

 <p>Winnipeg Regional Health Authority Office régional de la santé de Winnipeg Caring for Health À l'écoute de notre santé</p> <p>FORM COMPLETION GUIDELINE</p>	<p>Form Name: <i>Referral for Adult Outpatient Communication and Swallowing Assessment</i></p>	<p>Form Number: <i>W-00380</i></p>
	<p>Approved By: <i>WRHA Health Information Mangers Group</i></p>	<p>Pages: <i>1 of 1</i></p>
	<p>Approval Date: <i>March 2011</i></p>	<p>Supercedes:</p>

INTENT/PURPOSE OF FORM

- The Referral for Adult Outpatient Communication and Swallowing Assessment form is to be used by health professionals wishing to refer their patient/client for WRHA adult outpatient Speech-Language Pathology services. This will be facilitated through a central intake process, based out of Deer Lodge Centre and coordinated by the Regional Manager of Speech-Language Pathology.

DEFINITIONS

- Primary Diagnosis – primary medical diagnosis
- Other Medical Problems – other significant health problems which may affect the client's prognosis or ability to participate in a swallowing or communication assessment
- Fiberoptic Endoscopic Evaluation of Swallowing (FEES) – an instrumental swallowing evaluation completed by a Speech-Language Pathologist in which a flexible endoscope with a camera is inserted through the nose to the back of the throat to view a client's swallowing abilities.
- Videofluoroscopic Swallow Study (VFSS) – a procedure that uses videofluoroscopy to obtain a video image of the throat and upper airway during the act of swallowing. A VFSS normally includes a variety of food or liquid textures that are mixed with barium. The study is often administered to determine whether food or liquid is routinely entering the airway, and/or whether food/liquid is fully clearing the pharynx. The study is also administered to determine whether postural adjustments may improve swallowing safety.

USED BY

- Speech-Language Pathologists, Providers, other Health Professionals

GUIDELINES FOR COMPETION OF FORM

1. Complete the client information
2. Complete the referral information
3. Indicate the client's primary diagnosis, other medical problems and results of specific tests completed.
4. Indicate which service is being requested by checking the appropriate box. Note: A Physician's referral is required for swallowing assessments and a Diagnostic Imaging Exam requisition must accompany referrals for VFSS. ENT examination results are required for a Voice Assessment.
5. Provide any additional comments at the bottom of the form.

FILING/ROUTING INSTRUCTIONS

- Form is faxed by referring professional to Central Intake at Deer Lodge Centre.

PRINTING INSTRUCTIONS

- Forms will be available through the SLP Central Intake Office, on Insite, and on the WRHA website (<http://www.wrha.mb.ca/professionals/familyphysicians/referral.php>).

AUTHOR:

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