## CLINICAL NETWORK FOR STROKE Swallow Screening Guideline

It is mandatory for all individuals presenting with stroke/suspected stroke to have a swallow screen completed within 4 hours of admission and before any food/drink/oral medication is offered. The screening tool is also useful for people admitted with an acute reduction in conscious level or a diagnosis of delirium.

Swallow difficulties (Dysphagia) are present in up to 60% of people admitted with a stroke. The aim of intervention is to minimise complications and to establish a method of eating and drinking that is acceptable to the patient. The acute risks associated with swallowing difficulties are; Asphyxiation and/or choking events, Aspiration pneumonia, Dehydration, and Compromised nutrition and/or medication.

## Procedure can be repeated regularly until the swallowing difficulty has resolved or SLT has been consulted

The outcome, date & time of the Swallow Screening must be documented in the CAD/Medical Notes. You can use the **Swallow Screening Record Form** to do this.

Refer to SLT according to local procedure. Document the date & time of your referral.

