

TOPIC:	PROPOSED STRATEGY/ACTIVITY:	TRIGGERS:
<i>ORAL CARE AND MEDICATION ADMINISTRATION</i>	<ol style="list-style-type: none"> Follow guidelines for suction toothbrushing. Dining Plan specifies wheelchair position for all oral intake. All food, fluids and medications are taken orally. Oral care is done in his mealtime position. Gels are preferred method of fluids, however, he can tolerate Honey-thick liquids. 	<ul style="list-style-type: none"> Bottom not back in wheelchair Coughing with signs of struggle (watery eyes, drooling, facial redness) Wet Vocal Quality Vomiting Sudden Change in Breathing Watery eyes Total meal refusals (X 2)-nursing notified. Pocketing of food in mouth Hyper extends neck despite use of compensatory strategies Weight loss/gain of 5lbs in a month
<i>MEAL POSITION AND ADAPTIVE EQUIPMENT</i>	<ol style="list-style-type: none"> Requires assistance for maintaining body alignment in a seated position due to posterior pelvic tilt, spinal stenosis and poor sitting balance. All food, fluids and medications are taken orally. Adapted Tilt in Space wheelchair positioning provides upright positioning. If not in good body alignment, he will be repositioned so that good body alignment is maintained. W/C is used whenever he is fed or given snacks, fluids or medications by mouth. Dining Plan specifies wheelchair position for all oral intake. 	
<i>GENERAL POSITIONING AND WHEELCHAIR POSITIONING</i>	<ol style="list-style-type: none"> Positioning options in positioning program include sitting in adapted TIS wheelchair, right sidelying, left sidelying, prone and supine utilizing mat table and bed. Positioning schedule specifies times and durations for positioning in each position through 24 hour per day cycle ORAL CARE IS DONE IN HIS "MEALTIME POSITION". ATTENDS CHANGES ARE DONE ON BED SLIGHTLY ELEVATED OR ON SHOWER TROLLEY AT 5 DEGREES OF ELEVATION (by design, the trolley provides 5 degrees of elevation) SHOWERING IS AT 5 DEGREES. 	
<i>NUTRITIONAL CONCERNS</i>	<ol style="list-style-type: none"> Total assist for all food and fluid intake. Gels are preferred method of fluids, however, he can tolerate honey-thick liquids. Calorie restricted diet offers smaller portion size. 	
<i>SPEECH ORAL MOTOR CONCERNS</i>	<ol style="list-style-type: none"> Pureed foods Gels are preferred method of fluids, however, M can tolerate Honey-thick liquids. Ignore Head shaking during meal. Cue him to take bite by placing spoon at his lips. See Dining Plan for specifics Dining Plan Staff may touch his chin while verbally cueing him to take a bite, however, he should NOT be forced in any way to eat 	
<i>WHAT TO DO IF YOU NOTICE A DYSPHAGIA TRIGGER</i>	<ol style="list-style-type: none"> Make sure plan (positioning, diet texture, etc) is being followed correctly If not, Correct and look for triggers If triggers continue, notify nursing 	

SE Outreach 8/3/05