
Episode 74: The Simplest Advice for SLPs: Be Yourself

Meet Maggie Donaker, a medical speech-language pathologist who has worked in a multitude of settings throughout her career. Maggie shares her SLP origin story, why it's important to be you in a professional setting, and some tips for networking and building the career of your dreams.

Discussion & Reflection Questions

1. Can you tell us why you decided to become a speech-language pathologist?
2. What settings have you worked in as a medical SLP?
3. How do you go about building a career in speech pathology? What kind of networking did you do?
4. What advice do you have for the student who doesn't have a foundation for networking, or maybe doesn't see it?
5. Did you ever have an interview that went badly?
6. How can you use being yourself to your advantage when building your SLP career?
7. What has been a challenging situation for you in the medical field?

Quote of the Conversation

"So, sometimes, you do have to kind of put that work in. Sometimes, you will have to be frustrated that you don't have that. It's okay, frustration. It's there. It's part of life. So, let's grow from it."

-Maggie Donaker M.S. CCC-SLP

Maggie Donaker M.S. CCC-SLP

Medical Speech-Language Pathologist

Maggie Donaker, a Medical Speech-Language Pathologist, is a graduate of Ohio University (BS) and Bowling Green State University (MS). She has 10 years of knowledge and clinical expertise within the acute and subacute healthcare settings. Maggie serves as Director

of Operations for Dysphagia Outreach Project, where she leads the nationwide distribution of supplies from the organization's Dysphagia Food Bank. She is a 7 time ASHA ACE Award winner and is the primary facilitator of the only swallow support group in FL supported by NFOSD, Dysphagia Digest of Florida. Maggie is a respected presenter, educator and considers herself to be a



passionate learner who believes that a sense of humor will always go a long way when working to form a personal connection with the individuals that she serves.

Keep the Conversation Going

Thank you for listening to *The Missing Link for SLPs* podcast! **If you enjoyed the show, I'd love you to subscribe, rate it and leave a short review.** Also, please share an episode with a friend. Together we can raise awareness and help more SLPs find and connect those missing links to help them feel confident in their patient care every step of the way.

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[FreshSLP.com](#). Let's make those connections. You got this!

*Do you have a question you'd like answered on the show?
Interested in sharing your experience as an SLP with our audience?*

Send a message to Mattie@FreshSLP.com!

Not a substitute for a formal SLP education or medical advice for patients/caregivers



The Missing Link for SLPs Podcast Show Notes

Mattie Murrey

Every once in a while, in a career, you will run into somebody who you just really feel connected with. And that was the case with me with Maggie. She was hosting one of Theresa Richards' big seminars, and I was one of the guest speakers there. And I reached back to her later and said, "Hey, would you like to be a guest on my podcast?" And she said, "Absolutely." So, here we are ready to welcome Maggie.

Mattie Murrey

Hello, and welcome to The Missing Link for SLPs podcast. I'm glad you're here. Today's episode is part of the SLP Spotlight series, where I talk with SLPs in a variety of SLP positions and settings, doing things that we knew SLPs did, but also working in areas that we've never thought or heard of SLPs working in. It is amazing the opportunities these SLPs have taken and where their careers have gone. This is storytelling time.

Mattie Murrey

Welcome to this episode of The Missing Link for SLPs podcast. We're here with Maggie, and Maggie and I go back ways. And before we pressed the record button, we were just trying to remember how far back we go and how we met. So, it's so interesting [to see] the people that come to the podcast. Either way, Maggie, I'm happy, happy, happy you're here.

Maggie Donaker

Thank you. Thank you for having me. Yeah, we went back [to]... I almost want to say to 2019, when The Uncensored, I believe, was doing their summit. And you were presenting, and I believe you and I were both presenting on the same day. And with that, we had the opportunity to connect in relation to what your passion has been and your impact on the speech pathology field has been with your podcast. So, I think that, even way back then, we connected in that way. And we're finally able to sit down and discuss.

Mattie Murrey

Yes. Before we pressed record, I was saying, I remember you being so much older. I guess that's a good thing because I really connect with SLPs across a variety of our lifespan — our career span, I should say — but I do remember when you were hosting the summit, and I'm like, "Oh wow, she's just so [calm]. Maybe that's why: because you were just so calm. You're like, "Okay, here we go."

Maggie Donaker

Yeah, you're also catching me on the tail end of a two-week vacation. So, I think I'm a little bit more relaxed in relation. And then, also, too, I've got a nice light shining on my face. So, it always makes you look younger. I guess.



