

Calling All Caregivers: A Good Meal is Always on Hand.

Here is The Cooking for Dysphagia System for transforming your kitchen into a dysphagia kitchen.

You are busy. A loved one with a swallowing disorder depends on you. You want the best for the loved one. You don't want to be chained to the kitchen. Here is how to put a meal on the table without cooking all day, everyday.

I gained ideas from my 10 years of research into professional kitchens and chef training in facility kitchens. For ten years I was the award-winning independent publisher of a library of books for dysphagia. My new book *Cooking for Dysphagia* has been published by the Mayo Clinic Press.

This is the book I wish I had when I became my mother's primary caregiver. She was diagnosed with dementia and developed dysphagia. I present The System for Transforming Your Kitchen to a Dysphagia Kitchen.

Remember to always consult your healthcare provider for medical advice.

The Most Important Piece of Information

So you or a loved one has been diagnosed with dysphagia or a swallowing disorder. An SLP has **prescribed your IDDSI level**. This is your most important piece of information. It describes your swallowing capability.

Your foods have to be texture modified to this IDDSI Level from this meal forward.

The first thing to do is establish the menu. This is what you're going to cook.

Ask the loved one. Make a list of 5 or 10 favorite dishes. Include entrees, proteins and vegetables, snacks, including fruits for shakes, vegetables for soups and desserts.

Next, stock the pantry: You will need some of the ingredients for cooking the menu you have just created. Some ingredients you may buy fresh. Your pantry list also contains ingredients for a quick meal or a special request meal.

I have included a pantry list on the page for this course. My list is for a general pantry. Please feel free to add additional ingredients according to the individual preferences in your household.

Tools for the kitchen:

My review of standard kitchen equipment and kitchen appliances follows.

I'm posting a slideshow of general tools for the kitchen plus specialty tools for dysphagia, like a mesh sieve, cheesecloth and a silicone spatula for removing seeds, skin and fibers from food.

Set up your basic puree station.

The puree station includes a mini food processor (3.5 cups) and a blender.

They remain on the counter for convenience. They will be used for preparing food throughout the day.

This is set up on your counter like the sous chef station in a restaurant.

Schedule your cooking day. Make it your least busy day.

Shop.

Before your scheduled cooking day, consult your menu, choose one or two entrees or an entree and two sides. Make your shopping list.

A day in advance, go shopping and get everything you need so you don't have to run out to the store once you start cooking.

Cook.

Modify texture of food and run the IDDSI test, fork and spoon, for your level. (See SLP chapter in the book.)

Store individual servings. Use oven safe glass food storage containers with lids. I also use silicone zip bags that lie flat and save space.

Label. I use masking tape and a sharpie pen. Or post-it notes with scotch tape for securing the label. For silicone bags, I write directly on the bags. Date with the date created and the use by date.

Food should not be stored in the freezer for more than thirty days.

The Whiteboard. Keep track on the whiteboard on the front of the freezer. Enter the amounts created on the whiteboard. And the amounts consumed. You always know what you have on hand. You know what you need to replenish.

Reheat and serve.

That is The System: A balanced delicious meal is always on hand.

The Beauty of Batch Cooking: Cook Once, Eat Five Times

One serving is served on the day of cooking.

One serving goes in the fridge for service within 48 hours.

The extra servings go in the freezer. These are for service within 30 days.

Batch Cooking is the hallmark of the Cooking For Dysphagia System

Caregiver Friendly:

With extra meals stored in the freezer, a backup caregiver, family member or professional caregiver, such as a CNA, can reheat the meal and serve it.

This takes the pressure off the principal caregiver. The principal caregiver gets a night off.

(Note: Often professional caregivers, such as CNAs who come from agencies, are not allowed to do cooking. They may do light cooking, such as reheating and serving.)

Why test?

The purpose of testing is to check the IDDSI Level to prevent choking and to prevent aspiration. The test is for the safe swallow.

(See [webinar](#) on thickening and testing for the IDDSI Levels. Tip: Tools for creating IDDSI Levels 4, 5 and 6--the cutting board, funnel and fork and spoon--are available from Simply Thick and Amazon.)

Food Storage in Individual Servings

Food storage in individual servings promotes food safety because there are no leftovers to grow bacteria.

Use oven safe glass food storage containers with lids. For storing flat, use silicone zip bags. Vacuum sealed bags are a good choice.

Suction vacuum units are available at discount stores such as Walmart, and are inexpensive. Using the vacuum hose, suck all the air out of a bag in which you put the meal and seal. Then label and store in the fridge or freezer.

