PUI & COVID-19 ∼ Speech Therapy:

** Nursing should provide oral care TID with suction <u>toothbrushes</u> (not foam swabs) during intubation and post-extubation. Research supports frequent oral care with a toothbrush as being a significant factor limiting aspiration PNA for vented (and non-vented) patients.

Clinical Swallow Evaluations	 Wait until the patient is awake/alert and preferably stable on supplemental O2 via nasal cannula or room air. RNs can do a swallow screen (3oz water challenge) If the patient does not pass the screen, order: Speech Language Pathology Clinical Swallow Evaluation If it is the weekend, RN can repeat swallow screen later that day if patient appears improved and/or the next day (no SLP weekend coverage). We recommend waiting 48 hours post-extubation before consulting Speech Therapy for a clinical swallow evaluation after a prolonged intubation. This is to help preserve PPE. Due to prolonged intubation patients will likely need some time post-extubation before the patient is
Dook Franchisco	ready to start PO intake.
Post-Extubation Considerations	* Consider placing an NGT when initially intubating, or if the patient has an OGT place an NGT upon extubation, so there is no gap in the patient's nutrition/ hydration.
Objective Swallow Studies	 We are not performing any objective swallow studies (FEES (endoscopic swallow study) or MBSS (modified barium swallow)) for PUI or COVID-19 patients as the risks outweigh the benefits (high COVID load in nasopharynx, transport needs, and high exposure risk to healthcare workers). We will use our clinical skills to the best of our abilities and see the patients for dysphagia therapy until an objective swallow evaluation can safely be completed, if indicated.
Speaking Valve Assessments	- We will see PUI or COVID-19 patients for speaking valve assessments as indicated and after careful consideration. The SLP team will discuss with the medical team prior to seeing the patient.
AAC/ Alternative Means of Communication/ Communication Aides	 We can assist with alternative communication with this patient population. While it may not make sense for us to use valuable PPE for this kind of consult, we can indirectly assist the RN in trialing some choices and providing a way for the patient to communicate. To order: Speech Language Pathology Evaluation and Treatment Inpatient (Under Special Instructions please indicate for AAC, communication assistance, etc.)
Cognitive-Linguistic & Speech Evals	- Generally non-urgent and thus will not be completed in order to preserve PPE until the pt is COVID negative. The patient can be referred as outpatient as well. If the medical team feels it is an urgent need, please contact us to discuss.
Questions? Contact Us! Monday - Friday, 8am to 4:30pm	We are here to help and happy to support our medical teams in any way we can. Please do not hesitate to contact us. Leanne Pager: 818-529-1308 Ludy Pager: 818-313-1632 Outpatient Speech Therapy Office: x73771