

Supplemental Digital Content 1

Evaluation and management of dysphagia in amyotrophic lateral sclerosis: Survey of speech-language pathologists' practice patterns

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Individual answers from the 44 Speech-Language Pathologist respondents to question 4: What dysphagia protocols do/would you use initially in the assessment of patients with ALS?

1. EAT-10
2. I use my own protocol
3. EAT-10, clinical assessments
4. Don't have anything standard we use; cranial nerve exam; sometimes 90 cc water challenge; sometimes PO trials with water, pureed and cracker
5. Clinical swallowing assessment
6. Yale Swallow Protocol
7. Clinical bedside
8. Yale Swallow Protocol
9. A bedside followed by an instrumental exam
10. Clinical swallow evaluation, MBSS
11. Normal bedside evaluation, imaging as indicated
12. Bedside swallow
13. Our own protocol
14. Bedside exam
15. Bedside swallow evaluation
16. My work setting is not listed above: Home Health. Protocol includes: Oral-motor & sensory exam; voice evaluation; bedside clinical swallow evaluation including presentations of food/liquids typically consumed per patient's report; and interview with patient/family/caregivers
17. Clinical evaluation
18. Chairside swallow evaluation
19. Bedside evaluation
20. MASA
21. Clinical assessment, questionnaires, Yale Swallow Protocol
22. BSSE & meal observation
23. Informal/bedside swallow
24. Informal clinical bedside swallow examination
25. BSE, screening such as EAT 10
26. Bedside swallow. MBSS
27. Bedside swallow evaluation

28. Clinical bedside assessment in conjunction with thorough case history; gather information on weight loss, time to consume a meal, symptoms of GERD, etc.
29. Complete interview, case history to determine if prior swallow testing has been completed, OME, subjective clinical bedside and objective assessment
30. Bedside exam/water screening/instrumental
31. None
32. Acute care standard bedside swallow, outpatient MBS
33. MBS or FEES
34. If I were evaluating a patient with ALS, I would utilize a typical oral motor exam and patient report of any swallowing issues and start from there
35. Basic clinical assessment - only when patient complains typically
36. Clinical swallow evaluation
37. An MBS for the initial assessment
38. Clinical evaluation and if necessary then move on to MBS
39. Clinical bedside in form of screening due to time limitations in ALS clinic
40. A complete oral motor, motor speech and clinical swallow evaluation
41. MBS
42. Combination
43. Clinical swallow evaluation, MBS, FEES
44. Bedside swallow evaluation

Authors' note

No corrections made except for legibility (e.g. eval changed to evaluation). Capitalization, punctuation and typos corrected. Otherwise, answers verbatim and content intact.