

**CLINICAL BEDSIDE EXAMINATION
OF SWALLOWING INSTRUCTIONS:
LIQUID & SOLID TRIALS**

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Instructions

Review these instructions before completing the Clinical Bedside Swallowing Evaluation. Consider printing these instructions to refer to while completing the evaluation.

LIQUID TRIALS. *If patient is NPO, then refer to instrumental evaluation report prior to PO trials.*

- Begin with patient's current liquid consistency.
- Start small and gradually provide larger boluses.
 - Teaspoon.
 - Tablespoon.
 - Regulated straw sips.
 - Cup sips.
 - Consecutive cup sips.
- Observe the following:
 - Labial closure while liquid is in mouth.
 - Hyolaryngeal speed and elevation.
 - Signs and symptoms of dysphagia:
 - Possible bolus holding.
 - Anterior leakage.
 - Multiple swallows.
 - Coughing and/or throat clearing.
 - Respiration changes.
 - Gurgly or wet vocal quality ("Say AH" and "Say EEE")
 - Fatigue.
- Introduce safe swallowing strategies as needed.
- Attempt thinner consistency if the patient demonstrates no or minimal signs of dysphagia.
- Attempt thicker consistency if patient demonstrated signs or symptoms of dysphagia, including, aspiration with current liquid consistency.

SOLIDS TRIALS.

- Begin with the patient's current diet texture.
- Start small and gradually provide larger boluses.
- Observe the following:
 - Mastication adequacy (inadequate, within normal limits, effortful, prolonged).
 - Labial closure.
 - Hyolaryngeal speed and elevation.
 - Signs and symptoms of dysphagia:
 - Possible bolus holding.
 - Anterior leakage.
 - Multiple swallows per bolus.
 - Coughing and/or throat clearing.
 - Respiration changes.
 - Gurgly or wet vocal quality ("Say AH" and "Say EEE").
 - Fatigue.
- Introduce safe swallowing strategies as needed.
- Attempt more advanced diet textures if the patient demonstrated no or minimal signs of dysphagia.
- Attempted less advanced diet textures if the patient demonstrated signs of symptoms of dysphagia, including aspiration, with current diet texture.