

Aspiration Risk Management Assessment Dx Procedures

1. **Comprehensive Aspiration Assessment: areas to consider**
 - a. Oral-motor function and presence of dysphagia (bedside)
 - b. Individual specific signs and symptoms of aspiration
 - c. Saliva management and excessive saliva production
 - d. Oral hygiene practices
 - e. Positioning during oral and tube feeding intake and during routine activities
 - f. Tube feeding related issues
 - g. Adaptive eating and seating equipment needed to promote optimal safety and independence
 - h. Self-feeding strategies/procedures
 - i. Dependent feeding strategies/procedures
 - j. Sensory issues that impact aspiration risk
 - k. Medical issues that impact aspiration risk, including multiple medical diagnoses; gastrointestinal pathologies; history of pneumonia; chronic lung disease; Hiatal hernia; xerostomia; seizure disorder; medication side effects, etc.
 - l. Nutritional status
 - m. Medication Delivery Strategies
 - n. Challenging behaviors during oral and tube feeding intake that may present as safety risks, including rapid eating pace, large bite-size, multiple bites per swallow, food bingeing, rumination, pulling at the tube site, etc.
 - o. Additional activities may be indicated per the judgment of the ARM sub-committee, based upon the needs of the individual.

2. **Consultation or diagnostic procedures to consider**
 - a. Videofluoroscopic swallowing study or other objective assessment measures recognized as an appropriate diagnostic medical procedure as ordered by the PCP or relevant physician specialist, based on ARM sub-committee reports and recommendations
 - b. Gastroenterology and other medical consultations that are determined necessary and ordered by the PCP
 - c. Dental
 - d. SAFE Clinic
 - e. Adult Special Needs Clinic
 - f. Adult Cerebral Palsy Clinic
 - g. Specialty Seating Clinic
 - h. Neurology
 - i. Registered Dietician