FEES SCORE SHEET January 2019

PART 1: Assessment of Anatomy and Movement of Structures

| A. | <u>Velopharyngeal closure</u> ("pa-pa-pa" swallow, etc): ☐ Complete |
|----|--|
| В. | ☐ Incomplete Anatomy ☐ Normal |
| | ☐ Possible pathology that should be seen by a physician, including suspicious mucosal irregularity, unusual shape of anatomical structure, immobility of vocal folds; narrow airway |
| C. | Secretions: |
| | □ No excess secretions □ Pooled in valleculae, pyriforms and/or lateral channels □ Pooled in laryngeal vestibule □ Aspirated □ patient ejects □ no response to aspirated secretions |
| D. | Laryngeal Movements: 1. Respiration (observe rest breathing) Respiratory rate □ even, normal movement of vocal folds □ respiratory rate fast or labored Opening of airway/glottis/vocal folds - (sniff, pant, quick inhalation) □ appears adequate □ reduced airway opening |
| | 2. Laryngeal/airway closure (breath hold, cough, clear throat) ☐ complete closure of glottis/airway ☐ incomplete closure of glottis/airway |
| | 3. Phonation: VF/arytenoid mobility ☐ complete opening and closing movement bilaterally ☐ reduced R L ☐ absent R L |
| | 3. Laryngeal elevation/arytenoids lift (glide way up):□ present□ reduced or absent□ patient did not perform |
| E. | |
| F. | BOT retraction ("Paul is tall") □ present / full range □ reduced or absent R L bilaterally □ patient did not perform |

| G. Pharyngeal wa | all medialization | (slightly | y high pi | tch; effortful | squeeze - or | during | pitch | |
|---|---|--|------------------------------|---------------------------------|----------------------------|---------------------------------------|-------------------|--|
| glide task) | ☐ medializatio☐ medializatio☐ patient did r | n prese n reduc not perfo | nt ed/abse orm | R L ent R L | bilaterally bilaterally | | | |
| H. <u>Sensory-Motor</u> a. <u>Formal</u> | r function Test of Sensation Yes - immed Questionable | <u>n</u> : touch iate res _j e or no | to AE fo ponse respons | olds/ arytenc R e R | oid (LAR or p L L | atient re | sponds) _ _ | |
| b. Inform | al observations o □ Good, as obs □ Reduced/ab | served b | у | | | | | |
| PART 2: | | 20110, 013 | 50011 b y | | | | | |
| Assessment of Swallow | ving (if multiple s | swallow | s seen fo | or 1 bolus giv | en, score the | worst) | | |
| Write in specific food and bolus size (if bolus is repeated, note it) | size location of spillage + | | | Residue in laryngeal vestibule? | Pen/Asp (PAS score) | Time of Pen/Asp Before, During, After | | |
| | | | | | | Penet | Asp | |
| Ice chips | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Thin liquids | | | | | | | | |
| 5ml | | | | | | | | |
| 15 ml | | | | | | | | |
| One sip | | | | | | | | |
| 3 Consecutive sips | | | | | | | | |
| Nectar liquid (if given) | | | | | | | | |
| 5ml | | | | | | | | |
| 15ml | | | | | | | | |
| One sip | | | | | | | | |
| 3 consecutive sips | | | | | | | | |
| Puree | | | | | | | | |
| 5ml | | | | | | | | |
| 15 ml | | | | | | | | |
| | | | | | | | | |
| Semi Solid | | | | | | | | |
| | | | | | | | | |
| Masticated Solid | | | | | | | | |
| | | | | | | | | |

Mixed consistency

Locations: base of tongue, valleculae, lateral channels, piriforms, pharyngeal wall, post-cricoid region, inter-arytenoid space, laryngeal rim, arytenoids, epiglottis, inner walls of larynx, vocal folds, subglottic shelf, trachea

Yale Residue Scale

Valleculae 0 = none 1 = trace/coating 2 - mild 3 = moderate 4 - severe Piriforms 0 = none 1 = trace/coating 2 - mild 3 = moderate 4 - severe

8-Point Penetration-Aspiration Scale (PAS)

2.

- 1. Material does not enter airway
- and is ejected from the airway.Material enters the airway, remains above the vocal folds,

Material enters the airway, remains above the vocal folds,

Penetration

- Material enters the airway, remains above the vocal folds, and is not ejected from the airway.
- 4. Material enters the airway, contacts the vocal folds, and is ejected from the airway.
- 5. Material enters the airway, contacts the vocal folds, and is not ejected from the airway.
- 6. Material enters the airway, passes below the vocal folds, and is ejected into the larynx or out of the airway.

Aspiration

- 7. Material enters the airway, passes below the vocal folds, and is not ejected from the trachea despite effort.
- 8. Material enters the airway, passes below the vocal folds, and no effort is made to eject.

SUMMARY:

Overall, the dysphagia was (mild, moderate, severe)

The primary problem(s) was/were ______

Aspiration occurred on ______(consistency)

An intervention that helped was ______

Recommendation: (diet, posture, exercise, etc.)