

VIDEOFLUOROSCOPY SWALLOW STUDY REPORT **Date Seen:**

Name:

DOB:

NHS No:

Address:

Background Information:

Reasons for study:

Current nutritional rote: (e.g.Oral, Oral + tube, Tube PEG)

Procedure

include : position (e.g. Upright, Semi-upright, Reclining < 30°, Other)

Seating: (e.g.Tumbleform,)

Feeder: (e.g.Therapist, Parent/Caregiver, Other)

Imaging view: *Lateral, Anterior / Posterior*

Consistencies Assessed: Liquid, Puree, Solid foods, Thin, Smooth, Chewable, Thickened, Lumpy, Textured

Oral Stage:

Pharyngeal Stage:

Oesophageal Stage:

Summary and recommendations:

Specialist Speech and language Therapist – Dysphagia

Date: