Nutrition Rounds – PEDS Rotation

History and Presenting Illness

ML is a 3 year old female with a history of prematurity (born at 30 weeks), necrotizing enterocolitis (stage I), perinatal subependymal hemorrhage (grade I), s/p bronch and adenoidectomy 5/29/15 with findings of subglottic stenosis (grade II), tracheitis, and recurrent croup admitted 7/23/15 for a laryngotracheal reconstruction with anterior costal cartilage graft from floating rib. Post-operative course complicated by klebsiella ventilator associated pneumonia and parainfluenza 4.

Hospital Day #2-12 (7/24-8/3)

- Central line and NG tube placed post op
- Nasotracheal tube on mechanical ventilation (extubated 8/3)

Nutrition Assessment

1. Baseline Anthropometrics

o Ht: 101.6 cm

Height Percentile: 75%Wt: 17.6 kg (38 lb 12.8 oz)Weight Percentile: 85%

IBW: 15 kgIBW%: 117 %

o BMI: 17

BMI Percentile: 87%

2. Food/Nutrition History

Current Diet Order: NPO

 Tube Feeding Order: Pediasure 1 @ 60 ml/hr x 24 hrs (started on 7/24/15)

o Goal Tube Feeds Provide:

Total kcal: 1440 kcal

Kcal/kg: 82

Total Protein (gms): 43.2

gm Protein/kg: 2.5

3. Feeding Volume

7/24	7/25	7/26	7/27	7/28	7/29
Trickle	Maintained at 5	Advanced	Advanced	From	At
feeds @	ml/hr	from 5	from 15	25	goal
10 ml/hr:		ml/hr to	ml/hr to 55	ml/hr	of 60
Stopped –		15 ml/hr	ml/hr:	to	ml/hr
tachycardia			Stopped –	goal	
			NPO for	of 60	
			procedure	ml/hr	

		7/30	7/31	8/1	8/2	8/3
Calculating Weight: 17.6 kg Kcal/kg: 80 Kcal/kg: 80 Protein g/kg: 1.05 Protein g/day: 19 Fluid ml/kg: 80 Fluid/day: 1411 Nutrition Diagnosis/PES Nutrition Intervention Nutrition Monitoring and Evaluation Impression Pt has received limited TF since admit due to not tolerating feeds, for various procedures, and other complications. Only met feeding out of 11 days. Hospital Day #13 (8/4) – Day 1 Nutrition Assessment 1. Noted Medical Events/ Subjective Data Currently weaning HFNC and sedation requirements 2. Anthropometrics Wt: 17.6 kg (38 lb 12.8 oz) Weight Percentile: 85% 3. Nutritionally Relevant Medications Morphine, miralax, protonix, and ciprodex, cleocin, fortaz (antibiotics)		then back at goal of 60 ml/hr for	emesis/possible	at 35 ml/hr advanced to 40	emesis and	Rate started at 15 ml/hr to 30 ml/hr
Diagnosis/PES feeds. Nutrition Intervention Recommend to advance feeding as soon as medically feasible Nutrition Monitoring and Evaluation • Monitor weight, labs and I & O Impression Pt has received limited TF since admit due to not tolerating feeds, for various procedures, and other complications. Only met feeding out of 11 days. Hospital Day #13 (8/4) − Day 1 Nutrition Assessment 1. Noted Medical Events/ Subjective Data ○ Currently weaning HFNC and sedation requirements 2. Anthropometrics ○ Wt: 17.6 kg (38 lb 12.8 oz) ○ Weight Percentile: 85% 3. Nutritionally Relevant Medications ○ Morphine, miralax, protonix, and ciprodex, cleocin, fortaz (antibiotics)		 Calcula Kcal/kg Kcal/da Protein Fluid mi 	ting Weight: 17.6 : 80 y: 1411 g/kg: 1.05 g/day: 19 l/kg: 80			
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8/4		 Anthropom Wt: 17.6 Weight Nutritionally Morphine (antibiotic Biochemica 	etrics 6 kg (38 lb 12.8 o Percentile: 85% y Relevant Medica e, miralax, protonics)	z) ations		

	K 2.9**		
	CI 108		
	CO ₂ 22		
	BUN 7		
	Creat 0.45		
	Glu 140		
	Ca 9.4		
	E Food/Nutrition History		
	5. Food/Nutrition History ○ Current Diet Order: NPO		
	 Tube Feeding Order: Pediasure 1 @ 60 ml/hr x 24 hrs Goal Tube Feeds Provide: 		
	Goal Tube Feeds Provide: Total kcal: 1440 kcal		
	Kcal/kg: 82		
	Total Protein (gms): 43.2 gm Protein/kg: 2.5		
	gill Flotellikg. 2.5		
	6. GI Summary		
	o # Bowel Movements (past 24 hr): 1		
	Emesis: 0 ml		
	C Linesis. O mi		
Nutrition	Swallowing difficulty related to intubation as evidenced by need for NG		
Diagnosis/PES	feeds (now extubated)		
Nutrition Goal	Patient to tolerate goal feeding infusion in 24 hours.		
Nutrition	Continue current feeds with plan to advance to goal today.		
Intervention	Continue our entreeds with plan to devence to godi today.		
Nutrition	Monitor tolerance to diet / feeding as advanced		
Monitoring	Monitor tolerance to diet / reeding as advanced Monitor weight, labs and I & O		
and	Wormor weight, labo and i a o		
Evaluation			
Impression	Pt discussed on rounds with PICU service. Feeds advanced from 40 to		
Improcoion	50 ml/hr now, with increase to 60 ml/hr in next 4 hrs to meet goal. May be		
	able to start PO diet in the next few days.		
	Hospital Day #14 (8/5) – Day 2		
Nutrition	Noted Medical Events/ Subjective Data		
Assessment	Pt pulled dobhoff tube		
2.1000001110111	 Drinking water and juice with no difficulty 		
	 Experiencing withdrawal symptoms (sweating, vomiting, loose 		
	stools, twitching)		
	2. Nutritionally Relevant Medications		
	Morphine, miralax, protonix, and ciprodex, cleocin, fortaz		
	(antibiotics)		

