CASE excellence through collaboration
Mary M. Furbush, Ed.D.
Executive Director
290 Town Center Lane
Glendale Heights, IL 60139-1700
Phone 630-942-5600
Fax 630-942-5601

FEEDING AND SWALLOWING TEAM REFERRAL FORM

Date form completed: _____
Student: _____ Date of Birth: _____
School: _____ Classroom Teacher: _____

Please check all that apply:

MEDICAL INFORMATION

☐ Repeated respiratory infections
☐ Vocal cord paralysis
☐ Medical HX of swallowing problems
☐ History of head injury
☐ Receives nutrition through tube feeding
☐ History of recurring pneumonia
☐ Cleft palate
☐ History of GERD
☐ Weight loss / failure to thrive

OBSERVED BEHAVIORS

☐ Requires special diet or diet modification (i.e. baby foods, thickener, soft food only)
☐ Poor upper body control
☐ Poor oral motor functioning
☐ Maintains open mouth posture
☐ Drooling
☐ Nasal regurgitation
☐ Food remains in mouth after meals (pocketing)
☐ Wet breath sounds and/or gurgly voice quality following meals or drinking
☐ Coughing/choking during meals
☐ Swallowing solid food without chewing
☐ Effortful swallowing
☐ Eyes watering/tearing during mealtime
☐Unusual head/neck posturing during eating
☐ Hypersensitive gag reflex☐ Slurred speech
☐ Meal time takes more than 30 minutes
☐ Overstuffing
☐ Food and/or drink escaping from the mouth or trach tube

ADDITIONAL BEHAVIORS

☐ Feeding Aversion
☐ Feeding Jags (eats only one thing)
☐ Limited Eating (only eats a certain amount)
☐ Food Refusal
☐ Spitting up or vomiting associated with eating and drinking

*Adapted from **"Students Eat Safely"** Procedure (Homer, E. 2017)*

CASE
excellence through collaboration
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Glen Ellyn, IL 60137-6957
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Executive Director
630-942-5600, Relay Service 711
Fax 630-942-5601

Additional Information or Comments: _____

_____

_____ _____

Contact Person Name & Email Date

_____ _____

District Special Education Administrator **Signature** Date

Please returned the signed request to:

Tricia Sharkey
Administrator of Student Support Services, CASE
tsharkey@casedupage.com

*Adapted from **"Students Eat Safely"** Procedure (Homer, E. 2017)*