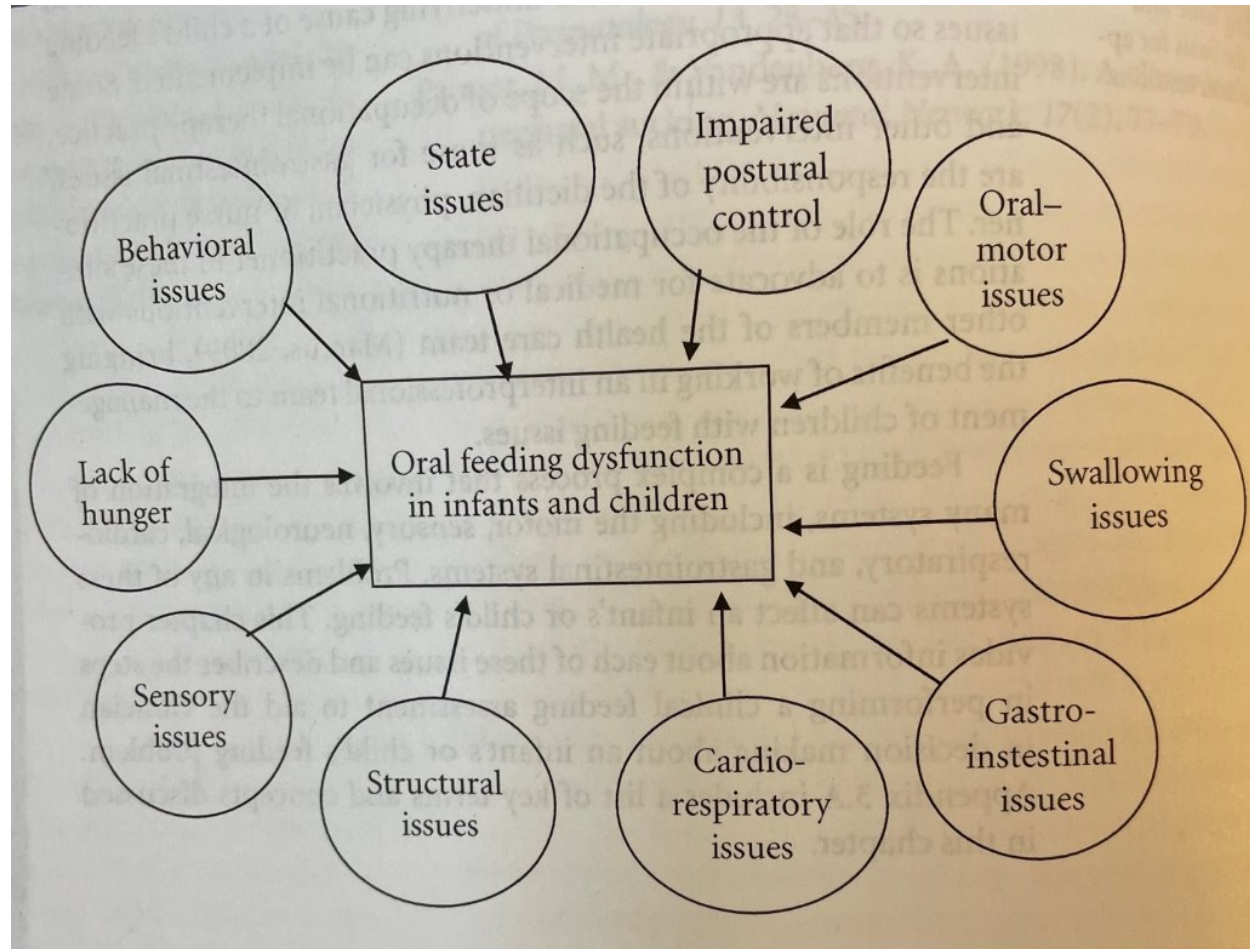
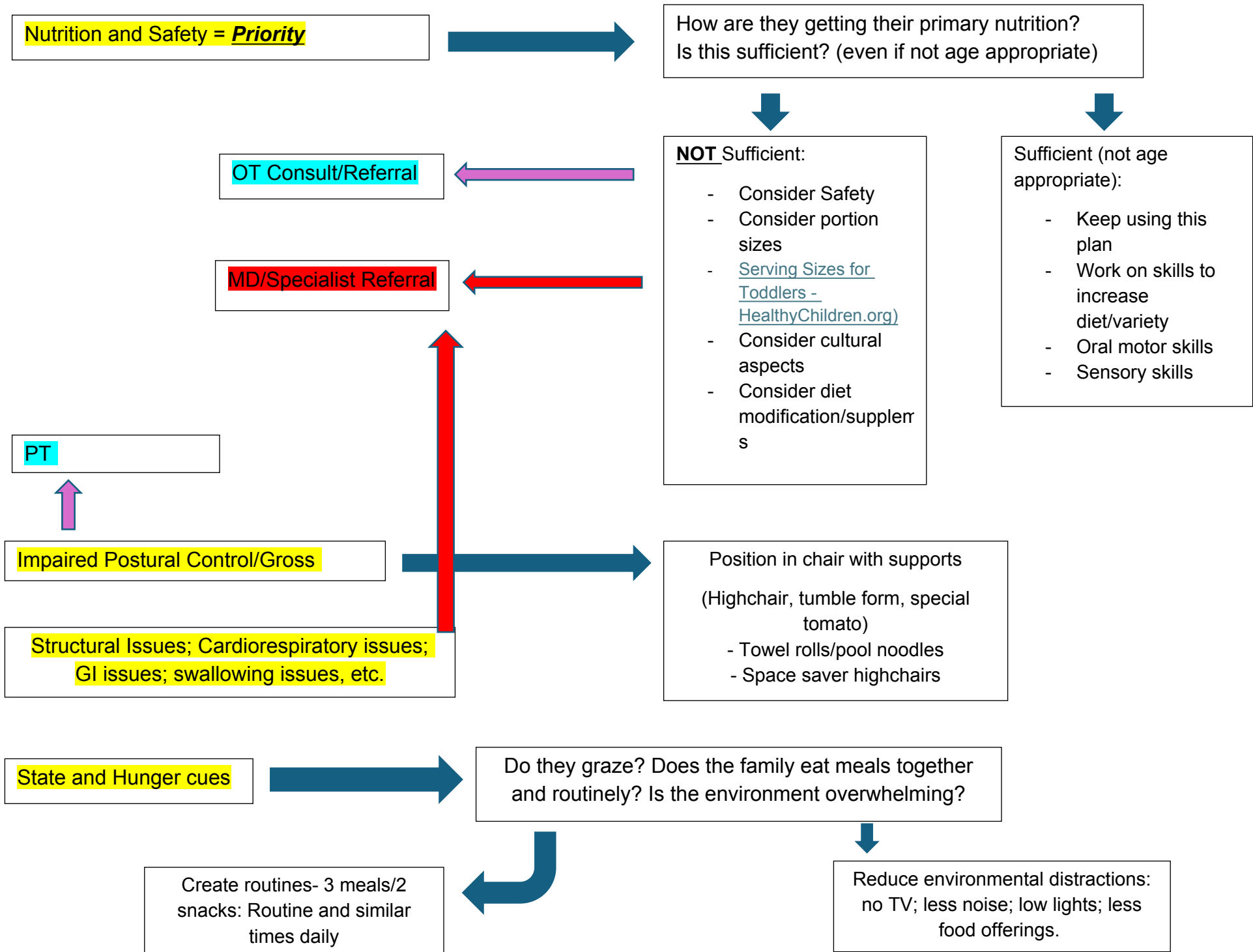