Keep track of meals-on-hand using a whiteboard placed on the freezer door. I use two whiteboards: one for entrees and sides, one for carbs and desserts.

Mark when you create the dish with the number of servings. Mark when you serve the dish. The boards reflect the content of the freezer.

When you know what you have on hand, you know what you need to cook on your next cooking day.

A point worth making: All of the recipes in Cooking for Dysphagia are for real food.

The recipes are updated family recipes.

This is important in a household where the primary caregiver has to make two separate meals, one for the person with dysphagia **and** one for the family. Especially if the primary caregiver has a full-time job.

For family members, store servings after cooking.

Modify texture for only the servings that are for the person with dysphagia.

One recipe feeds both.

The prep saves time and labor. This was pointed out to me when I did the [Swallow Your Pride podcast](#) with the founder of MedSLP Theresa Richard.

One day of cooking every week is enough to stock the freezer and keep it stocked.

The caregiver no longer has to cook daily.

You are out of the kitchen in a flash, with easy cleanup.

Whiteboards may be purchased in office supply stores or in the home office department of supermarkets and discount stores.

REHEATING INSTRUCTIONS:

Food may be steamed on the stovetop or in a steaming appliance.

Food may also be reheated by boiling method.

STEAM

Steam frozen oven safe covered glass dishes in a steamer until the food reaches 165° F or 180° F breakfast.

This will be 15 to 20 minutes.

Using long tongs, remove the glass dish from the steamer.

Test for temperature with an instant read thermometer.

Perform the IDDSI fork and spoon test for the prescribed IDDSI level. If the test is successful, food is ready to serve.

Note: There is no one time for steaming. Every appliance takes a different amount of time.

For details, please see Karen Scheffler chapter, *Cooking for Dysphagia*.

BOIL IN BAG

For use with water-tight silicone zip bags or vacuum bags.

Boil in a stockpot filled with several quarts of water until the dish reaches the designated temperature of 165°F.

Note: Suction vacuum units are available at discount stores such as Walmart, inexpensively. Using the vacuum hose, suck all the air out and seal.

(See detailed instructions in Sheffler chapter in *Cooking for Dysphagia*.)

Tip: For holding the bags erect while filling with food, use a vase or a tall glass or purchase a cake decorating rack in a cooking or craft store.

Techniques for the Dysphagia Kitchen:

The best techniques for cooking in the dysphagia kitchen are those that render foods moist and tender. steaming, braising, slow cooking, stir frying, and the indoor grill.

(The indoor griddle is good for pancakes).

A gentle roast on the indoor grill is good, especially for vegetables.

For veggies, reduce the heat and extend the cook time. Low and slow is the way to go. Avoid putting a char on food because the char is not safe for the swallow.

Steamed protein is moist and tender, perfect for IDDSI modification.

Standard Kitchen Equipment: A Checklist

I used standard kitchen equipment for years when cooking for my mother.

A stockpot with a colander inside was my stovetop steamer.

(See the slideshow of standard kitchen tools)

Check your kitchen for the following:

The straight vegetable peeler

The Y-peeler

The Knives, Japanese and paring

Chopping board

The Mandoline

Spiralizer

The saucepan

The saute pan

Stock pot

Sheet pan

Colander

The multicooker oven

The 6 to 9 cup food processor

The wireless rechargeable blender

The nutrient extractor or liquidizer

Measuring cups

Mixing bowls

Box grater

Ice cream scoop set, 1 tbsp, small for cookies and pancakes

2 tbsp, medium, for cookies

3 tbsp, large for burgers and cupcakes, for thickening ice cream, stainless steel.

Steaming appliances

If you are going to use an appliance multiple times per week to prepare food, it is worth the investment.

I suggest appliances when they simplify the job and increase the quantity one is able to prepare. They are reasonably priced and available in department stores, discount stores and online.

Here is a list:

Stainless steel multi-tiered steamers for the stovetop

(Stainless steel is preferable to bamboo, the kind of three-tiered steamer familiar in Chinese cooking, because stainless steel may be washed in soapy water. Bamboo is an organic material and may breed bacteria.)

The Instant Pot has a steam setting. So do electric pressure cookers.

Multicookers (such as those by Ninja) have steaming inserts.

A wok, either stovetop or electric, that comes with a stainless steel steaming insert.

Some electric steamers have multiple chambers for steaming several different items at the same time. These have separate timers.

A rice cooker is good for cooking whole grains such as quinoa, buckwheat, millet and farro. It is also good for cooking lentils. I found a 2 quart rice cooker by Curtis Stone on sale, with variable settings. It makes excellent whole grains. These are nutritious and flavorful as side dishes when prepared with the 5-5-5 method, otherwise known as the Mix and Match. I walk you through batch cooking in class 2. It may be ordered on the [Cooking For Dysphagia website](#).

