

Severity	Explanation and SLP interventions	Oral hygiene recommendations
Mild dysphagia	Slight deviance from normal swallow on videofluoroscopy Patient reports change in sensation during swallow No change in diet	Normal oral hygiene – i.e., twice daily with fluoridated toothpaste
Moderate dysphagia	Dysphagia managed by specific swallow techniques Slightly modified diet	Toothbrushing: with high fluoride toothpaste Interdental cleaning: flossing, interdental brushes Frequency: at least twice daily
Severe dysphagia	Potential for aspiration exists Diminished by specific swallow techniques and modified diet Eating time significantly increased Supplemental nutrition may be indicated	
Very severe dysphagia	Significant potential for aspiration Trace aspiration of one or more consistencies on videofluoroscopy Specific techniques implemented to minimise aspiration Supervision during mealtimes May require supplemental nutrition orally or via feeding tube	Toothbrushing: with high fluoride toothpaste Frequency: after each meal If unable to tolerate foaming of toothpaste, use foam-free toothpaste or other measures for severe dysphagia
Aspiration pneumonia	Aspirates 5–10% on one or more consistencies Cough reflex absent or non-protective Alternative mode of feeding required, nil by mouth may be indicated	Toothbrushing: dry/damp, no toothpaste Topical application of fluoride product to remove excess Frequency: at 1–2 times daily
Complete dysphagia	More than 10% aspiration for all consistencies Nil by mouth recommended	

Severity ratings based on classification developed by Waxman et al. (1990)

Oral Health And Dysphagia Assessment And Implementation Of Care

Teressa S. Marshall



Oral Health And Dysphagia Abement And Implementation Of Care:

Primary Care of the Child With a Chronic Condition E-Book Patricia Jackson Allen, Judith A. Vessey, Naomi Schapiro, 2009-06-25 Written by nurse practitioners for nurse practitioners this one of a kind resource provides the expert guidance you need to provide comprehensive primary care to children with special needs and their families It addresses specific conditions that require alterations in standard primary care and offers practical advice on managing the major issues common to children with chronic conditions A consistent format makes it easy to locate essential information on each condition Plus valuable resources help you manage the issues and gaps in health care coverage that may hinder quality care This is the only book authored by Nurse Practitioners that focuses on managing the primary health care needs of children with chronic conditions More than 60 expert contributors provide the most current information available on specific conditions Comprehensive summary boxes at the end of all chronic conditions chapters provide at a glance access to key information Resource lists at the end of each chronic condition chapter direct you to helpful websites national organizations and additional sources of information that you can share with parents and families Updated references ensure you have access to the most current evidence based coverage of the latest research findings and management protocols Four new chapters Celiac Disease Eating Disorders Muscular Dystrophy and Obesity keep you up to date with the latest developments in treating these conditions Autism content is updated with the latest research on autism spectrum disorders including current methods of evaluation identification and management Coverage of systems of care features new information on how to help families obtain high quality and cost effective coordinated services within our complex health care system Easy to find boxes in the chronic conditions chapters summarize important information on treatment associated problems clinical manifestations and differential diagnosis **Pediatric Primary Care - E-Book** Catherine E. Burns, Ardys M.

Dunn, Margaret A. Brady, Nancy Barber Starr, Catherine G. Blosser, Dawn Lee Garzon, 2016-03-02 Get an in depth look at pediatric primary care through the eyes of a Nurse Practitioner Pediatric Primary Care 6th Edition guides readers through the process of assessing managing and preventing health problems in infants children and adolescents Key topics include developmental theory issues of daily living the health status of children today and diversity and cultural considerations This sixth edition also features a wealth of new content and updates such as a new chapter on pediatric pharmacology full color design and illustrations new QSEN integration updated coverage of the impact of the Affordable Care Act a refocused chapter on practice management and more to keep readers up to date on the latest issues affecting practice today Comprehensive content provides a complete foundation in the primary care of children from the unique perspective of the Nurse Practitioner and covers the full spectrum of health conditions seen in the primary care of children emphasizing both prevention and management In depth guidance on assessing and managing pediatric health problems covers patients from infancy through adolescence Four part organization includes 1 an introductory unit on the foundations of global pediatric

health child and family health assessment and cultural perspectives for pediatric primary care 2 a unit on managing child development 3 a unit on health promotion and management and 4 a unit on disease management Content devoted to issues of daily living covers issues that are a part of every child's growth such as nutrition and toilet training that could lead to health problems unless appropriate education and guidance are given Algorithms are used throughout the book to provide a concise overview of the evaluation and management of common disorders Resources for providers and families are also included throughout the text for further information Expert editor team well is well versed in the scope of practice and knowledge base of Pediatric Nurse Practitioners PNP's and Family Nurse Practitioners FNP's

