grand Rounds format particularly aids novice students (e.g., undergraduate "pre-speech-language pathology" students or those from out-of-field disciplines) via collaborative case-work, instructor guidance, peer discussion, and group review of key terminology and concepts. For more advanced learners (e.g., graduate speech-language pathology students), the Grand Rounds may be completed independently outside of class. These students are typically ready to apply theoretical knowledge and clinical frameworks to authentic discourse samples, progressing through the material at their own pace with greater autonomy. Such activities foster deeper clinical integration by prompting students to justify their interpretations,

weigh competing hypotheses, and consider data limitations. For graduate students preparing for externships or comprehensive exams, this process reinforces key learning objectives in differential diagnosis, person-centered care, and treatment planning.

The Grand Rounds can also serve as valuable refreshers for students during clinical externships or their clinical fellowship year (CFY). Clinical supervisors, regardless of affiliation with a university, can access these Grand Rounds modules and assignment syllabi to reinforce clinical reasoning in the field. Because the cases are self-contained and accessible, they provide a structured way to revisit core concepts in discourse, diagnostic decision making, and the functional impacts of communication disorders. This fosters ongoing professional growth and bridges academic training with independent practice.

Integrating Grand Rounds Across a Master's-Level Speech-Language Pathology Program

To support learning across educational levels, the TalkBank Grand Rounds can be implemented throughout speech-language pathology program curricula to support

the full scope of students' educational journeys. Students can be supported to developmentally move from foundational knowledge to more complex or in-depth concepts (Antonsson et al., 2025). This supports students to cumulatively build knowledge based upon prior learning, promoting long-term retention (Jette et al., 2020). While no two educational programs are exactly alike, there may be overall utility in using the Grand Rounds resources to scaffold student learning throughout their programmatic development. For example, undergraduate or "pre-speech-language pathology" courses may use the multimedia case examples to share real clients with various communication impairments. In this way, students (even before starting a graduate speech-language pathology program) would be exposed to people with communication disorders they were not previously aware of (e.g., right-hemisphere stroke survivors) or others with whom they may be assigned to observe or interact. As students progress through more advanced undergraduate coursework and beginning of their graduate programs, a focus on the informational content of the Grand Rounds may be used to teach disorder-specific terminology (e.g., neurocognitive disorders) and concepts related to communicative behaviors (e.g., confabulation, aprosodia) associated with various populations. In this specific case, we advocate for the use of the discussed TalkBank Grand Rounds in a cognitive-communication disorders (or similar) course. Furthermore, moving into more advanced stages of graduate training as students develop independence in clinical skills, the case examples may be revisited once again to have students discuss possible clinical decision-making and planning and/or consider other aspects of care that may influence the person's overall prognosis. For example, educators may have students consider concomitant health conditions or factors of major neurocognitive disorders that are not explicitly discussed in the cases (e.g., risk of brain injury with falls, medication effects on behavior). In particular, instructors who teach multiple courses and/or provide various levels of clinical supervision across a speech-language pathology program may benefit from one resource that can be utilized in different ways to meet student learning needs. In Table 3 below, we outline an example of mapping Grand Rounds across one type of educational model for a 2-year graduate master's-level speech-language pathology program.

Integrating Grand Rounds Into a Stand-Alone Course

Another way to integrate TalkBank Grand Rounds is within a specific course. The breadth and depth of the resources can support and supplement teaching and clinical skill development across various topics in adult neurogenic communication disorders. For example, a graduate speech-language pathology "Cognitive-Communication Disorders" course

might be grounded in the World Health Organization's International Classification of Functioning, Disability and Health (WHO-ICF; WHO, 2001). For example, TBIBank Module 9, "Communication Access," is generalizable to other neurogenic communication disorders and provides examples of environmental factors from the WHO-ICF that influence communication access. This module could be integrated into the course plan as a resource to provide real-world examples of environmental impacts on communication. The module could also be used "live" in the course to facilitate a large in-class discussion on environmental factors that serve as barriers or facilitators to communication across various neurogenic disorders. This in-class activity may support students to more readily grasp the impact of environmental factors by actively engaging in the material through discussion and reflecting on their own experiences with environmental impacts to communication.

