

Instrumental Assessments/Orders for Swallowing

OVMC Speech Therapy has two objective swallow studies available: MBSS and FEES. For inpatients, the Speech-Language Pathologist (SLP) needs to see the pt clinically (clinical swallow evaluation) BEFORE the objective swallow study/instrumental assessment in order to determine: 1) is the pt appropriate for an objective study, & 2) which instrumental/ objective study is most appropriate for given the current medical status and GOC/POC. Sometimes may need both studies.

Modified Barium Swallow Study (MBSS) "Fluoroscopy"

*Pt does not need to be NPO before study.

Orders:

IP: Speech Modified Barium Swallow Inpatient
OP: AMB Adult Speech Modified Barium Swallow Outpatient

MBSS looks at the oral-pharyngeal swallow function and minimal upper esophageal function. Examines swallow from oral cavity to cervical esophagus. Completed in Lateral view as well as in A-P view when able.

Advantages:

- Able to observe oral stage of the swallow
- Visualize aspiration/penetration in real time
- Able to observe cervical esophageal stages

Disadvantages:

- Radiation exposure (limited time for exam)
- Requires transportation (study done in Radiology)
- Must be in upright position (size of pt, ability to sit upright)
- Unable to view laryngeal surface anatomy
- Barium is mixed with foods changing viscosity/taste



Flexible Endoscopic Evaluation of the Swallow (FEES) "Endoscopy"

*Pt does not need to be NPO before study.

Orders:

IP: Speech FEES (No under Order for future visit)
OP: Speech FEES (Yes under Order for future visit)

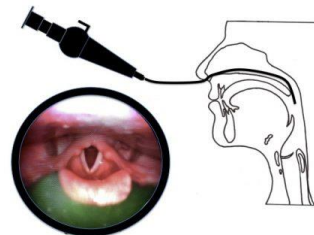
FEES looks at pharyngeal swallow function at the level of the pharynx (superior view of the vocal cords).

Advantages:

- No radiation exposure
- No time limit
- Visualize aspiration/penetration
- High sensitivity to micro-aspiration
- Can be performed on fragile pts that cannot be transferred easily to Radiology or sit upright safely in a chair (e.g. ICU, vent dependent, trach, etc.)
- Direct visualization of tissue/muscles in the larynx
- No alteration in the taste/viscosity of food/liquids

Disadvantages:

- Oral & esophageal stages of the swallow not directly viewed (can make assumptions about what seen in pharynx)
- Pt may not be able to tolerate scope (uncommon)
- "White out" period, cannot see, at moment of swallow



Esophagram/ BA Swallow/ Barium Swallow

Order: RF Esophagram

Speech therapy does not do this exam. Radiology only.

Evaluates swallow function from the pharynx to the beginning of the small intestine for possible esophageal dysphagia, stricture, motility, etc.

A full esophagram and/or esophagogastroduodenoscopy (EGD) are the appropriate medical tests for follow-up when esophageal dysphagia is suspected or present.

Upper GI Series

Order: RF Upper GI

Speech therapy does not do this exam. Radiology only.

An upper gastrointestinal series (UGI) is a radiographic examination of the upper gastrointestinal (GI) tract. The esophagus, stomach, and duodenum (first part of the small intestine) are made visible on X-ray film by a liquid suspension.