Sous-vide method: Immersion Cooking is another way to cook in the dysphagia kitchen:

Place protein in a zip bag with the air forced out. Immerse in a water bath. Set the temperature and the timer. Let it cook.

Proceed with labeling and storage, as with The System.

Shopping for appliances:

A visit to a bricks and mortar store will help you determine the price, size, features and capacity that are right for your kitchen. Determine which appliance best suits your storage space, an important but often overlooked factor.

Food storage containers:

I recommend oven safe glass storage containers with lids for individual portions. Leave about a third of the container unfilled, because liquids expand when freezing.

The ratio of protein to sauce for puree is a cup to a cup and a half of protein to a quarter to a half cup of sauce. This is for a dish that does not have its own sauce, such as a pot roast or chicken pot pie. The amount of the entree depends on the appetite of the diner. Some people have bigger appetites than others.

The glass food storage containers are available in sets at holidays and can be purchased at the best price at that time.

You will need vacuum sealed bags for use in the boiling bag method of reheating.

Soupercubes are good for freezing small quantities of sauce and gravy to amplify the flavor of soups and stews. Available online.

I avoid air fryers because they are designed to create a crisp outside and a tender inside, a texture not recommended for the safe swallow.

The Cooking Day:

Schedule the cooking day, ideally your least busy day. I used to cook on the weekend.

Shop the day before and get everything you need.

Assemble all of your food storage containers.

Cook.

Modify the Texture.

Test.

Store.

Reheat and Prepare to Serve.

The Beautiful Plate:

Piping: For the beautiful plate- pipe beautiful shapes on the plate by snipping the edge of a zip bag.

You can purchase piping nozzles from cooking supply stores. These make a variety of shapes. These offer variety.

It is easy to see why a person with a swallowing disorder would lose interest in food if every meal looked the same. We eat with our eyes.

To make a beautiful plate: cut off the corner of a silicone zip bag. Pipe the food onto the plate, shaping the food to look like food.

You do not want every meal to look like a bowl of oatmeal.

You can pipe and freeze shapes, such as carrot shapes, or broccoli shapes.

Piping is a way to involve children, to let them help with preparing food for the loved one with a swallow disorder.

Some home cooks prefer to use food molds. This is up to individual choice. The molds are available online. The most common shape is a cutlet shape, used for protein.

See the beautiful plate chapter by Andrew Cullum in *Cooking for Dysphagia*.

The Startup Period

In the transformation of your kitchen, you will have a startup period. It takes a little time. The Cooking for Dysphagia System is the roadmap for a smooth transition.

There are startup expenses.

Once the tools are in place and the pantry is stocked, and the food storage containers are on hand, and the filling of the freezer has commenced, the startup period ends.

The System saves time, labor and money.

The System is adaptable for the 15 million people that live with dysphagia.

My philosophy of food is, Food is medicine, food is love.

As R.D. Dr. Denise Pickett-Bernard says, “The healing power of food created with love should never be underestimated.”

As Sam Sifton, the former managing editor of the food pages of the New York Times, says: “Deliciousness Matters. It makes a person feel cared for.”

Cooking for Dysphagia has been endorsed by eminent healthcare providers as a reliable resource to recommend to patients and caregivers at the time of diagnosis or for maintenance. It is a road map for transforming their kitchens.

As SLP Mary Spremulli, Founder of Voice Aerobics said, "As a speech language pathologist who has witnessed the distress of patients and their families when trying to adapt to a modified diet, I highly endorse and welcome this book as a resource for patients and the professionals who serve them."

This class is an introduction. For in depth information, please see my book *Cooking for Dysphagia and Other Swallowing Disorders*.

Buy it on Amazon and Barnes & Noble, and wherever books are sold.

Please contact me with questions.

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Cooking for Dysphagia uses the [Healthy Eating Plate](#) of the Harvard Chan School of Public Health. Former head of nutrition Dr. Walter Willett contributed the foreword to my book.

Cooking for Dysphagia connects you the reader with links to the latest and the best information. Please sign up for the newsletter for updates. Medical research is progressing at a rapid rate. The latest information changes.

For a free webinar, *Transforming Your Kitchen to a Dysphagia Kitchen*, please click [here](#).

I do this work in memory of my mother, the late great Cathie G, with the hope that the system that I created for her will be a benefit to others.

Disclosure: I do not have commercial sponsorships. I am not a spokesperson. I am a critic. My evaluations are product reviews.