

Evidence-Based Best Practices: Management of Aspiration Pneumonia Risks

During mealtime, observe residents that are having difficulty processing or swallowing liquids or foods as evidenced by coughing or trying to clear the throat, and report to the appropriate staff.

Be aware of the resident's medication regimen and any medications that can increase gastric reflux such as seizure medication, muscle relaxers, and medications that impair swallowing such as sedatives, hypnotics, and antipsychotic drugs.

Ensure residents are receiving the correct diet including the correct diet texture. Follow protocols/guidelines developed by Occupational Therapists, Speech Therapists, and Physical Therapists such as the use of special feeding equipment, positioning programs (e.g., head of bed elevated) and equipment in addition to diet texture.

Promote meticulous oral hygiene by having the resident brush their teeth three times daily. Residents should obtain regular dental check-ups. Dentures should fit properly and be maintained appropriately.

Residents should be positioned properly for eating and drinking (i.e. wheelchair arms are under the table) to promote independence, prevent aspiration, and minimize fatigue.

Encourage good health habits, proper diet and hygiene, rest, regular exercise, to increase resistance to all respiratory illnesses.

Aspiration can present with the following **symptoms** in residents who are aging and have swallowing difficulties, and in those with neurological impairment:

- A voice change (such as gurgling or hoarseness) after swallowing;
- Severe coughing
- Cyanosis associated with drinking, eating or regurgitation of stomach contents;
- An elevated respiratory rate;
- Fever;
- Chills;
- Pleuritic chest pain; and
- Chest crackles.

Aspiration pneumonia is often under diagnosed and may present only as delirium in residents who are aging and have swallowing difficulties, or in residents with a neurological impairment such as dementia.

Residents who are identified as high risk for aspiration pneumonia should be monitored for symptoms on an on-going basis. Caregivers must use proper hand hygiene in accordance with the CDC hand hygiene guidelines to promote proper infection control.



Quality Monitoring Program <http://www.dads.state.tx.us/providers/gmp/evidence-based-best-practices/nursing-facilities/manage-pneumonia-risks.html>