

Eating and Drinking Problem Chart (see instructions on page 6 of Manual for Mealtimes) Factors to Consider Patient's Name and DOB: Environment Preferences care Medication Cognition **Alertness** Helping Sensory Position **Texture** Mouth Reflux **Problems** * ☆ * 众 $\stackrel{*}{\alpha}$ * * Δ Δ Holding food in mouth ☆ ☆ \Rightarrow 众 * ☆ ☆ ☆ ☆ * * Refusing food ☆ ☆ * Eating too fast ☆ * ☆ * ☆ Distractible ☆ \Rightarrow 众 * ☆ Δ ☆ Taking other people's food * ☆ ☆ Walking at mealtimes * * 众 Spitting out food ☆ ☆ \Rightarrow \Rightarrow \Rightarrow 众 ☆ ☆ ☆ * ☆ Sleepy or passive * * * ☆ ☆ Δ * Not aware it's a mealtime \Rightarrow * ☆ ☆ ☆ * * \Rightarrow 公 ☆ * 众 * Not eating/drinking enough 公 ☆ ☆ ☆ ☆ ☆ ☆ ☆ ☆ ☆ Eating very slowly * ☆ 公 ☆ ☆ * Overfilling mouth ☆ ☆ * ☆ ☆ Talking whilst eating ☆ ☆ Tongue thrust * * ☆ ☆ * Swallowing without chewing Difficulty with tablets ☆ \Rightarrow * Food residue in mouth after 公 ☆ ☆ * * swallowing Difficulty getting food or drink 公 * to mouth ☆ ☆ ☆ ☆ ☆ Drooling ☆ Feeling of a lump in the throat ☆ Coughing at night * Lots of mucus in the morning Problems with particular foods ☆ ☆ ☆ ☆ ☆ * * or liquid ☆ ☆ 众 * * * Moderate coughing at meals * * * ☆ ☆ ☆ ☆ ☆ ☆ ☆ ☆ * * Not following advice **Totals** Date: Signature: Environment Preferences Mouth care Medication Cognition **Alertness** Position Print name: Helping **Texture** Reflux Social Pain Designation: Refer to page number