EAT-10: Eating Assessment Tool For the screening of swallowing disorders



LAST NAME	FIRST NAME			GENDER	AGE	DATE	
OBJECTIVE:							
EAT-10 helps to measure swallow It may be important for you to talk w	ving difficulties. <i>v</i> ith your physician about treatr	nent	options for sympto	oms.			
A. INSTRUCTIONS:							
Respond to each statement by putting a number from 0 to 4 in the box. To what extent do you experience the following problems?							
1 My swallowing problem has cau	ised me to lose weight.	6	Swallowing is p	ainful.			
0 = no problem			0 = no problem				
2			2				
3 4 = severe problem			3 4 = severe prob	lem			
2 My swallowing problem interferes with my ability to go out 7 The pleasure of eating is affected by my swallowing.							
for meals. 0 = no problem			0 = no problem				
1			1 2				
2 3			3 4 = severe prob	lem			
4 = severe problem		0					
3 Swallowing liquids takes extra e	ffort.	8	When I swallow		n my throat.		
0 = no problem			0 = no problem 1				
1 2			2 3				
3 4 = severe problem			4 = severe prob	lem			
4 Swallowing solids takes extra ef	fort	9	I cough when I e	eat.			
0 = no problem			0 = no problem				
1 2			1 2				
3			3 4 = severe prob	lem			
4 = severe problem		40					
5 Swallowing pills takes extra effo	ort.	10	Swallowing is st 0 = no problem				
0 = no problem 1			1				
2 3			2 3				
4 = severe problem			4 = severe prob	lem			
B. TOTAL:							
Add up the number of points and Total (maximum 40 points)	write your total in the boxes	here					
C. WHAT TO DO NEXT:							
If your EAT-10 total is 3 or higher, you physician.	may have problems swallowing e	fficie	ntly and safely. We	recommend discu	ussing the EAT-?	10 results with a	
erence: The validity and reliability of EAT-10 has be essment Tool (EAT-10). Annals of Otology Rhinolog	en determined. Belafsky PC, Mouadeb D	DA, Re	es CJ, Pryor JC, Postma	a GN, Allen J, Leonai	rd RJ. Validity and F	Reliability of the Eating	

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