

STICU/Trauma Floor Enteral Nutrition (EN) Titration Guideline

Titration guideline for patients without intra-abdominal pathology or signs or malnutrition*

Initiate EN at goal rate

Follow volume-based feeding schedule

Do not check gastric residual volumes

Monitor for signs of clinical intolerance & notify MD/NP is present

Clinical signs of intolerance:
 1. abdominal distention
 2. nausea & vomiting
 3. abdominal cramping
 4. diarrhea: >5 loose stools/24h

*Discuss EN titration with dietician prior to starting EN in malnourished patients.

Titration guideline for patients with intra-abdominal pathology

Initiate EN at 25 ml/h

Clinical signs of intolerance present?

Check residuals after 6h. Residual >500ml?

Is EN at goal?

Stop checking GRV. Monitor for clinical signs of EN intolerance

Replace residuals & continue at current rate. Monitor for clinical signs of intolerance

Replace residual and increase rate by 25 ml/h or to goal

Replace & hold EN for 2 hours. Then reassess for clinical signs of intolerance and GRV

GRV > 500ml & signs of intolerance improving?

Continue to hold EN. Notify MD/NP. Evaluate & treat cause of intolerance. Consider prokinetic agents and ensure appropriate bowel regimen.

Restart algorithm

Clinical signs of intolerance:
 1. abdominal distention
 2. nausea & vomiting
 3. abdominal cramping
 4. diarrhea: >5 loose stools/24h

