PICU Enteral Nutrition Clinical Practice Protocol Guidelines

**Indicators to hold initiation of EN**
1. Lactate >2 mg/dL
2. Cardiac arrest within past 48-72 hours (discuss with provider)
3. Severe acidosis/shock/diminished intestinal perfusion
4. Abdominal trauma
5. Intestinal surgery

Discuss preferred placement of feeding tube with Provider
1. NG/OG/NJT
2. OJT preferred method with head injury/TBI
3. Confirm placement via nursing protocol
4. If clinically appropriate, ask provider to order portable abdominal x-ray to confirm placement

Discuss with Provider all medication alterations
1. Change all appropriate medications to be administered via feeding tube
2. Adjust appropriate medications (i.e. hold feeds 1 hour before and 2 hours after enteral administration of phenytoin)

**Place feeding tube and start EN per Dietitian recommendations within 24 hours of admission if hemodynamic stability**

**Indirect Calorimetry (IC) Parameters:**
1. Underweight (Body Mass Index BMI < 5th percentile for age), at risk of overweight (BMI > 85th percentile for age) or overweight (BMI > 95th percentile for age)
2. Children with more than 10% weight gain or loss during ICU stay.
3. Failure to consistently meet prescribed caloric goals
4. Failure to wean or need to escalate respiratory support.
5. Need for neuromuscular blocking agents for over 7 days.
6. Neurologic trauma (traumatic, hypoxic and/or ischemic) with evidence of dysautonomia
7. Oncologic diagnoses (including children with stem cell or bone marrow transplant)
8. Children with thermal injury
9. Children requiring mechanical ventilator support for over 7 days.
10. Children suspected to be severely hypermetabolic (status epilepticus, hyperthermia, systemic inflammatory response syndrome, dysautonomic storms etc.) or hypometabolic (hypothermia, hypothyroidism, pentobarbital or midazolam coma, etc.)
11. Any patient with ICU length of stay over 4 weeks may benefit from IC to assess adequacy of nutrient intake.

**Consider parenteral nutrition consult if:**
1. Enteral tube feedings unable to meet nutritional requirements for the patient (i.e. trophic/non-nutritive feeds)
2. The patient is not tolerating enteral tube feedings for greater than 48 hours (aspiration, abdominal distention, vomiting and diarrhea 6x/d)
3. Use of GI tract for feeding is contraindicated

**Order Baseline Laboratory Assessment:**
1. CMP
2. Prealbumin; CRP
3. Magnesium
4. Phosphorus

**Consult Dietitian for assessment of nutritional requirements and enteral feeding recommendations**