

ORAL MECHANISM & FUNCTION EVALUATION

A myofunctional screening tool for school-based Speech-Language Pathologists
based on the FAirEST-6 Sleep Disordered Breathing Tool

Name: _____ Date of Birth: _____

Teacher: _____ Administered: _____

Grade: _____ Age: _____ SLP: _____

District/Building: _____ SLP Contact Info: _____

Posture

Team determined: ☐ The student can have feet flat on the floor when seated

☐ The student can adjust pelvis to improve posture

The student's preferred seated work / listening position: ☐ Upright ☐ Slouched

☐ ONE / TWO knee(s) tucked ☐ Hand supports holding head up

☐ Leaning back ☐ Lean on desk ☐ Sitting on a leg ☐ Head on desk

Complete the remainder of the evaluation when the student is in ideal seated posture:

☐ Forward head position (ear canal is forward of middle of shoulder)

☐ Neutral head position (ear canal is centered on middle of shoulder)

Oral Rest Posture

☐ Lips are open wide ☐ Lips are closed

☐ Tongue rests with tip up ☐ Tongue rests low in mouth

☐ Tongue rests interdentally ☐ Tongue protrudes between lips

☐ Tongue presses against UPPER / LOWER teeth

Breathing

☐ Nasal ☐ Mouth ☐ Mixed Nasal-Mouth

☐ Silent ☐ Audible at rest ☐ Fast, shallow ☐ Slow, deep

☐ Able to pass 3 minute nasal breathing test ☐ Unable to pass 3 minute nasal breathing test

Lips

☐ Close without mentalis strain ☐ Close with mentalis strain

☐ Normal ☐ Dry/chapped ☐ Short upper lip

☐ Poor lip closure /p, b, m/

Palates & Throat

☐ Tonsils are less than 50% of airway ☐ Tonsils are more than 50% of airway

☐ Soft Palate has normal color (not blueish, no ridges suggestive of submucosal cleft)

☐ Tongue can fit within the palate ☐ Tongue unable to fit within palate

☐ High ☐ Narrow: ANTERIORLY / THROUGHOUT

Tongue Range of Motion

Tongue to the Tip: Keeping a wide open mouth, ask student to elevate their tongue to aim toward The Spot (or behind the front teeth)

- ☐ Tongue can elevate at least 50%
- ☐ Tongue elevates less than 50%
- ☐ Floor of the mouth is engaged

Lingual Palatal Suction: Ask the student to create a lingual palatal suction (LPS), then open wide, but maintaining a strong suction)

- ☐ Unable to create a LPS
- ☐ LPS is weak
- ☐ LPS can be held with good range of motion (2 fingers width)
- ☐ LPS requires excessive jaw closure to obtain suction (<2 fingers width)

Tongue splays onto occlusal surface of teeth _____%

- ☐ *if 7mm or more, orthodontic expansion may be necessary to allow space for tongue to position and stabilize for connected speech

Sweep the Molars: Necessary for oral hygiene. Ask the student to sweep their molars. Support motor skills to determine it is not the causing failure, but truly is a lack of range of motion.

- ☐ Able to sweep molars
- ☐ Unable to sweep molars

Tongue Appearance

- ☐ Lingual frenulum is SHORT / HIGH INSERTION (>50%)
- ☐ Pink
- ☐ Coated
- ☐ Pull at tongue tip
- ☐ Midline tension
- ☐ Lingual frenulum tense, visible at rest

Dental

- ☐ Dental wear is not observed
- ☐ Dental wear is PRESENT SIGNIFICANT
- ☐ Diastema: MAXILLA / MANDIBLE
- ☐ Occlusion appears healthy
- ☐ Occlusion concern: OVERJET/RECESSED JAW OPENBITE CLASS III (underbite) CROSSBITE

Behavior Concerns & Observations

- ☐ Inattentive
- ☐ Active
- ☐ Impulsive
- ☐ Easily dysregulated
- ☐ Not engaged
- ☐ Appears tired, lethargic
- ☐ Easily agitated
- ☐ Easily distracted
- ☐ Anxious
- ☐ Excess saliva
- ☐ Picky eating
- ☐ At risk / low performance
- ☐ Withdrawn

Speech-Language

- ☐ Delayed language
- ☐ Speech sound disorder
- ☐ Stutter / Dysfluent
- ☐ Voice disorder or hoarse quality observed
- ☐ Mumbles / Unclear
- ☐ Hyponasal
- ☐ Hypernasal
- ☐ Dentition appears to be affecting articulation
- ☐ Tongue mobility and range of motion appears to be affecting articulation in connected speech