

Top Things To Know Dysphagia Screening

1. These proceedings review several dysphagia screening tools while noting one tool may not fit all institutions.
2. Swallowing abnormalities after stroke account for about a 3 times higher mortality rate largely due to pneumonia.
3. Other complications from dysphagia include malnutrition, dehydration, weight loss, susceptibility to other illnesses, and, possibly, death.
4. Between 42% and 67% of stroke patients have dysphagia within 3 days of their event, with 50% of these patients aspirating and about one third developing aspiration pneumonia.
5. Dysphagia screening can be performed by several types of healthcare professionals. This team may include: nurses, physicians, and speech therapists.
6. Specificity and sensitivity of a particular screening tool or evaluation can help a team assess if that tool is correct for a given institution.
7. Building consensus among institution stakeholders can facilitate a stronger team and alleviate possible untoward effects caused by dysphagia.
8. In order to manage dysphagia protocols in the long-run, teams must practice continuous quality improvement to ensure improved patient outcomes.