	3. Biochemical Data		
	8/5		
	Na 142		
	K 3.5		
	CI 109		
	CO ₂ 21		
	BUN 9		
	Creat 0.45		
	Glu 97		
	Ca 9.4		
	4. Food/Nutrition History		
	Current Diet Order: General Diet with caution		
	Tube Feeding Order: d/c TF of Pediasure @ 60 ml/hr x 24 hr		
	continuous		
	33.13.13333		
	5. Intake		
	 Not interested in eating (consumed 0-25% of meals) 		
	6. GI Summary		
	o # Bowel Movements (past 24 hr): 2		
	o Emesis: large (1x)		
Nutrition	Inadequate oral intake related to agitation from medication withdrawal		
Diagnosis/PES	as evidenced by nursing po documentation		
Nutrition Goal	Patient to consume at least 50% of meals.		
Nutrition	Continue advancement of diet with caution and monitoring		
Intervention	Continue advancement of diet with caution and monitoring		
Nutrition	Monitor tolerance to diet / feeding as advanced		
Monitoring and	Monitor weight, labs and I & O		
Evaluation	Start maintenance fluids if pt not taking adequate po		
Impression	Patient discussed on rounds with PICU service. Patient pulled NG tube		
-	- TF discontinued. Speech unable to evaluate diet advancement until		
	Monday so planning to advance to general diet with caution. Will		
	monitor intakes.		

Celina saw 8/6 over weekend

1. Diet Order: Pediatric General Diet

2. Intake

- Not interested in eating (8/5-8/10 around 0-50% "bites" of yogurt, apple juice, and ice cream)
- o On MIVF (D5W in 0.45% NS + KCl 20 mEq/L) 2/2 inadequate po intake
- 3. Appetite: Fair

Hospital Day #19 (8/10) – Day 3 (Transferred from PICU to General PEDS unit)		
Nutrition	, , , , , , , , , , , , , , , , , , ,	
	Noted Medical Events/ Subjective Data	
Assessment	 Experiencing some agitation, requiring a 1:1 sitter 	
	 2. Nutritionally Relevant Medications Changed from D5W in 0.45% NS + KCl 20 mEq/L to D5W in 0.9% + KCl 20 mEq/L Prevacid 	
	3. Food/Nutrition History O Current Diet Order: Pediatric General Diet	
	4. Intake ○ 0-50% over past 2 days	
	5. Appetite: Good	
	6. GI Summary o # Bowel Movements (past 24 hr): 2 o Emesis: 10 ml (1x)	
Nutrition	Inadequate oral intake related to agitation from medication withdrawal	
Diagnosis/PES	as evidenced by nursing po documentation	
Nutrition Goal	Patient will increase PO intake to 50-75% of meal consistently within 4	
Nutrition Goal		
N. 4 141	days.	
Nutrition	Continue current diet order	
Intervention	Monitor weights, labs, Intake/Output	
	Order snacks per pt mother request (yogurt for afternoon snack and	
	ice cream for evening snack)	
	Recommend obtaining new weight	
Impression	Pt has recently had inadequate po intake of 0-50% over past 2 days. Spoke with mom and pt had just consumed a 90% of a 6-inch subway sandwich consisting of cheese, lettuce and mayo with half a bag of ruffle chips, apple juice and a few sips of sprite. Pediatric general diet order is appropriate and pt is tolerating well. Ordered snacks per pt mother request. Will continue to encourage and monitor po intake. Recommend obtaining new weight (none taken since 7/24/15).	
Hospital Day #21 (8/12) – Day 4		
Nutrition	Noted Medical Events/ Subjective Data	
Assessment	None	
	2. Anthropometrics O Ht: 103 cm O Height Percentile: 81%	

	 Wt: 16 kg (35 lb 4.4 oz) Weight Percentile: 63% BMI: 15 BMI Percentile: 40% 	
	Nutritionally Relevant Medications Prevacid	
	4. Food/Nutrition History Current Diet Order: Pediatric General Diet	
	5. Intake o 25-75% over past 2 days	
	6. Appetite: o Good	
	7. GI Summary o # Bowel Movements (past 24 hr): 1 o Emesis: 0 ml	
Nutrition Diagnosis/PES Nutrition Goal	Inadequate oral intake related to agitation from medication withdrawal as evidenced by nursing po documentation (resolved) Patient will continue PO intake of 50-75% of meal consistently.	
Nutrition Intervention	 Continue current diet order Monitor weights, labs, Intake/Output 	
Impression	Pt has increased intake to 25-75% over past 2 days. Pediatric general diet order is appropriate and patient is tolerating well.	