Cumulated Index Medicus, 1993 Health Science Books, 1876-1982, 1982 *British Medical Journal*, 1936 **Working with Dysphagia** Lizzy Marks, Deirdre Rainbow, 2017-07-05 This practical text is indispensable to all clinicians working with dysphagia and is suitable for those involved in a range of settings and with a diversity of client groups With its perspective on everyday working practice Working with Dysphagia fills a gap in an area where practical and workable material is much sought after This book is a useful resource for all therapists ranging from students to specialist as the practical assessment approach and comprehensive management strategies are supported throughout with references of recent relevant research The Implementation and Evaluation of Oral Health In-service Education at Three Elderly Care Facilities Marianne B. DeSouza, 1984 *Dysphagia Assessment and Treatment Planning Workbook* Julie Barkmeier-Kraemer, Rebecca Leonard, 2023-11-27 Created to assist students in speech language pathology graduate programs the Dysphagia Assessment and Treatment Planning Workbook A Team Approach Fifth Edition facilitates knowledge retention and supports skill development as a companion to Dr Rebecca Leonard and Dr Katherine Kendall's Dysphagia Assessment and Treatment Planning A Team Approach Fifth Edition textbook Practical exercises and application activities drawn from Dr Julie Barkmeier Kraemer's experience teaching and training graduate students and colleagues in dysphagia are included in the workbook to increase understanding of and engagement with each chapter in the associated textbook The workbook features quiz questions figure labeling case based problem solving application of videofluoroscopic and FEES measures or ratings and report writing practice Answers or model responses are provided at the end of the workbook for the reader's reference The exercises are designed to clarify and expand on information presented in the textbook and should be of interest not only to students but also to practicing clinicians seeking fresh approaches The activities and questions provided in the Dysphagia Assessment and Treatment Planning Workbook Fifth Edition will help readers improve their understanding and implementation of clinical instruction in the area of dysphagia They have been fully updated to align with the content of the new edition of the textbook Disclaimer Please note that ancillary content including case studies and the bonus chapter are not included as published in the original print version of this book **Assessment of Oral Care Compliance Charting After Educational In-service Intervention and Implementation of Oral Assessment Guide** Kylee Rae Maliwauki, 2021

Background In a macrocosmic view dental care in most countries is expansive and the prevalence of dental caries and oral cancer is elevated throughout the world. Periodontal disease is one of the most common oral ailments. In a microcosmic view oral health comorbidities are increased in individuals older than 18 years in the United States and include periodontal disease and decaying of the teeth. Fortunately the edentulous patient is decreasing in America. On a community level hospital acquired pneumonia HAP affects approximately 200 000 people per year and is the most common hospital acquired infection. Recently on Utah Valley Hospital's 9th floor oral care has been provided to patients only 10.24% of the time putting patient at risk of HAP, malnutrition and joint replacement heart valve replacement infections as well as other comorbidities such as diabetes and periodontal disease.

Framework The frameworks utilized in this study include Kurt Lewin's Change Theory and Iowa evidence based practice model. They guided the implementation of the realization for needed change assisted in asking a question and helped to employ strategies to initiate a culture of change on the specific hospital unit.

Methods This project's objective was to implement an oral care intervention with nursing staff to determine if an increase in oral care compliance for patients could be assessed. An educational in service was provided at which the nursing staff were educated by the project manager and a dental hygienist to assess oral care in the patient's oral cavity. The nursing staff were given a survey to assess barriers to oral care. The Oral Health Assessment Tool was given to nursing staff to assist in assessing the patient's mouth, create oral care goals for the patient throughout the day and chart when oral care was completed. They utilized this tool for two weeks after the initiation of the in service. After which a post project questionnaire was utilized to assess nursing staff opinion of what was beneficial/hindering in this project. Utilization of patient chart audits was utilized two weeks prior to and two weeks after the in service to assess if the intervention showed an increase in oral care compliance.

Findings/Results No significant difference was assessed between the two independent variable groups. With an alpha value of 0.05, $U = 11855.5$, $z = 1.54$ and $p = .12$ it has been found that there was no significant difference between the independent groups and their outcome variable. With this information the null hypothesis cannot be rejected.

Conclusion Patient Outcome Oral care compliance charting did not increase after educational in service and implementation of an oral assessment tool. The main barriers to oral care assessed were lack of time, high workload and low priority. Benefits of this project assessed from nursing staff included implementation of an oral health assessment tool and an educational in service describing oral care necessities. Limitations included COVID 19 patient admissions, nursing burnout and nursing workload. Going forward the inclusion of patient care technicians may be necessary to assess and increase in charting compliance.

