Thin scope (think a piece of cooked spaghetti) enters one side of the nose and views from the top down secretions, anatomy, physiology, food and liquid bolus swallows, and the effectiveness of strategies to manage swallow deficits like weakness and mistiming.

CLEAR AIRWAY

LIOUID IN THE AIRWAY





SDX FEES provides **OPTIMAL** results for acute and post-acute care needs across environments.

Specific populations that benefit from an SDX FEES include people with the following challenges:

- COPD
- CHF
- Feeding Tubes
- Acute or recurrent pneumonia
- Obesity, difficulty positioning or unable to eat when properly upright
- GERD
- Neurological deficits, acute or progressive, include CVA, Parkinson's
- Cognitive impairment, like dementia or Alzheimer's
- Intubation
- Post-cardiac surgery (can cause damage to nerves innervating the vocal cords)

About Us:

Since 1997, **SDX** has provided contract services across CT, and 10 years after expanded into MA and RI as well. **FEES** is a Medicare-reimbursable procedure, and the optimal exam to identify and plan treatment for individuals with pharyngeal and oropharyngeal swallowing problems.

Using real food and continuous recording of the exam, FEES is utilized in rehab and nursing care facilities, hospitals, outpatient centers and even in the community. **SDX** is a nationally recognized trainer of the procedure.

FFFS offers the most realistic look at swallow function over time. Know what you are treating, and avoid unnecessary diet restrictions. Rely on SDX FEES to SHOW you the evidence!



SDX Dysphagia Experts 21 Waterville Rd., Avon, CT 06001 Phone Message Line: 860.677.9755 Fax: 877.522.8016 www.swallowingdiagnostics.net

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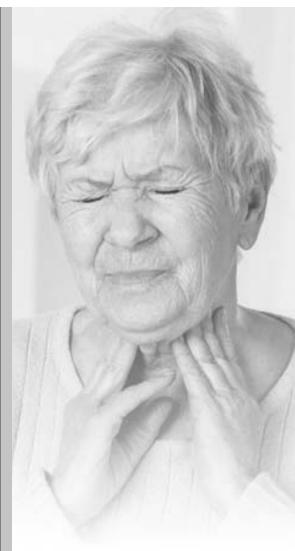
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Making Dysphagia easier to swallow since 1997



SEE the evidence, eliminate the guesswork.

www.swallowingdiagnostics.net



In today's medical environment led by evidencedbased practice, **SDX FEES** provides a realistic instrumental evaluation for definitive, differential diagnosis of functional swallowing problems.

Chew on these facts:

- It is estimated to cost a facility up to \$10 a day to provide pre-thickened nectar thick liquids.
- 1 in 10 people over 50 have a swallowing problem, or dysphagia.
- Nationally, that equals 15 million people. Of that number, 50% are silent aspirators, meaning there is no cough to protect the airway when something goes down the wrong way.
- The prevalence of dysphagia in a hospital is 13-14%, in rehab is 30-35%, and in skilled nursing as high as 40-60%.



Hard to swallow complications of misidentified and undertreated swallow problems:

- Underhydration and Dehydration, which can negatively impact medication absorption.
- Recurrent pneumonia and respiratory disease.
- 60,000 deaths per year are tied to dysphagia-related complications.
- Unnecessary Diet Modifications
- Weight Loss
- Malnutrition
- Choking



An SDX FEES is completed right at the bedside providing testing and biofeedback in the comfort of the resident's room.

SDX FEES Can Help!

- FEES is highly sensitive to aspiration even in trace amounts, and it is the only instrumental test that can evaluate swallowing function even when food or liquid cannot be safely consumed.

 (Compared to the Modified Barium Swallow or MBS, which takes an x-ray using barium for contrast to assess the swallow.)
- **FEES** means better outcomes for your treatment because you can SEE what you are treating, eliminating the guesswork.
- **FEES** are completed in-house, using real food over for real results.



Top 5 reasons to choose an SDX FEES:

- **1.** We test REAL food, not barium. We are able to look at a wide variety of food and drink during the exam, from natural nectars like tomato juice to liquid supplements like Boost to pre-thickened beverages and even carbonated drinks.
- 2. There are NO TIME LIMITATIONS because there is no radiation during a FEES. <u>Our time is unlimited during an exam, meaning we can view a whole meal and assess for fatigue as well as post-swallow problems, even regurgitation in the throat area.</u>
- **3.** We test in true-to-life positions. <u>If a resident eats in bed we can actually test in that position, directly at the bedside.</u>
- **4.** We can assess the airway and management of secretions before feeding. <u>Unlike other tests, FEES can assess if food and liquid trials are appropriate for the person with a severe dysphagia</u>. There is no risk of barium aspiration like in an MBS (Modified Barium Swallow).
- **5.** Our FEES Specialists are experts in dysphagia, and in geriatrics. SDX FEES Specialists are highly trained speech-language pathologists who are respected for their knowledge. We value swallowing safety and quality of life for every person we evaluate.