Mattie Murrey

Well, when you tapped into the podcast (for the Zoom recording), I'm madly looking for my mascara, like it really matters. Right?

Maggie Donaker

Right. Well, yeah. But once again, you still just look lovely as always.

Mattie Murrey

Thanks. We're going to have a good time today because we've got a bunch of really interesting questions outlined. Now these questions come from students. I collect them through one of my courses. At the beginning of the course, I'll say, "Hey, each of you send me two questions. We're going to answer these. What questions do you have about the field?" So, we've pulled some questions from there — and also from students who have reached out via my Instagram. At Fresh SLP, we just put a poll out. And so, some of the questions are coming from there. So, we've got some neat questions. This is going to be fun. First, Maggie, tell us why you became a speech pathologist.

Maggie Donaker

Sure. So, my journey of speech pathology actually didn't start out as if I wanted to be a speech-language pathologist in the first place. I was actually studying to be a dietician major at Ohio University down in Athens, Ohio. And I was taking an organic chemistry class, and unfortunately, the class and I really didn't agree. So, that led to my inability to pass that class at that time, but I had the opportunity to then take it at Cleveland State. I'm from the Cleveland area. [I had the chance to] take it at Cleveland State. And during that summer course — because I needed the credits in order to graduate, even if I was going to switch my major — a mentor of mine down at OU actually told me, "Hey, I think maybe it would be interesting if you could switch your major because I think your passions might be better suited for a different technique or a different degree." So, coming back to the drawing board, I was able to call my father who's actually a physical therapist, and has been for many years, up in the Cleveland area. And I was talking to him and trying to troubleshoot some things. I was in my sophomore year. So, I was like, "Hey, it's going to be a little bit of a difficult transition because I have to take core classes for some majors and so forth." And he said, "Why don't you look into speech pathology? Because speech pathology also works with people who eat." And I said, "Uh, what?" Yes, I am one of those, who was like, "Excuse me?" So, that really opened up the door for me in order to use his network of people, to have the opportunity to go and shadow Mike Stives at University Hospital up in the Cleveland area. And I was able to see him at the bedside, working with people. And then I saw a modified barium swallow study, and it was as if the lights of heaven were shining down on that certain situation, that I was like, "This is it. This is what I want to do for the rest of my life." And so, I finished up my course at Cleveland State. I went back to OU. I switched my major. I took all of the summer prerequisite courses that I needed to do to finish up at that time. And I've been hooked ever since.



Mattie Murrey

Excellent. We have a lot of students who listen to the podcast, and that story right there... I would continue on and say, if you are a student moving into the field, and you don't have the experience of stepping into a medical setting, go find someone. Go shadow. Reach out to a hospital. Reach out to the speech pathologists and say, "I'm considering the field. Can I come and shadow you for a day?" And make sure you see a video swallow study. I am like you. I love them. Boom, boom, boom, you're thinking on your feet. Okay, what do we do? How do we change this? How do we modify that? How do we improve their overall safety of intake? And I love it when I can talk with the radiologists and say, "Well, when do you actually start timing the premature spillage over the base of the tongue?" You know what I mean? Love it.

Maggie Donaker

Yeah. And even reaching out, too, to even some private practices. Or even some mobile FEES or even mobile diagnostic — mobile modified barium swallow units — to see, "Hey, am I able to come with you?" I know with COVID and restrictions and transitioning into the era here that we are in, the best thing you can do is actually reach out and ask. Because the best thing they're going to say is yes. And an opportunity is, if they're going to say no, then possibly even using their network to say, "Okay, if you can't help me, do you know of somebody who can?" I think out of all the things, when it comes to really figuring out what you want to do and why you want to become a speech pathologist, is to see who you already know that may already be connected with that field. Maybe a second cousin could be a radiologist, you know? Or maybe your parents' friend actually happened to be a speech-language pathologist, and that never even came up in conversation. Try to use your network. Just like I was explaining, too, I used my father. I have had the opportunity to have a strong relationship with my dad. And he has a large network of medical professionals that has really allowed me to use that appropriately to get knowledge, to gain another connection.

Mattie Murrey

Well, when I've had colleagues who have had a child — actually, a physical therapist —she said, "My daughter's interested in your field. Can she come observe you? Because she's thinking of speech therapy or occupational therapy." So, the daughter arrives, and I'm like, "Oh, look at all the wonderful things we do! We work with peds. We work with adults. We do this. We do that." So, when you connect with somebody, and you say, "Can I come?" and they say, "Absolutely," they are excited to show you what they do.

