

Oral Assessment Tool 3

For St. Johns and HODO only

First Name:
 Surname:
 HCR No:

Addressograph

- Use Oral Assessment Tool 1 (for the wards)
- Use Oral Assessment 2 (PICU's)
- Use Oral Assessment Tool 3 (St. Johns and HODU)

Oral Assessment 3

| | Date | Signature | NMBI | Time | | | | | |
|---------------------------------------|--------------------------------|-----------|------|--------------------------------|--|--|--------------------------------|--|--|
| Voice | | | | | | | | | |
| 1 = Normal | | | | | | | | | |
| 2 = Deep or raspy | | | | | | | | | |
| 3 = Difficulty talking/painful/crying | | | | | | | | | |
| Swallow | | | | | | | | | |
| 1 = Normal | | | | | | | | | |
| 2 = Pain on swallowing | | | | | | | | | |
| 3 = Unable to swallow/drooling | | | | | | | | | |
| Lips | | | | | | | | | |
| 1 = Smooth, pink, moist | | | | | | | | | |
| 2 = Dry or cracked | | | | | | | | | |
| 3 = Ulcerated or bleeding | | | | | | | | | |
| Tongue | | | | | | | | | |
| 1 = Pink, moist, papillae present | | | | | | | | | |
| 2 = Coated or loss of papillae | | | | | | | | | |
| 3 = Blistered or cracked | | | | | | | | | |
| Mucous Membrane | | | | | | | | | |
| 1 = Pink and moist | | | | | | | | | |
| 2 = Reddened or coated | | | | | | | | | |
| 3 = Ulcerated +/- bleeding | | | | | | | | | |
| Saliva (Consistency) | | | | | | | | | |
| 1 = Watery | | | | | | | | | |
| 2 = Thick | | | | | | | | | |
| 3 = Absent | | | | | | | | | |
| Teeth (if no teeth, score 1) | | | | | | | | | |
| 1 = Clean & no debris | | | | | | | | | |
| 2 = Localised plaque or debris | | | | | | | | | |
| 3 = Generalised plaque / debris | | | | | | | | | |
| Gingiva / Gums | | | | | | | | | |
| 1 = Pink & moist | | | | | | | | | |
| 2 = Oedematous / redness | | | | | | | | | |
| 3 = Spontaneous bleeding | | | | | | | | | |
| Candida (Thrush) | | | | | | | | | |
| 1 = No | | | | | | | | | |
| 3 = Yes | | | | | | | | | |
| Pain | | | | | | | | | |
| 1 = No pain | | | | | | | | | |
| 2 = Mild Pain | | | | | | | | | |
| 3 = Severe Pain | | | | | | | | | |
| Oral Cavity Total Score | | | | | | | | | |
| Grade 1 = Score 11 - 14 | Grade 2 = Score 15 - 19 | | | Grade 3 = Score 20 - 24 | | | Grade 4 = Score 25 - 30 | | |

Adapted from Eilers et al 1988

Reference: Supportive Care Guidelines Haematology Oncology (OLCHC (2013)



Children's Health Ireland
at Crumlin

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Surname *Addressograph*
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| GRADE | DESCRIPTION | ACTION |
|----------------|--|---|
| Grade 0 | <ul style="list-style-type: none"> • Normal mouth | <ul style="list-style-type: none"> • Oral hygiene as for age twice daily • Oral assessment twice daily |
| Grade 1 | <ul style="list-style-type: none"> • Erythema of oral mucosa. • May have some pain / discomfort | <ul style="list-style-type: none"> • Oral hygiene as for age twice daily • Oral assessment twice daily • Assess pain score • Administer analgesia as required (PO/NG) |
| Grade 2 | <ul style="list-style-type: none"> • Isolated small ulcerations. • Mucosa may bleed on probing. • Saliva is thicker than normal. • Patient may only be able to tolerate bland food but can drink as normal | <ul style="list-style-type: none"> • Oral hygiene as for age twice daily • Oral Assessment twice daily • Assess pain score • Administer analgesia as regularly (PO/NG/NCA/PCA) • Dental review as required • Monitor intake and output • Monitor full blood count |
| Grade 3 | <ul style="list-style-type: none"> • Ulcers and extensive erythema. • White patches covering more than 25% of oral mucosa. • Unable to swallow solid diet. • Saliva thick and ropey. • Hoarse / raspy voice. • Moderate / severe pain. | <ul style="list-style-type: none"> • Oral hygiene as for age twice daily as tolerated • Oral assessment twice daily • Assess pain score • Administer analgesia regularly (NG / IV) • Dental review • Monitor intake and output • Assess nutrition / hydration |
| Grade 4 | <ul style="list-style-type: none"> • Haemorrhagic ulceration • Cannot swallow saliva / drooling • Severe pain • Unable to eat or drink • Hoarse / raspy voice | <ul style="list-style-type: none"> • Oral hygiene as for age twice daily as tolerated • Oral assessment twice daily • Assess pain score • Administer analgesia (PCA/NCA) • Dental review • Monitor intake and output • Assess nutrition / hydration |

| Children >2 years | Children <2 years | Babies without teeth |
|--|---|--|
| Clean teeth at least twice daily using soft toothbrush and fluoride toothpaste (full strength 1450ppmF). Children < 7 years, parents should supervise brushing, and should brush child's teeth on one occasion during the day. | Parent / carer brushes child's teeth twice daily with soft wet toothbrush (no toothpaste) | Parent / carer cleans mouth with moist gauze (water) if needed |