Name of Policy: Enteral and Parenteral Nutrition
Policy Number: 3364-104-310
Department: Clinical Nutrition
Approving Officer: Director of Nursing/CNO
Responsible Agent: Chief Clinical Dietitian
Scope: Clinical Nutrition

Effective Date: 2/20/17
Initial Effective Date: 8/2002

(A) Policy Statement
The role of Clinical Nutrition Services in the provision of enteral tube feeding and parenteral nutrition is defined.

(B) Purpose of Policy
To provide guidelines for provision of nutrition in a form which the patient is able to tolerate.

(C) Procedure
1. All patients placed on tube feeding or parenteral nutrition will be assessed and followed as a part of the nutrition care process. A dietitian will estimate nutritional needs, including calorie, protein, and fluid requirements and make recommendations in the Medical Record.

2. Central and peripheral parenteral nutrition is ordered by the physician and/or RD (with CNSC privileges) and supplied by Pharmacy Services.

3. Ready to use enteral products are available per hospital formulary and dispensed by Central Services. A dietitian may order enteral nutrition products RE: appropriate formula for tube feeding or oral supplementation. (Policy 3364-104-210 Medical Nutrition Therapy Order Writing Privileges for Dietitians)

Approved by:

Michele Lovett, RD, LD, CNSC
Chief Clinical Dietitian

Moneca Smith, MSN, RN
Director of Nursing/CNO

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6/2005
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2/9/17

Next Review Date: 2/20/20

Policies Superseded by This Policy: