



安全吞咽方式及注意事项 Safe Swallowing Strategies

姓名 Name: _____ 日期 Date: _____

饮食之浓稠度 Food and drink consistency

- | | | | | | |
|---------|-------------------------------|------------|-----------|-----------------------------|------------|
| 食物 Diet | <input type="checkbox"/> 一般 | Normal | 饮料 Drinks | <input type="checkbox"/> 特浓 | Full Thick |
| | <input type="checkbox"/> 软性固体 | Soft Solid | | <input type="checkbox"/> 半浓 | ½ Thick |
| | <input type="checkbox"/> 切碎 | Minced | | <input type="checkbox"/> ¼浓 | ¼ Thick |
| | <input type="checkbox"/> 浓稠 | Pureed | | <input type="checkbox"/> 稀释 | Thin |

姿势 Positioning

- | | |
|-------------------------------------|-----------------------------------|
| <input type="checkbox"/> 坐正 在椅子上最好 | Sit fully upright (chair is best) |
| <input type="checkbox"/> 下巴稍微往下拉 | Chin tucked slightly down |
| <input type="checkbox"/> 脸转向右边或左边 | Head turn to left/right |
| <input type="checkbox"/> 进食完后半小时内坐正 | Stay upright 30 mins after intake |



吞咽 Swallowing

- | | |
|---|--|
| <input type="checkbox"/> 需从旁协助 | Requires nursing supervision |
| <input type="checkbox"/> 一小口一小口吃 | Small mouthfuls/sips |
| <input type="checkbox"/> 一口食物一口饮料 | Alternate mouthfuls of food and fluid |
| <input type="checkbox"/> 每一口要吞 _____ 次 | Allow _____ swallows per mouthful |
| <input type="checkbox"/> 需要用汤匙 | Use teaspoon/dessertspoon |
| <input type="checkbox"/> 需要用吸管喝饮料 | Use spout/straw for drinking |
| <input type="checkbox"/> 检查是否有食物从口中流到脸上 | Check cheeks for any food pooling in the mouth |
| <input type="checkbox"/> 如果讲话有咯咯声，则应用干吞的方式 | Encourage dry swallows if voice sounds gurgly |
| <input type="checkbox"/> 如果持续咳嗽，哽咽或有咯咯声则不要再喂食 | Stop feeding if there is continued coughing, choking or gurgly voice |
| <input type="checkbox"/> 一餐分几个段落吃完 | Take frequent pauses during meal |

如果有进一步问题，请洽 For further information, please contact the speech pathology department:

语言治疗师 Speech Pathologist: _____ 电话 Telephone: _____