

## Validity and Reliability of a Dysphagia Trained Nurse Assessment Tool in Acute Stroke

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### Abstract

**Background:** In the UK, Speech and Language Therapists (SLTs) are the main profession involved in assessing and managing dysphagia. Given the high incidence of dysphagia in stroke, nurses are often trained to screen for dysphagia. The Inter-professional Dysphagia Framework lays out how other professionals can develop competencies beyond screening, to make swallowing recommendations based on a protocol-guided assessment. Some services have developed their own protocols but they are not validated. The Dysphagia Trained Nurse assessment (DTNAX) developed by Derbyshire SLTs is one such tool.

**Objectives:** To test the validity and reliability of the DTNAX for its use in acute stroke.

**Methods:** Ethics was approved by the West Midlands REC and the trial is registered at ClinicalTrials.gov: NCT0370085350. Total 50 eligible consecutively admitted participants are being recruited from the Acute Stroke Unit at Derby Teaching Hospitals NHS Foundation Trust. Participants undergo a series of swallowing assessments within 24 hours; Videofluoroscopy (VFS), SLT clinical bedside assessment and a DTNAX by the same or a different nurse. Eligibility: Inclusion: New stroke, age  $\geq$  18. Exclusion: previous dysphagia, not medically fit. All assessors are blinded to previous test results. VFS is analyzed using the Penetration Aspiration Scale and Modified Barium Swallow Impairment Profile.

**Outcomes:** The primary outcome is criterion-related validity (sensitivity, specificity, positive and negative predictor values) of the DTNAX compared to the gold standard VFS in the acute stroke setting. Secondary outcomes are criterion-related validity of the DTNAX compared to standard SLT assessment, inter and intra-rater reliability.

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