

備餐與餵食須知

Instructions on Meal Preparation and Feeding

列印日期： 年 月 日

單位：

05-2756000 分機：

目的： Purpose:

準備及餵食足夠的膳食營養，

可提升免疫力，減低罹病和再住院的機率。

To prepare and feed the patient with sufficient dietary nutrition, which can increase the immune system and reduce the probability of illness and for being hospitalized again.



備餐須知：

Notes on meal preparation:

備餐首重清潔；製作食物請遵照醫護人員建議，依照疾病進展及復健狀況，準備不同餐點（如：流質、軟質、細碎）。

The most important part of meal preparation is cleanliness. Please prepare food by following instructions of the doctors. Different meals (such as: liquid, soft food, and food in small and broken bits) should be prepared according to doctors orders and

patients physical conditions.

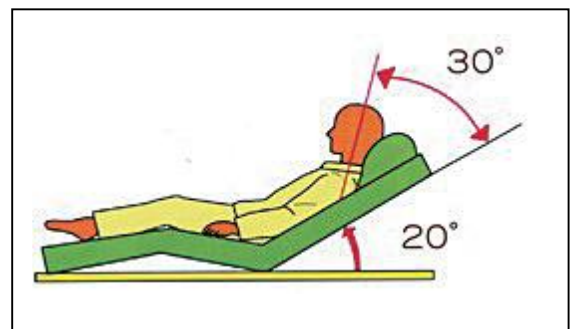
餵食安全原則：

Feeding safety principles:

1. 餵食前須留意病人的意識狀況，若有異狀請勿餵食。

Pay attention to the patient's state of consciousness prior to feeding, and do not feed the patient if there is any abnormal condition.

2. 餵食前應注意被看護人的頭、頸部姿勢，避免平躺或頭部後仰，上半身宜坐正，頭部向前彎約45度，維持食道通暢，避免吸入性嗆傷。



Pay attention to the patient's head and neck posture prior to feeding; posture of lying down or head bending backwards should be avoided. The patient should

sit upright with head bending about 45 degrees forward in order to maintain an unobstructed esophagus and avoid inhalation injury.

3. 餵食時，應以少量食物開始，並確認食物完全吞嚥後，才可以餵食下一口。

The caregiver should start with small meals when feeding the patient, and give another mouthful of food after confirming that food is completely swallowed by the patient.

常見餵食問題：吞嚥困難

Common feeding problems: Dysphagia

1. 吞嚥困難是指食物不易從口腔吞嚥到胃，尤其是流質食物，因此常有噎到的狀況產生。

Dysphagia means that it takes more time and effort to move food or liquid from your mouth to your stomach. Choking often occurs when taking liquid food.

2. 中風、巴金森氏症、口腔癌、鼻咽癌、舌癌等癌症術後合併放射線治療者，是吞嚥困難好發族群。

Stroke, Parkinson's disease, oral cancer, nasopharyngeal cancer and tongue cancer patients after surgery combined with radiation therapy are the group prone to dysphagia.

3. 為避免造成噎到意外，引發吸入性肺炎等併發症，除了注意頭頸部姿勢，食材應以黏稠糊狀為宜，且每口進食的份量不宜過多（每口約20 毫升）。

To avoid any choking accident, which may lead to complications such as respiration, pneumonia, hence, the caregiver should pay attention to the head and neck posture,

and food in sticky paste is more suitable for the patient. The patient should not have excessive oral intake per bite (about 20 ml per mouthful).

4. 食物可利用食物處理機或是食物攪拌棒打碎或使用增稠劑，方便進食。

Food can be smashed using a food processor or food stirring rod, or food can be prepared using the thickening agent to facilitate eating.



主辦單位：臺北市勞動力重建運用處

承辦單位：中華民國家庭照顧者關懷總會

Organized by: Taipei City Foreign and Disabled Labor Office

Sponsored by: Taiwan Association of Family Caregivers

參考資料：

北市勞動力重建運用處(2017). 臺北市外籍看護照顧手冊引自：

https://fd.gov.taipei/News_Content.aspx?n=67945D18DB76BA5D&sms=973FD07C716974AB&s=6B2018866462E18F