POLICY:
All patients will be screened by nursing for nutritional risk within 24 hours of admission using predetermined nutrition triggers.

PURPOSE:
- To identify patients at nutritional risk so that nutritional intervention may be provided in a timely manner
- To allocate nutrition resources to patients at nutritional risk.
- To initiate nutrition intervention to reduce length of stay

PROCEDURE:
1. Nursing will screen all patients within 24 hours of admission using the predetermined nutrition triggers during the completion of the initial patient admission database.

2. Predetermined nutrition triggers based on age or admission location:

RN Nutrition Screening Triggers - General Acute Care Patient Population:
At admission, check Nutrition Screening Triggers for each patient. Contact the Food and Nutrition Services Department if any triggers are identified.

- Have you recently lost more that 10# without trying?
- Have you been eating poorly because of a poor appetite for more than 2 weeks?
- Do you have any wounds that are not healing?
- Do you have a feeding tube, received tube feeding, or TPN over the past month?

RN Nutrition Screening Triggers - Pediatrics:
At admission, check Nutrition Screening Triggers for each patient. Contact the Food and Nutrition Services Department if any triggers are identified.

- Does the child have failure to thrive (grow) or failure to gain weight appropriate for age?
- Does the child have intolerance to an oral diet (such as poor sucking ability) or feeding intolerances (excluding gastroenteritis)?
- Does the child have a feeding tube, or receive tube feeding or TPN?
3. The clinician will complete a nutrition intervention for all patients identified at potential nutrition risk via the nutrition screening mechanism within one day of referral.

4. A multidisciplinary performance improvement monitor will be conducted to evaluate the effectiveness of the screening policy and procedure.

ATTACHMENTS:
( Unit specific forms used in hospital medical records. )

REFERENCES:


