Supplementary material to article by R. Kokuwa et al. "Recovery of cognitive and behavioural function during longterm inpatient rehabilitation in patients with moderate-to-severe traumatic brain injury: Evaluation of a retrospective case series"

Table SII.	Dysphagia	Severity	Scale	(DSS)
Tuble offi	Dyspinagia	Sevency	Scule	(000)

Score	Definition	Diet
7. Within normal limit	No symptoms of dysphagia	Regular diet
6. Minimum problem	Some symptoms of dysphagia, but no need for rehabilitation or exercise	Softened rice and food
5. Oral problem	Significant symptoms in the pre-oral anticipatory stage or oral stage without aspiration	Softened rice and food or paste food
4. Occasional aspiration	Possible aspiration or aspiration suspected due to pharyngeal residue	Dysphagia diet, regular diet, or use of intermittent oral catheterization
3. Water aspiration	Aspiration of thin liquids; change in food consistency is effective	Dysphagia diet, thick liquids, or use of intermittent oral catheterization
2. Food aspiration	Food aspiration with no effect from compensatory techniques or food consistency changes	Tube feeding or gastrostoma
1. Saliva aspiration	Unstable medical condition due to severe aspiration of saliva	Tube feeding or gastrostoma