

### **When to recommend FEES?**

- Patient was recently intubated or has risk factors for laryngeal pathologies.
- Pt presents with dysphagia and dysphonia.
- Suspicion of severe dysphagia (FEES is a more conservative test; can assess swallow physiology to inform POC even with a limited bolus).
- Concern for poor management of secretions.
- Examination of tissue integrity, laryngeal structures, post-surgical changes desired.
- Biofeedback/therapeutic exam.
- Suspect fatigue with po intake (i.e. MG) compromising safety/efficiency.
- Analysis of motor/sensory deficits contributing to dysphagia.
- Assessment with specific food/liquid desired.
- Inconsistent performance during meals warranting more comprehensive exam.

### **Logistic/Practical reasons**

- Pt unable to be transported to x-ray.
- Ventilator dependent patient.
- Pt requires modified position to participate in swallow assessment (i.e., semi reclined).
- Contractures/Halo
- Use of Barium is contraindicated.
- Pt size/weight exceed limitations of fluoro equipment.
- Radiation exposure not desired.
- Pt is allergic to Barium.
- Presence of family is beneficial/needed/desired.
- Pt preference.
- Pt requires extended time due to motor/cognitive limitations.
- Fluoroscopy not available.

**To schedule FEES in SoFla: (954) 261-3181**  
**Fax face sheet, Rx, ST eval to:**  
**(888) 828-2757**

### **When to recommend FEES?**

- Patient was recently intubated or has risk factors for laryngeal pathologies.
- Pt presents with dysphagia and dysphonia.
- Suspicion of severe dysphagia (FEES is a more conservative test; can assess swallow physiology to inform POC even with a limited bolus).
- Concern for poor management of secretions.
- Examination of tissue integrity, laryngeal structures, post-surgical changes desired.
- Biofeedback/therapeutic exam.
- Suspect fatigue with po intake (i.e. MG) compromising safety/efficiency.
- Analysis of motor/sensory deficits contributing to dysphagia.
- Assessment with specific food/liquid desired.
- Inconsistent performance during meals warranting more comprehensive exam.

### **Logistic/Practical reasons**

- Pt unable to be transported to x-ray.
- Ventilator dependent patient.
- Pt requires modified position to participate in swallow assessment (i.e., semi reclined).
- Contractures/Halo
- Use of Barium is contraindicated.
- Pt size/weight exceed limitations of fluoro equipment.
- Radiation exposure not desired.
- Pt is allergic to Barium.
- Presence of family is beneficial/needed/desired.
- Pt preference.
- Pt requires extended time due to motor/cognitive limitations.
- Fluoroscopy not available.

**To schedule FEES in SoFla: (954) 261-3181**  
**Fax face sheet, Rx, ST eval to:**  
**(888) 828-2757**

## Flexible Endoscopic Evaluation of Swallowing (FEES)

While FEES is recognized as a Gold Standard for evaluation of dysphagia worldwide, it may be new to you or your facility. At times, lack of familiarity with FEES has led to underuse of a procedure that has proven to be a valuable tool in the evaluation of many patients with dysphagia, across the life span, and across many healthcare settings.

### WHAT IS FEES?

FEES stands for Flexible Endoscopic Evaluation of Swallowing. It is an instrumental assessment of swallowing function, that allows us to directly visualize the patients throat while they are eating and drinking. FEES involves the passage of a small flexible scope through the nares. It is well tolerated by most patients. However extremely agitated patients are not good candidates. FEES is portable and can be completed at bedside. There is no exposure to radiation with FEES.

### WHY FEES IF YOU ALREADY HAVE ACCESS TO VIDEO SWALLOW TESTS?

Both tests are great tools to evaluate patients with suspected pharyngeal dysphagia. You can think of them as you would a CT scan and MRI for the evaluation of a patient with a stroke. Each has advantages and disadvantages, indications and contraindications.

For some patients, a video swallow test may not reveal the reason why a patient is showing signs of aspiration at the bedside or may only show us half of what is causing the symptoms. For instance, only FEES can visualize the presence of an infection such as thrush, reflux related changes resulting in “globus” sensation (i.e. something stuck) reduced mobility of the vocal cords, or the presence of a space occupying lesion affecting the flow of the bolus. Because there are no time constraints due to radiation exposure in FEES, we can administer a larger number of trials, which may be important to reveal the presence of aspiration and/or the pathophysiology of the patient’s dysphagia.

FEES is also a great option when patients refuse or cannot have barium (i.e. allergy, healing wounds in throat or mouth after surgery, perforations in the GI tract, fear of constipation, etc.) or don’t want to be exposed to radiation.

### HOW WILL I KNOW IF THE PATIENT/RESIDENT NEEDS FEES OR A VIDEO SWALLOW TEST?

The speech therapist in your building is likely to know when each one of these tests is indicated. You can also access our FEES vs VFSS guide here: <https://swallowspecialistsfl.com/about-fees/>

### HOW DOES THE FACILITY BENEFIT FROM HAVING FEES?

- Patients do not leave their room, reducing risk for infection and reducing staff required to transport patient.
- Treating SLP present during exam.
- Staff and family may be present during exam for improve patient compliance and staff education on results and precautions.
- Ability to better suit the needs and preferences of patients and families.
- Cost savings range from \$200 to >\$1000 depending on type of service used for video swallow tests.