Questions and Decision Tree for Feeding Concerns

Feeding and eating is one of the most complex activities an individual can do. Each component must be considered and function well to engage in feeding/eating happily.





Tube Feeding Concerns

What type of tube do they have?
NG/NJ/G-tube/J-tube

What is the rate/amount/formula?
Pump/Bolus/24-hour



No problems/concerns = continue as usual
with GI follow ups

OT
Consult/Referral



GI Referral

NG/NJ

Swallow study results and follow up? Frequent vomiting?
Rate and flow- bolus feeds could be too fast; amount could be too
much; frequency could be too soon; formula could be wrong or too
heavy.
Unsure? OT Referral or back to GI

G-Tube/J-Tube

Swallow study results and follow up? Frequent vomiting?
Rate and flow- bolus feeds could be too fast; amount could be too
much; frequency could be too soon; formula could be wrong or too
heavy.
Unsure? OT Referral or back to GI

Oral Motor Issues

What you see in the body, you
get in the mouth.

Tight vs. Low tone
Diet modification?



Regular diet
Chopped into small pieces
Shredded
Mashed (Thick)
Purees (food processor)
Unsure? OT referral

OT

TIGHT

Massage cheek muscles (ears to corners of lips) prior to eating and
throughout the day
Massage inside cheeks with Nuk or z-vibe (draw C)
Stretch lips into smile vs pucker
Unsure? Not helping? OT referral

LOW TONE

Looks like: Drooling; open mouth posture; pocketing foods; no chewing
Strengthen: straw drinking; blowing bubbles; kissy faces; tap cheek for
alert to pocketing; chew on chewy tubes
Unsure? Not helping? OT Referral

Sensory Issues

What sensation reaction is occurring?
Over reaction vs. under/no reaction



OT Consult/Referral



OVER REACTION

Looks like: fight, flight, fright (crying, running away, hitting, gagging, covering ears/eyes, chewing on clothes/objects)
Try: reducing stimuli that is triggering; provide appropriate items to chew on; introduce items through play; respect the no; use language to work through vs. hitting;
Foods: similar in color, shapes, texture, taste; bland; room temp; Use positive food descriptions; NEVER hide new food in favorites
Not working? Still need help? OT Referral
ST referral for language help if non-verbal or minimal speech.



ST Consult/Referral



Is there a language delay?



What is the behavior?
Is it consistent? At certain times?



Behavioral Issues

Behavior is communication- What are they trying to tell me?



Try these things first:

Work through reaction if trigger is identified.
Work with language to identify feelings
Introduce foods through play (You can't reason or negotiate with this age group)
Set up family routines- Caregivers should model eating behaviors and actions
Use of rewards- quick and non-electronic based (bubbles, wind up toys, songs)
Encouragement- YOU CAN, not forceful language (YOU HAVE TO)

Not working? Not sure? OT referral

OT Consult/Referral



UNDER/NO REACTION

Looks Like: Sleepiness; boredom; uninterested; distracted
Try: loud music/songs; movement activities; tickle games; bright colors/lights;
Foods: big flavors; spices; cold temperatures; NEVER hide new food in favorites
Not working? OT referral

