

Videofluoroscopic Swallow Study (VFSS): Referral information

What is a Videofluoroscopic Swallow Study?

A Videofluoroscopic Swallow Study (VFSS) is an assessment that uses a moving (dynamic) x-ray image to evaluate a child's swallowing function. This procedure is also known as a Modified Barium Swallow (MBS). The procedure is conducted with speech pathology in the Medical Imaging and Nuclear Medicine Department at the Lady Cilento Children's Hospital. The VFSS shows:

- anatomical structure
- function of the oral and pharyngeal muscles during swallowing
- coordination of swallowing with respiration and airway protection (e.g. aspiration)
- clearance of the bolus through the pharynx into the oesophagus
- the effect of therapeutic positioning and/or swallow manoeuvres.

Why do we conduct Videofluoroscopic Swallow Studies?

A VFSS may be considered if some of the following symptoms occur regularly:

- difficulty swallowing
- coughing or gagging during meals
- choking
- poor saliva management
- wet (gurgly) respiration
- chronic respiratory problems or cough
- very fussy eating behaviours or food refusal.

Referral process

VFSS referrals can only be made by a medical officer (e.g. Paediatrician, Treating Specialist or General Practitioner). Specify that the child requires a **Videofluoroscopic Swallow Study (VFSS) with speech pathology**.

Detail the child's medical condition, presenting symptoms, current means of nutrition (e.g. oral, tube), inpatient/outpatient status and whether the child is likely to have difficulties with compliance or behaviour. Please indicate whether the referral is urgent or routine.

A referral with insufficient or ambiguous information may be protocolled to a different procedure.

If the patient is from a rural, regional or remote area, please indicate any known outpatient appointments or planned inpatient admissions, so that bookings can be coordinated.

- LCCH medical officers can request a VFSS via ieMR Orders, using the following codes:
 - Videofluoroscopic Swallow Study
 - AF Video Swallowing Assess
 - AF Video Fluoroscopy (palate study only)

Please note: Use the search term "video" to find the appropriate codes.

- Non-LCCH medical officers can complete a medical imaging request form or a letter, and fax this to the Medical Imaging and Nuclear Medicine Department. The original request form should be sent in the mail/internal post so that it is received prior to the procedure date and **MUST** be signed by a doctor. Please see contact details below for fax number and postal address.
- LCCH inpatient VFSS referrals **MUST** be discussed with the Clinical Lead Inpatient Speech Pathologist (DECT Phone 5345) as soon as possible, to facilitate timely and efficient scheduling of the procedure.

Clinical assessment

A clinical assessment **MUST** be performed by a speech pathologist prior to the VFSS to determine if the VFSS request is appropriate, to assist with triaging of referrals and to guide planning and goals for the procedure. If there are no clear indicators from the speech pathology clinical assessment for a VFSS, the referrer will be contacted to discuss alternative service options for the patient. Where possible, this clinical assessment should be completed by the child's regular speech pathologist, although an assessment at LCCH can be arranged if required. The speech pathologist will complete a [Pre-VFSS Clinical Assessment Form](#) to guide procedure planning. Please contact the LCCH Speech Pathology Department for a copy of this form.

Wait times

The VFSS Clinic runs on Thursday mornings. Additional appointments can be arranged for urgent cases, inpatients or rural/remote families. There is a high demand for VFSS appointments. Inpatients are seen as soon as possible within the admission, and outpatients are seen at the next available outpatient clinic (this may be several weeks).

How long will it take?

The entire procedure itself will take approximately 45 minutes, including parent feedback. Screening time is usually 2-3 minutes.

How do families prepare for the VFSS?

- The child will need to fast (i.e. not eat or drink anything) for 3-4 hours before the VFSS.
- Special spoons, cups, bottles or teats should be brought along to use during the VFSS.
- Preferred foods and fluids will be discussed with families at the time of booking.
- Carers who are pregnant cannot stay in the x-ray room during the procedure, but another carer can be with the child during this time.
- Children should not wear earrings or clothes with metal press-studs/buttons.

What happens during the VFSS?

1. A small amount of barium (a chalky, white, radio-opaque substance) is mixed with a variety of appropriate foods and drinks. The barium helps to outline the food and fluids more clearly on the x-ray image.
2. The child will be seated in a special supportive chair, and will need to sit as still as possible throughout the procedure.
3. Once the child is in position, the speech pathologist will ask the carer to feed the child a range of different food and/or drinks. If necessary, the speech pathologist or nurse may present the food and drinks.

What happens after the VFSS

The VFSS is recorded, and the speech pathologist and radiologist will review the video immediately following the procedure. The speech pathologist will provide feedback and discuss recommendations with the family, and may review the video with the family if appropriate. The speech pathologist will write a comprehensive report that describes the child's swallowing function. This report will be sent to the referrer, the family, the child's speech pathologist and any other professionals involved.

Contact us

 Department of Speech Pathology
Lady Cilento Children's Hospital
Level 6A, 501 Stanley Street
South Brisbane

 07 3068 2375
 LCCH-Speech@health.qld.gov.au
 www.childrens.health.qld.gov.au