Integrating Grand Rounds Into Clinical Placements

As students move from classroom learning to clinical settings, Grand Rounds is a valuable resource for integrating classroom knowledge with hands-on client experiences. As previously stated, it includes both foundational information and applied examples, serving as an excellent "transition" resource for learners throughout their clinical education. For example, consider a graduate student evaluation with a client in an adult outpatient clinic who presented with primary complaints of memory changes, word-finding difficulties, and a self-reported family history of Alzheimer's disease. During the evaluation, the client remarked in passing that "my mother had dementia, then she got Alzheimer's disease. I'm terrified that it's inevitable for me too." This comment lingered with the student afterward, prompting a discussion with her clinical educator about client education and terminology.

The clinical educator, familiar with TalkBank Grand Rounds, directed the student to review Module 1 in the DementiaBank Grand Rounds, which provides foundational information on neurocognitive disorders. Guided by Module 1 and discussion with her supervisor, the student gained a clearer understanding of distinguishing clinical syndromes (e.g., dementia) from their underlying disease etiology (e.g., Alzheimer's disease), as well as recognizing that every individual has both risk and protective factors influencing their likelihood of dementia progression. Armed with this new knowledge and confidence (related to Fink's component of caring and human dimensions), the student and clinical educator planned their next session, in which the student would share information from DementiaBank Grand Rounds with the client on degenerative disease

Table 3. Mapping a progression of TalkBank Grand Rounds resources across a 2-year graduate speech-language pathology program.

Program stage	Year 1 Semester 1	Year 1 Semester 2	Year 2 Semester 1	Year 2 Semester 2
Course units	Unit: Introduction to speech-language pathology	Unit: Introductory clinical placement	Unit: Language and cognition	Unit: Advanced clinical placement
Teaching context	Lecture and tutorials	On-campus clinic with clinical educator and peers (high level of support)	Lectures and tutorials	Clinical educator in an acute hospital setting (low level of support)
Teaching aims and learning outcomes	The student develops an understanding of the broad scope of the speech-language pathologist's role with neurogenic communication disorders.	The student is directed to a specific module or video to develop skills in observing communication disorders.	The student applies knowledge to clinical case scenarios. Comparison across different neurogenic conditions	The student is encouraged to critically reflect, problem-solve, and show increased autonomy over learning.
Activities	Watch videos and note down potential features of communication disorders.	Identify what type of paraphasias are in the patient's assessment language sample.	Compare and contrast the assessment tasks in the RHDBank samples versus the DementiaBank samples.	Discuss ethical implications around service transitions and equity in access to services. Discuss ongoing professional development needs for career goals.
TalkBank Grand Rounds resources	TBIBank Module 1: Cognitive-communication disorders Multimedia samples of aphasia, cognitive communication disorders, and control samples	AphasiaBank examples: Video samples that clearly illustrate different types of paraphasia	RHDBank Case 3: Miranda, a 53-year-old, African American woman. DementiaBank case: James, a 76-year-old man	Module 7: Recovery of spoken discourse (TBIBank) TBIBank quiz: self-reflection
Assessment	Online quiz with definitions of various neurogenic communication disorders	Oral viva reporting on simulated assessment data	Case-based exam with a range of clinical case scenarios	Critical reflection task following clinical placement

terminology and specific protective factors that may reduce the client's risk of developing dementia (related to Fink's components of application and integration). This scenario also highlights how Grand Rounds can empower graduate students to provide nuanced and person-centered care to their clients.

