



A guide to...

Videofluoroscopy

Patient Information

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How can this leaflet help you?

You have been given this leaflet because you have a swallowing problem (dysphagia) and you are going to have a videofluoroscopy (VFS). This leaflet explains what a VFS is and how it will help with nutrition and hydration management.

What is a Videofluoroscopy?

A VFS is a moving X-ray that looks at the way your swallowing works. This test gives the speech and language therapist a clearer picture of what is happening in your mouth and throat when you swallow. During the procedure there will be a:

- Radiographer and/or radiologist
- Speech and language therapist
- Assistant to help with feeding.

Why do I need a Videofluoroscopy?

Due to problems with your swallow, there is a risk of food and drink going down the wrong way into your lungs. This is known as 'aspiration'.

Your speech and language therapist has assessed your swallow and recommended a more detailed swallow assessment. The VFS provides an objective view of the efficiency of your swallow, it tells us whether aspiration is occurring and/or potential risk of aspiration and helps to guide a safe re-introduction to eating and drinking if possible. A VFS may also be carried out to:

- Determine whether exercises could help to strengthen the swallowing muscles and explore strategies which could be used to ensure your swallow is safe when eating and drinking
- Help you and your family/significant others, to understand what is happening with your swallow
- Educate you and your family/significant others about the swallow function
- Explore other causes of dysphagia ie, pharyngeal pouch or structural abnormality.

What does the procedure involve?

- Typically, the procedure will last for approximately 30 minutes
- You will be seated in a chair/wheelchair and taken down to the X-ray department by a porter.
- It is not an invasive procedure and you will not need to be sedated.
- The speech and language therapist and the radiographer stand behind a screen. The radiographer may make a few adjustments to the equipment used to gain a clear view before starting the procedure.



- The speech and language therapist will ask you to eat and drink different consistencies of food and liquids. They are mixed with a contrast liquid called e-z-paque and Omnipaque which allows the radiographer and speech and language therapist to view the images clearly on the x-ray, so the food may taste a bit funny.
- You may be asked to try out different strategies to make your swallow safe/ more efficient during the procedure.
- The x-ray will be recorded.

What will happen following the procedure?

The speech and language therapist will analyse the video X-ray and discuss it with you, your family/significant others and the medical team, and provide recommendations for nutrition and hydration management. Not all management options will include eating and drinking.

The speech and language therapist will write a report which will summarise your swallow function and your risk of aspiration. It will include eating and drinking recommendations and potentially a swallow rehabilitation plan. If exercises will help, these will be included in the report. This may take a few days. This report will be uploaded to Electronic Patient Record and a copy will be given to you.

You and your family/significant others may also have the opportunity to sit with the speech and language therapist after the procedure and view the video recording of the VFS to have a better understanding of swallow function and risk of aspiration.

If you would like to discuss further in detail any of the above information, please speak to your speech and language therapist.