



## Enteral Nutrition Care Plan Example

Mr. Chavez is 59 years old and has Amyotrophic Lateral Sclerosis (ALS), ventilator dependence, and Percutaneous Endoscopic Gastrostomy (PEG) feeding tube. He is alert and oriented, but totally dependent for all ADLs. Mr. Chavez is 6' tall and currently weighs 160 pounds. He recently lost 8 pounds (5%). The Registered Dietitian calculated his nutritional needs as follows: 2182-2545 (30-35 Kcal/kg) calories/95-102 (1.3-1.4 g/kg) grams protein/2182 ml fluid. She recommended increasing the Fibersource HN enteral formula to 85 ml/hr over 22 hrs each day (allowing 2 hours of down time for ADL care), which would provide 2244 calories/101 grams protein/1515 ml free water. She also recommended providing 30 ml free water, pump assisted via PEG X 22 hours to provide additional 660 ml of free water.

<b>DX Date</b>	<b>Problem</b>	<b>Goals</b>	<b>Approaches/Interventions</b>	<b>Discipline</b>	<b>Resolution/ Review</b>
11/01 2023	Enteral nutrition secondary to ADLS & ventilator dependence	Mr. Chavez will maintain his weight between 160 to 176# through target date. CBW 161# 1/7/2022.	Provide Fibersource HN @ 85 ml/hr. X 22 hrs/day to provide a total amount of 1870 ml of formula each day. Presently tolerating EN continue as ordered 1/16/2022.	Nursing	Person receives adequate fluids. Review monthly.
	Potential for unintended weight loss related to:	Mr. Chavez will tolerate enteral nutrition and water flushes providing 2244 kcals, 101 g protein, and at least 2175 ml fluid with no diarrhea, vomiting or abdominal pain through target date.	Monitor gastric residuals and complaints of GI upset for tolerance of continuous enteral feeding daily.	Nursing	Review weekly
	Enteral nutrition	Mr. Chavez will maintain hydration status as evidenced by normal laboratory values, no electrolytes imbalance or decreased urine output through target date.	Provide minimum of 30 ml water flushes before and after medications and 10 ml between medications.	Nursing	Review monthly
	Recent weight loss	Mr. Chavez will maintain hydration status as evidenced by normal laboratory values, no electrolytes imbalance or decreased urine output through target date.	Provide 30 ml free water, pump assisted via PEG X 22 hours to provide additional 660 ml of free water.	Nursing	Review monthly
	Total ADL dependence	Mr. Chavez will have no signs/symptoms of dehydration through target date.	Weigh weekly until weight is stable between 160 to 176 pounds, then weigh monthly.	Nursing/ nurse aide	Review weekly until stable, then monthly.
	Potential for dehydration related to:	Mr. Chavez will maintain hydration status as evidenced by normal laboratory values, no electrolytes imbalance or decreased urine output through target date.	RD will assess tolerance and adequacy of enteral nutrition monthly until stable and then quarterly and will assess hydration needs annually or as health condition changes.	RD	Review quarterly and reassess annually or with change of condition.
	Enteral nutrition.	Mr. Chavez will have no signs/symptoms of dehydration through target date.	Discuss with physician the need for monthly laboratory analysis to assess protein and hydration status. Physician ordered CMP every six months. WNL 1/10/22.	RD	Review when available.
	Recent weight loss	Mr. Chavez will have no signs/symptoms of dehydration through target date.	Assess for weight changes, vital signs, skin turgor, urine output and color, confusion, sunken eyes, and cracked lips daily.	Nursing/ nurse aide	Monitor daily. Review monthly.
	Total ADL dependence	Mr. Chavez will have no signs/symptoms of dehydration through target date.			