

**Comparative Validity of G-Codes to ASHA NOMS, FOIS, & MASA Scores for Dysphagia**

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**Introduction**

G-Codes are not easy to apply or use to identify the correct code to match the current dysphagia tools

**Purpose**

To evaluate the utility of commonly used dysphagia scales for G-code identification

To compare/cross walk common dysphagia scales: Functional Oral Intake Scale (FOIS), Mann Assessment of Swallowing Ability (MASA) to the Dysphagia ASHA NOMS and G-Codes.

**Participants**

105 dysphagia acute / sub acute stroke cases

**Assessments**

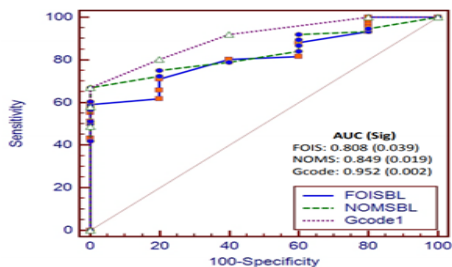
FOIS: Functional Oral Intake Scale, MASA: Mann Assessment of Swallowing Ability, ASHA NOMS: American Speech Language Hearing Association National Outcomes Measurement System, Medicare G-Codes

**Procedure**

Following training, undergraduate judges independently rated cases using FOIS and NOMS codes. In concurrent sessions, graduate level SLP's independently assigned G-Codes to the same cases

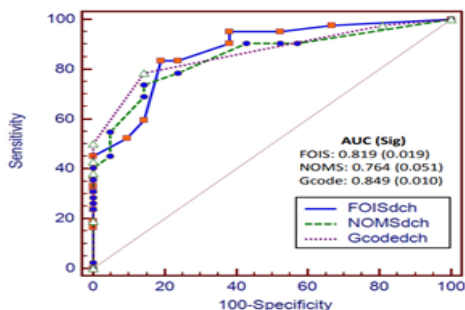
Spearman correlation coefficient "r" and receiver operator curves were constructed to review the convergent validity of the tests

**Results: Admission**



Measures	NOMS	FOIS	G-Codes
MASA	0.623*	0.647*	0.701*
NOMS		0.919*	0.858*
FOIS			0.845*
G-Codes			

**Discharge**



Measures	NOMS	FOIS	G-Codes
MASA	0.832*	0.846*	0.707*
NOMS		0.950*	0.645*
FOIS			0.689*
G-CODES			

**Outcome**

MASA can be effectively utilized to help assign G-codes

FOIS and NOMS scales appear statistically interchangeable.

FOIS is superior to NOMS for discharge coding.

The multi-construct and ambiguous nature of the NOMS can result in a high proportion of % missingness reducing the validity of the tool and decreasing its utility.