

- Obtain actual weight (bed scale), and height.
- Administration of nutrition support in accordance with orders.
- Inform clinicians for any signs of EN or PN intolerance.

### Medical Team



### 24 hours of admission:

- Calculate NUTRIC score.
  Generate dietary referral order via
- Initiate appropriate nutrition path.



### Dietitian

- Assess the patient within 24 hours of admission.
- Design a nutrition intervention plan in HIS.
- Monitor nutrition status and tolerance and update nutrition plan as needed.

# Pharmacist 👺





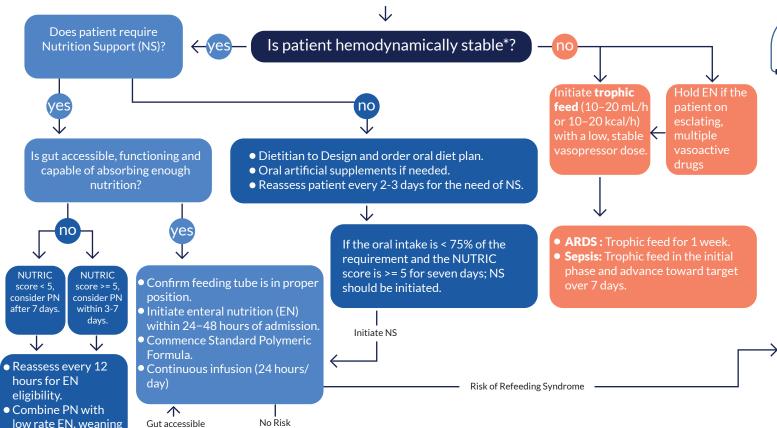
# \* Hemodynamicly stable

Defined as adequate perfusion pressure, stable doses of vasoactive drugs, stabilized or decreasing levels of lactate and metabolic acidosis, and mean arterial pressure ≥60 mm Hg)



## **Nutrition Support Care Pathway for Critically III Adult Patients**





### Rate advancement

NUTRIC score > = 5 : Start NS and advance

• toward goal within 48 hours.

of Refeeding Syndrome

and functioning

∠ EN Tolerance

<60%

for 7-10 days

down PN while increasing EN as per dietitian's specific

nutritional care plan.

Initiate Supplemen-

tal Parenteral

Nutrition

**NUTRIC score < 5 :** Target rate to be • achieved over the first week of admission.

### Monitoring tolerance of EN:

• Assess complaints of abdominal pain, distension, or passage of flatus and stool.

Risk of aspiration

Postpyloric tube

### Think risk of refeeding syndrome if

### Patient has 1 or more of the following:

- RMI less than 16 kg/m2
- Unintentional weight loss greater than 15% within the last 3 to 6 months
- Little or no nutritional intake for more than 10 days
- Low levels of potassium, phosphate or magnesium before feeding.

#### OR

#### Patient has 2 or more of the following:

- BMI less than 18.5 kg/m2
- Unintentional weight loss greater than 10% within the last 3 to 6 months
- Little or no nutritional intake to more than 5 days
- A history of alcohol abuse or drugs including insulin, chemotherapy, antacids or diuretics

### Managment of Patient with Risk of Refeeding Syndrome

### Before EN/ PN starts:

- Supplement with thiamin 200-300 mg for 7 to 10 days.
- Vitamin B Complex: 1 tablet daily or IV full dose.
- Multivitamins or trace elements once daily.

#### Initiate EN / PN

- Starting nutrition support at a maximum of 10 kcal/kg/day
- Advance toward target rate over 4-7 days.

Rehydrate carefully and supplement or correct level of potassium, phosphate, calcium and magnesium.

Electrolytes should be measured 2-3 times a day if serum phosphat < 0.65mmol/l or drop of > 0.1 mmol/l, and supplement if Potassium, magnesium and phosphate should be measured at least once a dar for the first week

#### Abbreviations:

NS: Nutrition Support (Enteral and Parenteral)

HIS: Hospital Information System

EN: Enteral Nutrition

PN: Parenteral Nutrition BMI: Body Mass Index

**ARDS:** Acute Respiratory Distress Syndrome