



Health PEI

# Stroke Distinction: Did You Know?

## Swallowing Screen vs. Swallowing Assessment: the difference between?

**Swallowing Screen:** (screening is used to detect potential health disorders e.g. dysphagia)

- Patients should be screened for swallowing deficits within the first 24 hours of admission to hospital using a valid screening tool. Patients who are not initially alert should be screened when clinically appropriate
- Dysphagia (difficulty swallowing) is not always obvious and aspiration (liquids or solids drop below the vocal folds at the top of the airway) can occur “silently”.

### Swallowing Assessment:

- A bedside swallowing assessment is completed by the Speech Language Pathologist (SLP) only.
- The SLP will formally evaluate patient’s swallowing function in order to determine safety for oral intake
- Based on results of the bedside swallowing assessment, the SLP will determine the need for a Modified Barium Swallow (MBS). An MBS is an x-ray study that evaluates oropharyngeal (mouth and throat) swallowing function.

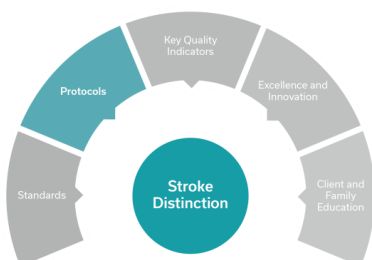
Enhance client experience and improve outcomes

Mitigate risk and increase efficiency

Improve teamwork and communication

## AT HEALTH PEI: Survey Visit October 31-Nov 3

- The TOR-BSST is a swallowing screening tool validated ONLY for Patient with Stroke and used at the Queen Elizabeth Hospital (QEH) and the Prince County Hospital (PCH). This screening tool is administered by a healthcare provider trained in the administration of the screening tool.
- Abnormal results from the swallowing screen (TOR-BSST) prompt a referral to a Speech-Language Pathologist (SLP) for swallowing assessment.



Stroke Distinction Program – Accreditation Canada July 2022

### Questions Accreditation Canada Surveyors May Ask Staff:

1. What is your role in swallowing screening?
2. What education have you received?
3. How do patient and families receive information regarding swallowing difficulties?