

**OLIVE VIEW-UCLA MEDICAL CENTER
POLICY & PROCEDURE**

**NUMBER: 223
VERSION: 2**

SUBJECT/TITLE: ADULT PARENTERAL NUTRITION - ROLE DELINEATION

POLICY: Adult patients will receive appropriate assessment, re-assessment, administration, monitoring, and evaluation while they are receiving parenteral nutrition (PN).

PURPOSE: To delineate the roles of health professionals involved in the care of patients receiving PN and to provide general guidelines on PN use and monitoring.

DEPARTMENTS: All (except Neonates)

DEFINITIONS: Parenteral Nutrition is the practice of providing nutrition intravenously. This method of feeding is used typically in cases where the gastrointestinal tract is not adequately functioning. Parenteral nutrition can be total parenteral nutrition (TPN) or peripheral parenteral nutrition (PPN).

PROCEDURE: The Olive View-UCLA Medical Center Parenteral Nutrition Order form will be used for ordering both TPN and PPN.

The Pharmacy and Therapeutics Committee, Pharmacy Department, and/or the Nutrition Advisory Committee will evaluate the parenteral nutrition products yearly or as needed.

Provider

1. Determines the level of nutrition support and writes the orders.
2. Monitors patient metabolic and electrolyte status during nutrition support therapy.
3. Consults the registered dietitian prior to the initiation of PN.
4. Interacts with other healthcare providers involved with nutrition support to ensure continuity of care provided to the patient.
5. For patients discharging with home PN, notifies Home Health service to ensure continuity in administration and monitoring.

Registered Dietitian

1. Assesses patients for appropriateness of PN.
2. Estimates nutrient needs.
3. Monitors and documents patient responses to the nutritional care plan and makes changes to the care plan accordingly.

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Registered Dietitian continued

4. Facilitates and monitors transitional feeding regimens.
5. Recommends parenteral formula.
6. Interacts with other healthcare providers involved with nutrition support to ensure continuity of care provided to the patient.
7. Educates patients on PN.
8. Participates in discharge planning.
9. Provides outpatient follow-up when appropriate.

Inpatient Pharmacist

1. Provides information and makes recommendations on PN products, compatibilities, dosage considerations, adverse effects, special formulations, and clinical appropriateness.
2. Reviews, verifies, and transmits PN orders daily to Centralized Admixture Pharmacy Services (CAPS Pharmacy).
3. Monitors lab values daily of patients receiving PN. Makes recommendations concerning electrolyte therapy as necessary and documents intervention in electronic health record (EHR).
4. Verifies when all ordered PN solutions are received from “CAPS” and places ORCHID (EHR) pharmacy label containing order information, including a product barcode.
5. Contacts the provider as necessary to discuss the following:
 - a. Continuation of PN therapy
 - b. Order change(s)
 - c. To discuss the development or adverse events or laboratory abnormalities
 - d. Recommendations on any necessary adjustments in the PN formulation.
6. Pharmacy technician delivers all PN solutions to respective patient areas after receipt from CAPS.
7. Pharmacy supervisor assures all pharmacist staff is trained, oriented to the service, and competent.
8. Interacts with other healthcare providers involved with nutrition support to ensure continuity of care provided to the patient.

Nurse

1. Administers parenteral nutrition.
2. Documents intake, feeding problems, and tolerance to the feeding.
3. Monitors vital signs, daily weights, I&O's and patient tolerance to PN.

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Nurse continued

4. Performs central line catheter site care.
5. Notifies physicians when PN administration is interrupted to obtain order to administer Dextrose 10%.
6. Interacts with other healthcare providers involved with nutrition support to ensure continuity of care provided to the patient.
7. Participates in discharge planning.

Home Health

1. Coordinates PN, including supplies, formula, initiation, and monitoring once the primary care inpatient physician communicates that a patient will be discharged home on PN.
2. Communicates with physician designee regarding outpatient monitoring and follow-up.
3. Home health pharmacy reviews, verifies and dispenses PN to patient

References:

Joint Commission Standards on Medication Management and Provision of Care

McClave SA, Martindale RG, VanekVW, McCarthy M, Roberts P, Taylor B, Ochoa JB, Napolitano L, Cresci G; ASPEN Board of Directors; American College of Critical Care Medicine. Guidelines for the provision and assessment of nutrition support therapy in the adult critically ill patient: Society of Critical Care Medicine (SCCM) and American Society for Parenteral and Enteral Nutrition (ASPEN). J Parenter Enteral Nutr. 2009; 33:277-316.

American Gastroenterological Association Clinical Practice and Practice Economics Committee. AGA Technical Review on Parenteral Nutrition. Gastroenterology. 2001; 121: 970-1001.

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Review Date: 3/96, 3/99, 3/05, 06/04/2019	Revision Date: 3/05, 12/07
Next Review Date: 06/04/2022	
Distribution: Olive View Hospital-Wide Policies	
Original Date:	