A second example illustrates the use of TBIBank Grand Rounds for clinical placements. In a community-based brain injury group, a student used Module 3: (Discourse) Variability Across Contexts from TBIBank Grand Rounds to deepen their understanding of how different tasks, environments, and communication partners can either support or limit participation for people with cognitive-communication disorders post-TBI. For example, the student collaborated with a client whose primary goal was to return to work as a local tour guide. Guided by the module, the student explored the client's broader communicative purposes in social communication (e.g., engaging in conversation with travelers, narrative storytelling about locations' history, requesting information about travelers' interests) and how his discourse performance may vary across communicative tasks. The student identified relative strengths of the client in personal narrative retells, in particular, using more organized structure when

supported by visual story organizers. However, the client had more difficulty in spontaneous conversation, demonstrating difficulty with topic maintenance and turn-taking. Aided by the knowledge and ideas sparked from the TBIBank Grand Rounds Module 3, the student's clinical plan moved toward a more individualized, person-centered understanding of discourse recovery (related to Fink's component of human dimension). The student and client developed a treatment plan to address the unique variability in his discourse skills to support work-place communication skills and community integration, along with integration of communication partner training and overall communicative confidence.

Grand Rounds: Beyond Grad School

TalkBank Grand Rounds can also serve as alternative forms of continuing education for practicing SLPs, enabling them to expand and refresh their knowledge across various aspects of communication disorders. Its materials are constantly evolving and are updated to reflect recent research findings and evidence-based practice, making it an excellent resource for clinicians to review updated information on populations. This is also in line with Fink's

component of “learning how to learn.” For example, the term *apraxmatism* is used to describe language disorders after right-hemisphere stroke; introduced as a diagnostic label in the last 5 years (Minga et al., 2023), it may be new terminology for many clinicians. Learning its clinical presentation, along with the forthcoming *International Classification of Diseases, 10th Revision* codes (i.e., R47.83 and a series of I69 codes with final characters through –24 under cerebrovascular disease), would be particularly useful for practicing SLPs (Minga et al., 2024). An SLP could thus facilitate an in-service “lunch and learn” for their team using the RHDBank Grand Rounds to review this update and discuss its clinical implications for service delivery—all in a predeveloped, digestible format via Grand Rounds.

Specifically, the RHDBank Grand Rounds offer clinical exposure to real patients through video-recorded scripted tasks akin to a clinical tool. For example, the speech-language pathology team could review the “Communication Impairments” section of RHDBank Grand Rounds to explore the definition of apraxmatism and the freely linked source article (i.e., Minga et al., 2023). After this didactic information review, clinicians can observe videos of case examples such as the First-Encounter Conversations of minga08 and minga14, consider the short answer and discussion questions, and note additional observations on linguistic, paralinguistic, and extralinguistic domains of language use during the interaction. The team could also extend discussions of pragmatic nuances poststroke by viewing patient perspectives of the impact of apraxmatism in the 29-min documentary, *RHD: Hidden Diagnosis* (Pearce, 2024), linked under the Teaching section of the RHDBank.

Using Grand Rounds Resources Collaboratively

In developing the discourse protocols that underpin the Grand Rounds, a key consideration was ensuring overlap in tasks across populations to enable cross-population comparisons. The Grand Rounds benefit from this rigorous research approach by incorporating discourse examples from identical discourse tasks used across populations. Indeed, using the Grand Rounds in tandem provides a great method for teaching. For example, an instructor may want to teach master’s-level speech-language pathology students about discourse sampling in adult neurogenic disorders. Instructors can first teach about various types of discourse, then focus on procedural discourse using the “sandwich” tasks to compare and contrast similarities and differences across neurogenic populations. The Grand Rounds for AphasiaBank, RHDBank, and TBIBank, each include a procedural discourse sample elicited by asking the participant to describe making a simple sandwich (i.e., either peanut butter and jelly or alternative, based on the cultural appropriateness). Having students take

notes while observing each procedural discourse video, followed by small- or large-group discussions, fosters foundational knowledge while engaging Fink’s “integration” component. Students can thereby synthesize knowledge they have learned from across different populations to identify observed similarities in communicative behavior and/or distinctions between them. Example videos for this activity may include: “video 3d” from TBIBank’s third module, “minga08-a PBJ” in Case 3 from RHDBank, and “adler11a-sandwich” under Broca’s aphasia in AphasiaBank.