Maggie Donaker

Absolutely. Absolutely.

Mattie Murrey

And I do know that, with graduate schools, graduate schools across the nation are having to be creative on where they place their students for clinicals. So, as an undergraduate or even a



graduate, if you reach out to a practicing clinician and say, "Can I come and observe you?," that may open the door for some clinical practicum time.

Maggie Donaker

Exactly. Exactly. The best thing to do, actually, is to take that leap and ask the questions. Sometimes, a lot of people are like, "Oh, I'm not sure what they're going to say." And sometimes you actually just have to [ask]. They're going to say what they're going to say, but at least you asked.

Mattie Murrey

Have you heard of the rejection challenge that I do? Well, it's not my idea. There's this really good TED Talk out there, and I don't remember his name, but it's on the Fresh SLP website: The Rejection Challenge. The YouTube link for this TED Talk speaker is in there. And he said, "You know, I noticed that when I went and asked for something and I was rejected, my posture changed. My voice dropped. My language changed. And I looked dejected. And he said, "I took it personally." He said, "We don't need to do that when we're rejected." They don't know us. They're not saying, "Oh, we don't like you. We're not going to give this to you."

So, he took on these little steps, these little baby steps. And he learned that, when he asked for a refill on a pop — when he wasn't sure if refills were allowed or not — he was like, "Okay, thanks anyways." And he learned how to handle the rejection. And I'll tell you, with the podcast and Fresh SLP work, and all of these things I've done, I've asked for some really big asks from some really big speech pathologists. And I get them. And I never would have been brave enough to do those until I had done that rejection challenge and learned [that] it's not me they're rejecting. They can't do it for whatever reason. And so, it's the same with asking for those things. Ask. It's not personal if they turn you down. And that's how you advance a career. Because that's another question. How do you advance a medical SLP career? Well, yes, you work for it. You make those connections.

Maggie Donaker

Yeah. You put in the work. That's the only thing to it. And a lot of people, especially within our realm of the field and so forth, too — even within social media, or the research base, or even publication on podcasts, such as yourself — who are leading the way to really give an even stronger foundation, you had to put in the work. You had to trust yourself. You had to get into those uncomfortable situations. And like you just said, too, you learn to adapt, to shift, [and] to grow from the situation to continue down the path that you would like to go on. That's the same thing I've had to do.

Mattie Murrey

Right. I've had undergraduates come to me. Abby Earle is one of them. People can go back. And she brought a friend on the show. And they just reached out and said, "Hey, we're undergraduates. We have a ton of questions. Can we be on your podcast?" [Those] are people who ask and it's, "Yeah." I don't think I've turned [anyone down]. I had one person who came



from...they weren't a speech pathologist. And I've had people on here who are not speech pathologists but ask. Ask. What settings have you worked in, Maggie?

Maggie Donaker

Sure. So, the different kinds of settings that I have worked in are almost all of them. Actually, I think all of them now, technically — except for a NICU. I've never worked in an NICU, or pediatric swallowing kinds of things. I've had the opportunity to work in LTACHs, acute, [and] subacute. And I'm now currently in my own private practice, which is allowing me to learn and grow the business sides of things, as well as continue on with the treatment aspects and the evaluation aspects that I do enjoy. So, I've worked in quite a few different locations. And it has been a wonderful journey. I think a question, sometimes, that people have is, "How did you choose medical?" or "How did you choose adult?" I will say that, in my undergraduate, I do have a minor in gerontology. So, I've always been connected a little bit with that patient population. I also have been exposed through my father through working in skilled nursing facilities. In regards to that, as I stated before, he is a physical therapist. So, even growing up, I used to go to the nursing homes and kind of walk through there at that time during Halloween and stuff.

So, that was always an experience. But it was a great exposure that I had as a child. And then, in graduate school, I did have the opportunity to work in Waterville Elementary in the Anthony Wayne District, which is kind of close to Toledo, through a connection through Bowling Green State University that I did my Master's program with. And from there, I really had a strong mentor who allowed me to see and really helped me grow in the pediatric realm. But I just didn't have as much of that spark, that connection, that hardcore pull of wanting to work with that patient population. But from the graduate level side, a lot of graduate schools do a pediatric placement or school placement and then a medical placement. Within my medical placement, I had a really unique opportunity to not only work in a skilled nursing facility with Cheryl Grustler. She worked at the Elyria Methodist home. And then, I also worked with Mary Stopherie, who actually worked at Elyria Hospital. So, I not only saw a skilled nursing facility, but I was also working in a hospital during my externship, which then even allowed me to connect to other strong mentors, like Jackie Workman, who worked at Kendall, and then, Carrie Stance, who is a very skilled speech-language pathologist that works with the select specialty hospital LTACHs within Ohio.

