

A Day in the Life of a Speech and Language Therapist

SLT'S MIGHT CONSIDER HOW COGNITION AND COMMUNICATION INTERACT FOR PATIENTS.

SLT'S MIGHT CREATE COMMUNICATION GUIDELINES TO SUPPORT STAFF AND PATIENTS TO COMMUNICATE AND ENSURE PATIENTS ARE INFORMED AND INVOLVED IN THEIR CARE.

FOR PATIENTS WITH DELIRIUM AND A REVERSIBLE CAUSE OF THEIR COMMUNICATION DIFFICULTIES INVOLVING SLT MIGHT BE INAPPROPRIATE AS WE WOULD EXPECT THE PROBLEM TO RESOLVE WITH MULTICOMPONENT MANAGEMENT OF THE ACUTE ILLNESS.

MOUTHCARE CAN IMPACT PATIENTS SWALLOWING AND COMMUNICATION ABILITIES.

BACTERIA IN PATIENTS MOUTHS POSE AN INFECTION RISK IF ASPIRATED.

MOUTH CLEANSING STICKS CAN BE USED TO CLEAN THE FRONT OF THE MOUTH, AND CLEAN THE MUSCOSA. USING TOOTHPASTE, SMALL AMOUNTS OF WATER AND GELS CAN KEEP PATIENTS MOUTHS CLEAN.

SLT'S CAN HELP WITH CAPACITY ASSESSMENTS ESPECIALLY FOR PATIENTS WHO MIGHT HAVE COMPLEX COMMUNICATION PROBLEMS.

SLT'S FACILITATE PATIENT COMMUNICATION AND EXPRESSION OF LANGUAGE AND ACT AS ADVOCATES FOR PATIENT OPPORTUNITIES TO PARTICIPATE IN THEIR CARE.

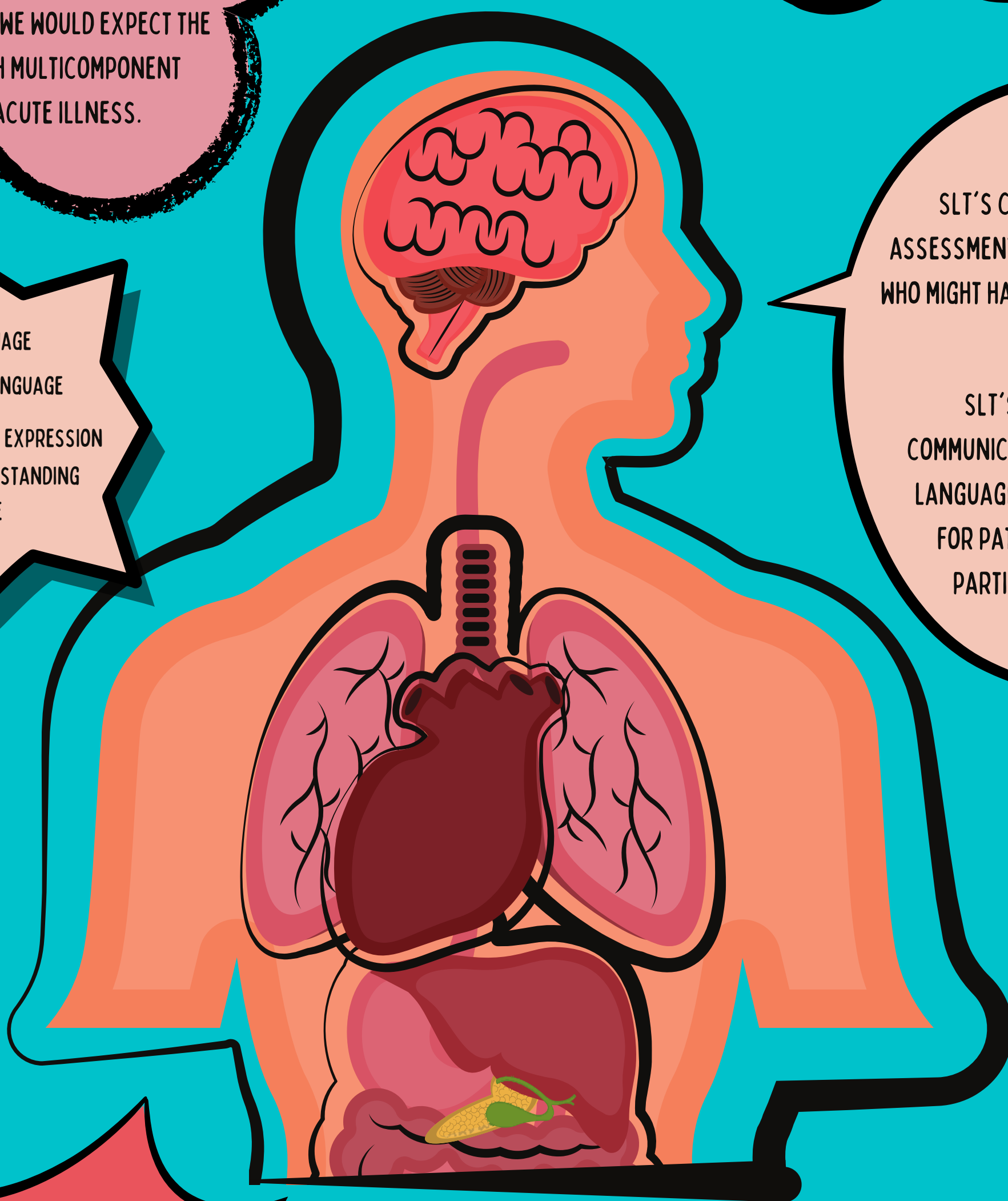
APHASIA: ABSENCE OF SPEECH AND LANGUAGE

DYSPHASIA: DIFFICULTY WITH SPEECH AND LANGUAGE

EXPRESSIVE DYSPHASIA: DIFFICULTY WITH WORD EXPRESSION

RECEPTIVE DYSPHASIA: A DIFFICULTY WITH UNDERSTANDING AND RECEIVING WORDS AND LANGUAGE

DYSPHAGIA: A DIFFICULTY SWALLOWING



NOT ALL PATIENTS WITH SWALLOWING PROBLEMS NEED THICKENER.

EQUALLY STRAWS ARE NOT ALWAYS BENEFICIAL FOR PATIENTS WITH DYSPHAGIA, GIVEN THE SUCKING FORCE AND CONTROL OF FLUID NEEDED WITHIN THE MOUTH BEFORE SWALLOWING.

ALWAYS ASK AN SLT FOR ADVICE BEFORE GIVING THICKENER TO YOUR PATIENTS.

HOW TO MAKE A DRINK WITH THICKENER.

1) MAKE THE DRINK AS NORMAL IN A CUP. THICKENER CAN BE USED WITH WATER, SQUASH, FIZZY AND HOT DRINKS.

2) IN A NEW CUP MEASURE OUT THE ADVISED QUANTITY OF THICKENER

3) ADD DRINK TO THE THICKENING POWDER AND STIRS WITH A FORK. THIS HELPS STOP THE DRINK THICKENING LUMPY AND UNEVEN.

4) YOUR DRINK IS READY