Using Grand Rounds With Additional TalkBank Resources

Collaborative Commentary is an online tool that allows groups to code or comment on transcripts together in the TalkBank database (MacWhinney & Fromm, 2023). As such, it extends the Grand Rounds resources, enabling groups to discuss the cases and multimedia samples in the Grand Rounds collaboratively. It advances learning by fostering a dynamic, social environment where users can explore differences in error coding, test item scoring, gesture coding, judgments of successful communication, and many other relevant behaviors (Zamiri & Esmaeili, 2024). This approach benefits learners at all levels, from novice learners requiring explicit modeling of observations to advanced learners using it as a clinical network forum to draw on collective expertise.

Interested users are encouraged to read the Collaborative Commentary article cited above and watch the short tutorial screencasts demonstrating its setup and use on the TalkBank site (see Figure 2; TalkBank, n.d.-a). Some brief examples are offered here from assignments that instructors have developed. For TBI, instructors can assign specific videos featured in the TBIBank Grand Rounds to have their students practice analyzing discourse based on its global coherence, which is often a problem for individuals who have sustained such injuries. Students can learn about and then apply the 4-point rating scale developed by Van Leer and Turkstra (1999) to measure a person’s ability to maintain the topic of the discourse task. To do the assignment, students log into Collaborative Commentary at the TalkBank Browsable Database (TalkBank, n.d.-b) and join the group (e.g., “Coherence”) created for their class with the instructor’s prepared set of codes/tags (see Figure 3). Using the video directory, they find the assigned videos. As they play each video and follow along in the accompanying transcript, students stop as needed to enter the coherence tag that they think applies to each participant utterance (e.g., “3” to indicate moderate/conditional coherence if the utterance was related to the topic but lacked substantive information or was slightly tangential and required some inference). Each student’s tag is recorded and visible to that student and the instructor. The instructor can choose to

Figure 2. Screencast tutorials for collaborative commentary.

Collaborative Commentary (CC)		
CC-overview	introduction to CC	7:59
CC-new_user	registering as a new user for CC	2:25
CC-join_group	joining a CC group	2:23
CC-comments	inserting tags and comments in CC	5:21
CC-search	searching by documents, tags, and users in CC	2:51
CC-contact_user	contacting group users in CC	2:13
CC-owner	how the group owner can create tag sets	2:09
CC-manage	how the group owner can manage permissions for users (read, write, etc.)	1:09

keep students’ tags hidden from or shared with the rest of the class. In fact, the instructor can first set up the task for students to do the assignment independently, without seeing others’ tags and then switch the permission for collaborative learning so the whole class can see each other’s scores and debate disagreements.

For RHD, specific videos from the RHDBank Grand Rounds can be assigned with a set of tags to help students learn how to identify characteristics of apragmatism (Minga et al., 2023) such as tangential discourse, egocentric discourse, reduced turn-taking, flat affect, and reduced eye contact. An assignment from the AphasiaBank Grand Rounds may have students watch the videos from certain Grand Rounds case examples and provide open-ended answers to some of the discussion questions in the text. For example, these discussion questions are posed for the Cinderella Story told by an individual with anomic aphasia (adler08a, Example 10 in AphasiaBank Grand Rounds): “Did you notice the frequent use of general terms instead of specific words? What other signs of word finding problems did you notice in his sample?” Figure 4 shows a segment of the transcript as viewed in the Browsable Database with three comments entered by one of the authors (D.F.). The circled “C” indicates that a tag or comment was entered for that utterance. Clicking on the “C” reveals what was entered, in this case,

Figure 3. Example of collaborative commentary tags.

Group "Coherence" Tags

- 1: no relationship
- 2: low/remote
- 3: moderate/conditional
- 4: high/complete

observations about signs of word-finding problems (i.e., fillers, revision, repetition, unfinished utterance).

Ready-to-Use Assignments

In this tutorial, we also provide instructors with resources for fully formed assignments that leverage the Grand Rounds resources. One complete set developed by author B.C.S., including all supporting materials, is available on Open Science Framework (OSF; Stark, 2026). Each of these assignments guides students through a scaffolded process of observation, analysis, hypothesis generation, and reflection, using authentic case materials that mirror the complexity of real clinical practice. With clear learning objectives, defined analytic steps, and concrete expectations for clinical reasoning, these activities help demystify what it means to “think like a clinician” even for students with no prior client-facing experience. Offered as a free, dynamic resource on OSF (see Figure 5), these syllabi are regularly updated to reflect evolving best practices in clinical education and discourse analysis.