And then, also, Mary Stopherie, actually has transitioned into more of a corporate realm in relation. So, I've had a lot of really good foundational knowledge and a lot of exposure to the passion that I have that really kind of pulls me. It's not necessarily that it wakes me up and wants me to go to work, per se, but I have the drive to want to walk through the door and actually help someone. I want to go to work every day and basically give it my all, and then leave it as soon as I'm done. Like, as soon as it's time for me to go, I do the best that I can to bless and release the day — I've done everything that I can — and then continue on with other passionate things that I have, such as being the director of operations for the Dysphagia Outreach Project [and] being one of the facilitators for the Dysphagia Digest of Florida, which is a swallowing support group for individuals with dysphagia. So, I've kind of been pulled in relation to those



things because of a really strong foundational upbringing, I guess, of development through the medical side of SLP.

Mattie Murrey

Not all students have that opportunity. What advice do you have for the student who does not have that foundation from the beginning, or he or she doesn't see it?

Maggie Donaker

Sure. So, I have been very fortunate. I kind of think I've been in the unicorn of situations, where I've had the opportunity to be connected. So, for those individuals that don't have that, you might. It just might be difficult to see. That's why, once again, coming back to what we've already been discussing: reach out to speech-language pathologists. Email. Email the speech path, if you can find their email. If you can, call their office and say, "Hey, I'm interested in doing these things" or "Do you have any recommendations for me?" Another recommendation outside of just reaching out in your area is to look outside of your area. I know, in my CFY, some advice that I probably would have given myself is to actually move. Not everything is in the location you're in. Sometimes you do have to make that effort to either move to a different city [or] drive a little bit farther. If you have that opportunity to do so, seek out what you're looking for. Or even take the CEU courses. I know I've had the opportunity to take quite a few CEU courses, and still to this day, I find that knowledge is so powerful in shaping who you are, but also how you apply research-based treatment and evaluation to our patients. You have to stay on top of it. And even if you don't get that CEU credit — maybe you have the certification, but it doesn't show up on your ASHA transcripts or your state transcripts — you took that for the knowledge, not necessarily to meet that requirement. And that drive is important because that's what's also going to keep you in that hunger of wanting to continue to do the best for yourself as a professional, but also to continue to provide that high-quality care that your patients are wanting.

So, sometimes, you do have to kind of put that work in. Sometimes, you will have to be frustrated that you don't have that. It's okay, frustration. It's there. It's part of life. So, let's grow from it. Can I reach out? Can I really kind of move to certain locations? Can I continue to just keep reaching out and reaching out and reaching out? Sometimes, too, I've heard that people have had situations in the past where they reach out to a job and they don't get the job. However, six months to a year later, that job is still posted or came up again. And they apply again, and then they get in. Continuing to keep going back, sometimes, to certain things may be your path. Or maybe even, too, being open to new things. Recently, especially working with the Dysphagia Outreach Project, [I'm] learning a little bit more about the intensity of pediatric dysphagia. And seeing what families are going through, seeing what even the children are going through, has kind of led to a little bit of a calling that I'm kind of still stifling because I've got so many things going on. I want to get down there, but I'm like, "No, I've got too much stuff. Let's focus on this and then maybe transition to that." But those kinds of things, too. Being open to that. Being aware. You know, reaching out to Casey Lewis, who is very strong in the NICU field



and her passion toward high-quality care. Reaching out to Sarah Bocha, who happens to be a really strong FEES [professional], as well as a private practice owner.

Mattie Murrey

She's been a guest on here.

Maggie Donaker

Yes. Yeah. So, she's also very strong, too. You know, being open to other ideas that maybe you thought you were going to go down, but being aware and present for the journey that you may need to be going toward. So, be open to those opportunities, even if they're not necessarily the ideal. But at least look into them.

