

ASPEKT-C Method Scoring Sheet

Instructions:

- In the “My Patient Values” table below, fill in the blue and peach columns with worst value per parameter per consistency from your **ASPEKT-C Method Worksheet**.
- Use the “*ASPEKT-C Typical Reference Values*” table to compare and determine if “*My Patient Values*” fall under typical or atypical. If at least one value (e.g., PAS) is outside the typical reference values, enter “atypical”.
- If VFSS demonstrates swallowing safety and/or efficiency impairments not explained by the ASPEKT-C Method, consider the full ASPEKT method in Steele et al. (2023).

Core Protocol:

My Patient Values		Mechanism					Mechanism				
		2a. & f. PAS Score & Evolution	2b. LVC Integrity	2d. Time-to-LVC	2e. Pre-swallow Residue	Safety (typical, atypical)	Frequency of Atypical PAS Events	3a. # of swallows	3b. Total Pharyngeal Residue % (C2-4) ²	3c. PhAMPC % (C2-4) ²	Efficiency (typical, atypical)
IDDSI Level											
0	Thin										
2	Mildly Thick										

ASPEKT-C Typical Reference Values ^a		2a. & f. PAS Score & Evolution ^b	2b. LVC Integrity	2d. Time-to-LVC	2e. Pre-swallow Residue ^c	If any of the safety values fall outside the typical reference values, enter atypical .	Comment on the frequency of atypical PAS events (e.g., 1 of 4 trials)	3a. # of swallows	3b. Total Pharyngeal Residue % (C2-4) ²	3c. PhAMPC % (C2-4) ²	If any of the efficiency values fall outside the typical reference values, enter atypical .
IDDSI Level											
0	Thin	1, 2, 4	Complete	< 167 ms	N			1	< 1.7 %	< 2.7 %	
2	Mildly Thick	1, 2, 4	Complete	< 200 ms	N			1	< 2.2 %	< 3.3 %	

Other Observations:

While there are no ASPEKT-C Method typical reference values available for other views (e.g., A/P), consistencies (e.g., minced and moist), or with the use of interventions (e.g., effortful swallow), you may wish to note those other observations below.

IDDSI Level	Swallowing Safety	Swallowing Efficiency

Anterior/Posterior view? Yes/No Vallecular Sinus Residue Asymmetry? _____ Pyriform Sinus Residue Asymmetry? _____

ASPEKT-C Typical Reference Values ^a		2a. & f. PAS Score & Evolution ^b	2b. LVC Integrity	2d. Time-to-LVC	2e. Pre-swallow Residue ^c	If any of the safety values fall outside the typical reference values, enter atypical .	Comment on the frequency of atypical PAS events (e.g., 1 of 4 trials)	3a. # of swallows	3b. Total Pharyngeal Residue % (C2-4) ²	3c. PhAMPC % (C2-4) ²	If any of the efficiency values fall outside the typical reference values, enter atypical .
IDDSI Level											
0	Thin	1, 2, 4	Complete	< 167 ms	N			1	< 1.7 %	< 2.7 %	
1	Slightly Thick	1, 2, 4	Complete	< 234 ms	N			1	< 1.9 %	< 2.5 %	
2	Mildly Thick	1, 2, 4	Complete	< 200 ms	N			1	< 2.2 %	< 3.3 %	
3	Moderately Thick/Liquidised	1, 2, 4	Complete	< 200 ms	N			1	< 1.6 %	< 2.1 %	
4	Extremely Thick/Pureed	1, 2, 4	Complete	< 167 ms	N			1	< 1.5 %	< 1.4 %	

^a Reference values are based on 75thile values for non-cued swallows of 20% w/v barium thickened with xanthan gum in healthy adults. Sip size may be a relevant factor: IDDSI levels 0, 1, 2 were administered by comfortable sip (≥ 10ml); IDDSI levels 3, 4 were teaspoon administered (~ 5ml). https://doi.org/10.1044/2023_JSLHR-23-00246

^b PAS scores of 1, 2 and 4 are considered typical because they are reported to occur in healthy swallowing, and involve no residual material in the laryngeal vestibule after ejection. <https://doi.org/10.1007/s00455-017-9809-z>

^c Pre-swallow residue increases risk of penetration-aspiration on a subsequent swallow and should be considered as a mechanism of impairment, particularly if penetration-aspiration is not explained by atypical LVC parameters. https://doi.org/10.1044/2020_AJSLP-20-00042