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Enjoys travelling,  
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# Myths & Misconceptions in Feeding & Swallowing

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## Disclosures

- None

Myths and Misconceptions in Feeding & Swallowing

## Feeding = Swallowing= Eating

1. True
2. False

Myths and Misconceptions in Feeding & Swallowing

## Myths of Mealtime

- Eating is instinctive.
- If a child is hungry enough, they will eat.
- Eating is easy.
- Eating is a 2 step process: Sit down and eat
- Children don't need snacks.
- Don't play with your food!
- If you like eating too much, you will get fat!

Myths and Misconceptions in Feeding & Swallowing

A 2 year old typically developing, well nourished child gags & vomits with any kind of hard solids, even chunks of fruit in yogurt. Where do you refer?

- A. Dysphagia Study
- B. Occupational Therapy
- C. Feeding Team

### Myths and Misconceptions in Feeding & Swallowing

An 13 month old coughs every time he drinks from any kind of cup. Where do you refer?

- A. Dysphagia Study
- B. Occupational Therapy
- C. Feeding Team
- D. Speech Language Therapy

### Myths and Misconceptions in Feeding & Swallowing

## When to Refer to Feeding Team

- Complex medical & psychosocial issues
- Needs in at least 3 of these areas:
  - Occupational Therapy*
  - Psychology*
  - Speech Pathology*
  - Gastroenterology*
  - Nutrition*
- Help with a feeding tube wean
- Extensive parent education & support needs
- Extensive behavioral component
- Poor response to single discipline treatment

Myths and Misconceptions in Feeding & Swallowing

Which services can assist children with feeding & swallowing problems at RCHSD?

- A. Occupational Therapy
- B. Clinical Nutrition
- C. Otolaryngology
- D. Speech Language Pathology
- E. All of the above

Myths and Misconceptions in Feeding & Swallowing

The best way to desensitize a hypersensitive gag reflex is to elicit it repeatedly.

- 1. True
- 2. False

Myths and Misconceptions in Feeding & Swallowing

Questions?



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Clinical Triage

When in doubt, email, call or page:

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