Mattie Murrey

Also, look to your state associations. I'm in Minnesota, so I'm the sitting person for the Future Professionals Committee advisor. And we regularly have students and fresh SLPs reach out to us for mentoring. ASHA has a mentoring program. There's a fantastic STEP program out there. I mean, there are some very good programs out there. And also, do vision-boarding and road-mapping. And I know those are kind of like "foo, foo," in the sky. But I have worked the coaching side of Fresh SLP, and I have speech pathologists who, I'm like, "What do you want to do with your career? What do you want to do with your life?" They're like, "Oh, you know, okay." And they first start off with the list of things they want to do, kind of tentative. But then they create these great visions. This is where I want to be. This is who I want to treat. This is what I get excited to go to work for. And at the end of the day, I'm like, "This is the difference I made in the life of somebody." And then they put a roadmap together: Here are the courses I'm going to take. Here are the people I'm going to reach out to. And it is so amazing and just incredible to watch them. Wow, I never thought I'd do these things. And it's because they've dreamed. They've written. They've made those connections, and they've moved forward.

Maggie Donaker

Exactly. Yeah, I had the opportunity to do that back in 2019. I was part of the Medical SLP Collective inner circle. And I invested in myself in order to really learn those skills and really helped sharpen the vision that I had for myself. And absolutely, it has made ridiculous impacts on where I was back then to where I am right now.

Mattie Murrey

Yes. Yes. Ridiculous impact. It's mind-blowing. Some of the gains that speech pathologists have... When you're focused, when you know and clarify what you want to do, lay that foundation, gather that skill set, and then step into that, it's pretty amazing.

Maggie Donaker

Absolutely.



Mattie Murrey

Did you ever have an interview that went badly?

Maggie Donaker

You know, what is the definition of badly? Right? But I have had multiple interviews because of the multiple settings that I have had the opportunity to work in. What comes to mind in relation to that is, I feel as though... I was told once that I was eccentric in an interview or after an interview, when I was actually trying to apply for a major hospital in the Columbus Ohio area, way, way long ago. I actually had to call my husband and be like, "When was I called that again?" But that has kind of stuck with me because what I've done is, I have determined that being eccentric kind of makes you unique. I am my own person. And I have found that it can be displayed badly, I guess, if you're doing things, like physically doing things, but I took it more as a compliment that I do think outside the box as a professional. I have had the opportunity, too, to really see and not necessarily 100% stay in the lines of the constant every day — you know, you do A, then B, then C. I kind of sort of meld them all together. Not necessarily jumble them up, but when I approach a patient or approach a situation, I really try to step back and then project with possibly all the opportunities or all of the outcomes that may or may not happen. And that level of eccentricness has allowed me to position myself and kind of be known in the settings that I work at. [People will say], "If I don't know the answer, maybe Maggie does" or "I want to talk this out with somebody, [and] she would be a great person to talk to." [That's] because of my listening skills. Because of my ability to kind of hear what somebody is saying, and kind of give, "Oh, have you considered this?" or "I like where you're going with that. Where else can you take that?" So, I find that compliment that I got so many years ago, I still use to this day. And that's really kind of part of who I am as a person, as well as a medical speech-language pathologist.

Mattie Murrey

The lesson there is you are being you. And so, when you applied for the job, and they said, "You're eccentric," you had two choices. You can say, "Oh, that's a bad thing. I'm not going to be eccentric, and I'm going to be more cookie cutter." Or you can say, "Oh, thanks for the compliment. Here's where I'm going to go find a place to shine." So, one of the questions I get from students is, "Hey professor, how do I be like the speech paths I see on YouTube?" And I'm like, "Don't. Be you." Learn the skills that you may be learning on remediation of an art because that was where the particular question came from. But go be you. And be you in those interviews. And if you're not called back or offered the position, it's because it wasn't a good fit.

Maggie Donaker

Yeah. Or even, too, expanding upon that idea as well, what about that person do you enjoy? You know, what is it? Is it the fact that they knew the way to rehabilitate to shape that patient? Is there something that you like? Did you like the way that they were on the ground with the patient rather than sitting in a chair and bending down? You know, what about those characteristics do you enjoy that possibly you can reflect upon yourself [and say], "I have those



characteristics. I maybe need to continue to shape and mold how to bring them out more, or maybe how to also apply those skills that I do have to model something similar that you do enjoy." With the mentorship that I've had, I've always enjoyed [that] the speech-language pathologists I've been exposed to have always been very happy — and I mean the happiest people of my life. They are always smiling when they come to work, even if it's a difficult day or a difficult situation. They'll have their little vent sessions in the office and so forth. But as soon as that's done, they're happy-go-lucky walking back out there because they know that they are there to serve the people that they have been hired to serve. They know that they are doing the highest quality of care possible because of all the knowledge that they've gained and have had the opportunity to be exposed to.

