

SWALLOWING OUTLINE

Course objectives

- anatomy
- normal swallow vs. abnormal swallow
- modifications
- safe swallow guidelines

Normal Swallow/Three phases

- Oral
- Pharyngeal
- Esophageal

Dysphagia-

A disruption or abnormal process in any phase of the swallow

At-Risk Populations/Causes

Signs & Symptoms of aspiration

Assessments/Interventions

- Bedside swallow study
- Video fluoroscopic swallow study
- FEES/FEEST

National Dysphagia Diet levels

- NDD1
- NDD2
- NDD3
- Mechanical soft
- Regular diet textures

Safe swallow guidelines

PRE TEST

POST TEST

- | | | | | | |
|---|---|-----|---|---|---|
| T | F | 1. | NPO means nothing by mouth, not even water. | T | F |
| T | F | 2. | A patient with swallowing problems should tilt back to make swallowing easier. | T | F |
| T | F | 3. | If a patient does not cough when swallowing he can swallow without danger. | T | F |
| T | F | 4. | Anyone may change the diet or feeding techniques for a patient on a swallowing program. | T | F |
| T | F | 5. | A meal is not complete until the patient has a clean mouth. | T | F |
| T | F | 6. | A patient's whose voice sounds "gurgly" during eating is in danger of aspirating. | T | F |
| T | F | 7. | Immediately after choking or coughing, a patient should be given something to drink. | T | F |
| T | F | 8. | Water is the easiest substance to swallow and control. | T | F |
| T | F | 9. | Position a bed at a 90 degree angle, fully upright when feeding. | T | F |
| T | F | 10. | The best position for feeding a patient with a swallowing problem is for you to be standing by the weaker side. | T | F |