Medical Personnel Knowledge of the Frazier Free Water Protocol for Implementation to Dysphagia Patients in Care Facilities Stephanie Darrow, 2015

This study aimed to identify what qualities and characteristics of knowledge and comfort would affect a speech language pathologist's decision to recommend or not recommend a free water protocol as part of a dysphagia patient's plan of care. The knowledge and comfort level of medical personnel of the Frazier Free Water Protocol was analyzed via a survey distributed

to 84 speech language pathologists and 31 nurses Results suggested that speech language pathologists are more inclined to consider implementing a free water protocol to patients who are provided with appropriate oral care and cognitively intact and compliant cognizant to the protocol and its consequences

Oral Healthcare and the Frail Elder Michael I. MacEntee, Frauke Müller, C. Peter Owen, W. Murray Thomson, 2025-05-28 Fully updated reference to clinical knowledge and strategies for effective oral healthcare in frail older adults Taking an evidence based approach with theoretical and clinical knowledge underpinned by the literature Oral Healthcare and the Frail Elder provides a comprehensive reference to management strategies for dental diseases as noncommunicable diseases in older populations The book presents a global perspective with current guidance for clinicians addressing the particular challenges of providing dental care for people who are confronting frailty in old age Reflecting the numerous developments in the discipline since the previous edition was published this Second Edition has been thoroughly updated throughout with 15 new chapters The first section covers background information including demographics social considerations and factors affecting oral health in this population The second half of the book is devoted to clinical management strategies Some of the new topics discussed in this edition of Oral Healthcare and the Frail Elder include Theories and significance of oral health in frailty and oral health related quality of life and the influence of the life course on oral health How sugar tobacco and alcohol initiate and sustain oral diseases as with other noncommunicable diseases into old age Mitigation of dental caries periodontitis gingivitis mucositis and other non communicable diseases of the mouth Infection control communications and tele dentistry mobile dental services and strategies to appraise the usefulness of community based oral healthcare programs With an emphasis on population and public health in the context of non communicable disease the Second Edition of Oral Healthcare and the Frail Elder is an important resource for clinicians dealing with the geriatric population including dentists dental hygienists dental therapists denturists and dental technicians nurses and geriatricians

Oral Wellness: Using Occupational Therapy to Enhance Oral Hygiene Delivery in Long-Term Care Lauryn Banovitz, 2015 Based on current literature oral health in long term care LTC facilities is frequently of low priority and does not follow evidence based best practices Poor oral health reduces the quality of life of older adult residents and patients and can lead to systemic diseases such as cardiovascular disease stroke and pneumonia the leading cause of death in LTC Occupational therapists can play an instrumental role as oral care consultants and educators and can act as resource guides to raise the standards of oral care in LTC facilities This capstone project explored ways in which occupational therapy a profession traditionally designated for interventions targeting activities of daily living ADL can improve oral care in LTC facilities The proposed solution was a comprehensive toolkit to equip occupational therapists to assist LTC facilities in the implementation of an evidence based oral care delivery system The toolkit contained information and forms to establish necessary support structures for oral care such as evidence based policy and practices documentation educational in service materials and a list of specialized skills unique to occupational

therapy During the implementation phase the project was modified to meet the needs of the project facility The project became a site specific educational in service to improve the daily oral care delivery of the certified nurse assistants which was measured for its short and long term effects Results indicated that educational in services may help improve oral care delivery in LTC facilities The project team recommends that future projects include the complete oral care toolkit including the educational in services and a tracking tool to further promote evidence based oral care delivery in LTC facilities

Community Oral Health Patricia P. Cormier, Joyce I. Levy, 1981 **Guidelines for Oral Health Care for Long-stay Patients and Residents** British Society for Disability and Oral Health, Janice Fiske, 2000 *Guidelines for the Development of Local Standards of Oral Health Care for Dependent, Dysphagic, Critically and Terminally Ill Patients* British Society for Disability and Oral Health, Janet Griffiths, 2000 **Dysphagia** Barbara C. Sonies, 1997 There is no doubt that dysphagia must be considered from an anatomical or physiological viewpoint in order to diagnose the condition and develop a treatment plan But today more than ever clinicians must also consider the legal ethical and social issues associated with dysphagia care This book provides a first rate up to the minute understanding of the continuum of care that includes patients families and professionals Readers will also gain a better understanding of the legal risks and ethical considerations in treatment of dysphagia as well as the social and cultural implications of treatment approaches *Oral Health Care for Socially Disadvantaged Communities* Febronia Kokulengya Kahabuka, 2013-01-01 This book gathers the current information on management of common oral conditions and proposes an appropriate package for underdeveloped communities Practical solutions for managing oral conditions in the existing social political and economic context of the developing countries is provided This book is a good reference material for undergraduate and postgraduate students academicians as well as practicing dentists In this book the Basic Package of Oral Care BPOC forms a pillar of the presentation A traumatic Restorative Treatment affordable fluoride tooth paste and relief of oral pain are presented as an essential minimum package of oral care for any community This book advocates home care and outreach programmes to reach the elderly The already existing oral health care delivery system is challenged This book provides evidence based appropriate oral care

Guidelines for Oral Health Care for People with a Physical Disability British Society for Disability and Oral Health, C. Arnold, 2000 **Dysphagia** Teresa S. Marshall, 1999 **Dysphagia Care** Nadine O'Sullivan, 1995 With authority European Division Bissell Healthcare Ltd Winchester Hampshire England Phone 44 962 855248 For further inquiries wholesale quantities Cottage Square Press O Sullivan 706 Rome Drive Los Angeles CA 90065 213 223 8688

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Oral Health And Dysphagia Abebment And Implementation Of Care Introduction

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