# Swallowing and Feeding Disorders in Schools

## Information Summary

### Who is at Risk for Dysphagia?

Swallowing disorders occur in all age groups, from newborns to the elderly and can occur as a result of a variety of congenital abnormalities, structural damage, and neurological disease or disorder. Primarily those at high risk for a swallowing disorder are those who may be identified as:

- Cerebral Palsy (CP)
- Down Syndrome
- Traumatic Brain Injury (TBI)
- Neurological Impairment
- Various Syndromes
- Autism
- Cognitive deficits
- Cleft Palate
- Seizure disorders

### What is Dysphagia?

- Dysphagia is difficulty moving food from mouth to stomach. An impaired swallow of a swallowing disorder results from a breakdown in one of the three phases of the normal swallow: oral, pharyngeal, and esophageal. (Logemann)
- Dysphagia means difficulty in swallowing. (Arvedson)

### What are the Complications of Dysphagia?

Illness related to:
- Dehydration
- Pneumonia
- Under nutrition
- Choking risk

### What Can a District Do?

- System-wide Procedure
- Team Approach
- Implement Procedure with Fidelity

### School-based Core Team

- Speech-Language Pathologist
- Occupational Therapist
- School Nurse

### What are the Signs and Symptoms of Dysphagia?

- Repeated respiratory infections/history of recurring pneumonia
- Poor oral motor functioning
- Maintains open mouth posture
- Dripping
- Nasal regurgitation
- Food remains in mouth after meals (pocketing)
- Coughing/choking during or after meals
- Weight loss/failure to thrive
- Refusal to eat
- Wet or "gurgle" voice/sound after meal