Another set of materials can be downloaded from the Classroom Activities link in the Teaching section at the main AphasiaBank and RHDBank webpages. Figure 6 illustrates where to find this link on the main RHDBank webpage. These include 10 assignments for AphasiaBank and six for RHDBank. Both resources cover a variety of topics, including feature familiarization, diagnostic and treatment planning for a specific individual with either apragmatism or aphasia, summarizing an individual’s linguistic/communication strengths and weaknesses, conducting linguistic analyses on transcripts (e.g., coding content information units, paraphasias, global coherence, main concepts), comparing treatment options for a particular individual, forming strategies to involve loved ones in treatment, comparing language use during various discourse genres, and pragmatics in individuals with left-versus right-hemisphere strokes to controls. The Classroom

Figure 4. Example of applied collaborative commentary tags to discourse sample.

@Participants: PAR adler08a Participant , INV Investigator
@ID: eng|GR|PAR|56;09.|male|Anomic||Participant||78.5|
@ID: eng|GR|INV||||Investigator|||
@Media: adler08a_cin_ano, video

1

PAR: okay . ▶

2

INV: now tell me as much of the story of Cinderella as you can . ▶

3

INV: you can use any details you know about the story as_well_as &-um the pictures you just looked at . ▶

4

PAR: &-um <Cinderella was> [//] &-uh &-uh &-uh <she was> [/] she was like a &-um &-uh (.) +... ▶

Utterance 4 to 4:

David Fromm: lots of fillers, a revision, a repetition, and ultimately unfinished utterance

5

PAR: (...) she [//] she's a woman but she didn't do much at [//] &-uh with this +... ▶

6

PAR: (...) Cinderella went [/] went [/] &+sa went [/] &+w went with the [/] &-um &+th <the piece> [//] the people . ▶

7

PAR: and &-um she said +"/. ▶

8

PAR: +" hey (.) why don't you &-uh +... ▶

Activities also enables learners to use Computerized Language Analysis (MacWhinney, 2000), a linguistic program designed to analyze discourse transcripts housed within the TalkBank infrastructure.

Considerations for Adapting Grand Rounds to Your Specific Setting

There are incredibly diverse educational needs that educators, both academic and clinical, may have in their specific programs, courses, or clinical placements. While we offer suggestions for integrating Grand Rounds resources, we recognize that the examples are by no means comprehensive. Therefore, in this final section, we invite readers to reflect on the information presented about TalkBank Grand Rounds

and consider how these resources may be adapted to meet clinical and academic educational needs.

Purpose and Outcomes

These reflection questions are intended to identify instructors’ educational needs and outcomes that may be addressed with Grand Rounds resources.

- What barriers or educational issues are you trying to solve in your setting (e.g., limited exposure to a certain demographic or syndrome, difficulty teaching clinical reasoning from discourse)?
- What do you want learners/clinical students to be able to do differently after completing Grand Rounds

Figure 5. Accessing ready-to-use assignments on Open Science Framework.

OSF Storage

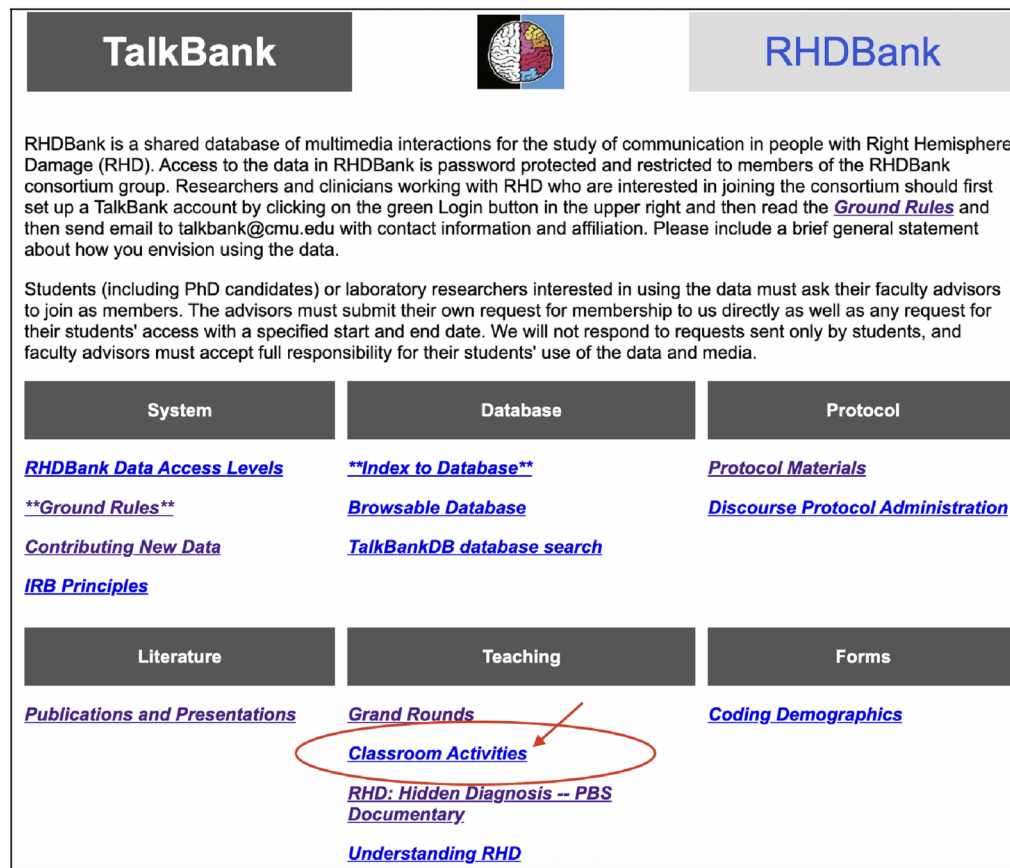
Search your files

Name: A-Z

Download As Zip

Aphasia_Grand Rounds Assignment Template.docx	3 Downloads	18.9 kB	Jan 8, 2026 01:21 PM	
CogComm_Grand Rounds Assignments Template.docx	4 Downloads	37.3 kB	Dec 9, 2025 10:31 AM	
Overview_All_GrandRounds.docx	2 Downloads	39.3 kB	Dec	Download Share Embed

Figure 6. Locating “Classroom Activities” on RHDBank.



(e.g., generate and justify differential diagnoses, link discourse observations to participation impacts, or defend intervention targets)?

- What evidence do you need to demonstrate successful learning?

Learner Level and Structure

The following reflection questions guide educators to identify characteristics of their learners as it relates to Grand Rounds use.

- Who is the primary learner group (e.g., undergraduate students, master’s students, CFY/new clinicians, or practicing clinicians), and what prerequisites or prior knowledge can you assume?
- What do your learners/clinical students find most challenging (e.g., terminology, observation skills, hypothesis generation, treatment planning, counseling), and which Grand Rounds components best address that bottleneck?

Feasibility and Effectiveness

These questions target feasibility and logistics of implementing Grand Rounds into the instructors’ learning environment.

- What is one small step or the lowest burden implementation that would still be effective for learning such as one module versus the whole Grand Rounds?
- Who will facilitate learning enhancements (e.g., instructors, clinical educators/supervisors, peers, self-guided)?
- How much scaffolding is needed for high-quality learning in your environment (e.g., guided whole-group facilitation, small-group discussion, or independent/asynchronous work with accountability)?

Map to Your Setting and Local Practice Realities/Needs

The following reflection questions are specifically targeted toward clinical educators using Grand Rounds.

- In your service context (e.g., acute, inpatient rehab, outpatient/community, university clinic, private practice), what are the “real decisions” that SLPs must make, and how will you adapt discussion prompts so learners practice those decisions?
- What local constraints, which reflect your setting’s real-life needs, would be relevant to discuss alongside the Grand Rounds (e.g., time, discharge pressure, payer rules, staffing, access to interpreters, technology)?
- What local terminology or diagnostic frameworks (including country-specific labels/codes) need to be explicitly discussed so learners can apply Grand Rounds concepts accurately?

