**The Impact of an Oral Care Protocol on Post-Stroke Survivors: A Pilot Study**

Maintaining oral health is a routine part of daily personal health practices. During hospitalization, oral care practices may not be considered a high priority, and organ care is often viewed by nursing staff as a comfort measure rather than a therapeutic nursing intervention. Moreover, oral cavity assessment is not part of routine nursing practice. Dysphagia in association with changes in oral flora that occur because of severe illness, puts patients who have experienced a stroke at high risk for aspiration pneumonia. Adequate oral care to reduce oral pathogens may reduce the risk of aspiration pneumonia. The purpose of this stratified randomized control pilot study is to determine the impact of a 10-day oral care program among impatient rehabilitation post-stroke survivors with dysphagia. Subjects in the intervention group will receive a systematic oral care protocol that includes use of a battery operated toothbrush, flossing and antiseptic mouth rinse. Outcome measures will include mucosal colonization rates of *Staphylococcus aureus* and Methicillin Resistant *Staphylococcus aureus*, alteration in the oral cavity, oral intake of food and fluid, severity of dysphagia and perceived quality of life. Repeated measures analysis of variance (ANOVA) will be used to examine differences in alterations in the oral cavity, oral intake of food and fluids, and severity of dysphagia between the control and intervention groups. ANOVA will be used to evaluate differences between perceived quality of life in the two groups. A logistic regression will be used to predict mucosal colonization rates and newly acquired nosocomial infections. Age, sex, gender, type of stroke, and severity of stroke will be treated as covariates in these models.