That's something, too, that has always been impressed upon me. It doesn't matter [how] difficult the situation that you're in, you've got to stay calm, collected, understand what's going on, and try to see if you can either find the solution yourself or reach out to the people that may actually know the solution, or collaborate with others. That's been a big exposure, too, that I've seen throughout my professional career that I've always wanted to embody. How can I be more pleasant at work? How can I be more approachable at work? I know with the mask and things like that, it's been a little difficult, but I have been told that I have a pretty strong RBF. So, the mask has kind of helped. The mask has kind of helped in relation to that. But I always have remembered, too, from being on a dance team, to try to smile with your eyes. So, those kinds of things have definitely been impressed upon me. So, sometimes, too, searching through... You know, what do you like about a particular speech pathologist that you want to embody? You don't have to be them because you will never be them because you are you. But what techniques or what kinds of things do you enjoy that you maybe want to bring into your practice? Or what passions do they have that you're like, "Oh, how can I get to or gain that skill? What do I need to do in order to get there?"

Mattie Murrey

When I was stepping more into the pediatric realm, I was working with another colleague. And I called her Mary Poppins. She had such a way with the little kiddos. And we were doing pediatric feeding and I'm like, "Oh, I love the way she does this. I'm going to emulate that a little bit more." And so, we do go along in our careers, picking up bread crumbs or colors or whatever analogy you want to use. I bought this great plaque the other day. It's, "Life is like a box of crayons. You want to use every color in the box." I just loved it. And that's kind of the way our careers are. We want to be the best that we can, bringing in all of the things that do make us uniquely you. So, Maggie, those are some excellent points. We're going to ask one more question, and then we're going to stop this podcast recording. And we're going to welcome you and everybody back for part two with Maggie.

Maggie Donaker

Sounds good. Sounds great.

Mattie Murrey

We have so many more questions to go through. And yeah, I just want to spend the time [on them]. You're fantastic.

Maggie Donaker

Oh, thank you.

Mattie Murrey

What has been a challenging situation for you in the medical field?

Maggie Donaker

So, a challenging situation for me within the medical field is having a very strong foundation of speech-language pathologist experience and kind of a standard of care, and then seeing the opposite of that — being a part of the opposite of that. And that has challenged me professionally to navigate difficult situations, if it be different ideologies of care [or] if it be not necessarily approaching a situation as I was understanding that you're supposed to approach a situation. And being open to at least the discussion and having the opportunity to be okay with how I do things. Coming back to the idea of being eccentric, I really try to keep my head down at work because I'm there for the patients. And [I'm] there to also grow my clinical skills and continue to develop as a speech-language pathologist. I don't like to be the center of attention or the part of everybody's discussion, especially when I'm not present. So, those kinds of things, I have really tried to not really want that. Once again, I don't want to be externally eccentric in that way, nor have I been. It has been challenging for me in order to grow from that. I, at times, do get frustrated at work. And that can affect my work progress.

So, I have learned a little bit more about actually physically blessing and releasing things. I got that from Theresa Richards, who is a speech-language pathologist at the Medical SLP Collective, as well as her Swallow Your Pride podcast. And she really kind of helped me conceptualize how to bless and release things — actually physically doing that. And that has really helped me grow as a professional, that I really do have to let that go. And once I actually let that go, I can't really think about that anymore. I've learned what I need to learn from it, and I'm going to continue to move myself forward. So, that has been kind of an interesting aspect of things. But I've also found that, in discussions with my other colleagues in the settings that I work, I have had the opportunities to also inspire them to also feel strongly with how they would like to see things done and to advocate for themselves as much as they can. So, that has been a nice transition in relation to my professional and personal development as a medical speech-language pathologist. So, I still strive to incorporate the research. I still strive and rely on the coursework that I've taken and the coursework I will take in order to, once again, pivotally pinpoint how to impact the patient in that family that needs my care.

Mattie Murrey

Excellent. This is a great place to stop, and we will thank you for your time. And we will welcome everybody back for part two with Maggie. Our next round of questions are going to be a bit



more — what's the word — reflective. It reminds me a little bit of what I take some of my students through. What has been the most memorable patient for you? What words of advice would you give? So, welcome back. Come find us for round two.