Conclusions

This tutorial provided a brief historical context for Grand Rounds development, beginning with Dr. Audrey Holland and AphasiaBank Grand Rounds, which then expanded to three other successful resources for RHDBank, TBIBank, and DementiaBank. The primary goal of this tutorial was to assist instructors and clinicians in integrating these resources into their individual learning and instructional needs. Framed within Fink’s (2013) Taxonomy of Significant Learning, the Grand Rounds resources serve as theoretically grounded, evidence-based teaching tools to meet significant learning goals across diverse contexts and for learners with varied knowledge and skill bases. This tutorial also provided concrete guidance for educators on accessing the Grand Rounds resources, along with examples of integrating them and related tools (e.g., collaborative commentary) into specific educational settings and for a variety of learning purposes.

A limitation of this educational tutorial is the bias from the developers toward the use and familiarity with TalkBank Grand Round resources; other educational resources exist to enhance speech-language pathology education. Additionally, some of the examples in the tutorial reflect the current iteration of the Grand Rounds resources. At present, TalkBank Grand Rounds exist only for adult neurogenic populations. Many of the authors on this tutorial also teach adult neurogenic communication disorder coursework, and the examples presented in this tutorial also reflect our own teaching experiences and our knowledge of speech-language pathology programs. The educators’ backgrounds position the tutorial—and some of its examples—in a unique position for presenting their integrated use. This tutorial does not provide an exhaustive list of all programmatic and individual instructor needs, but we anticipate that the reflection questions will offer a strong starting point for individuals to consider how to use Grand Rounds in their local educational contexts.

Future Directions

Numerous future directions can enhance the Grand Rounds resources. First, existing Grand Rounds’ materials can be updated, and new content can be created to reflect evolving research and updates in evidence-based practice. For example, as mentioned above, many of the Grand Rounds include a procedural discourse sample (i.e., making a sandwich). The DementiaBank Grand Round team has collected procedural discourse data and is in the process of integrating examples into their Grand Rounds. To ensure that the Grand Rounds continue to reflect user needs, the Grand Rounds could incorporate annual usage surveys and opportunities for users to provide feedback on future content/module development. These suggestions are consistent with and derived from participant input from the 2026 International Cognitive Communication Disorders Conference. Indeed, user feedback and annual surveys may influence the following directions and/or priorities of Grand Rounds implementation:

- develop additional Grand Rounds resources for other populations represented on the TalkBank infrastructure (e.g., fluency, child language)
- revise, tailor, and expand the current Grand Rounds to meet user needs such as developing new modules on adult neurogenic topics
- foster greater interactivity among users and developers (e.g., by streamlining processes for educators to submit their own assignments or tools built on these resources for others to access)
- promote later stages of resource implementation such as uptake, monitoring, evaluating, and sustaining use of tools (e.g., Graham et al., 2006). (We refer readers to Stagge et al. [2026] for a description of earlier stages of Grand Rounds implementation processes through DementiaBank.)

Another future direction is to more prominently feature educational materials on the TalkBank homepage through a dedicated “Education” heading with links to the Grand Rounds and related resources. This should also include a “Table of Contents” section for the Grand Rounds so that potential users can quickly review the different modules and content included in each Grand Rounds. Finally, currently available only in English, these resources could also be translated or adapted for other languages, cultures, and country-specific contexts to broaden access for international, non-English-speaking audiences. Grand Rounds should also include sections that emphasize bilingualism and specific considerations related to multiple language users. Overall, this tutorial offered an integrated perspective on the TalkBank Grand Rounds resources, aiming to enhance speech-language pathology education and

career preparedness through practical examples of implementing these resources for unique educational needs.

Data Availability Statement

The TalkBank Grand Rounds are freely available to registered users on the TalkBank platform at talkbank.org. Example syllabi and assignments are available on Open Science Framework at <https://osf.io/qjc7t/overview> and as “Class Assignments” on talkbank.org.

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